To the Joint Task Force on Universal Health Care:

From: Ethan Scarl

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Chair Goldberg, Vice Chair Junkeer, and dedicated members of the Task Force, my name is Ethan Scarl. I am here today to support you in your work.

My own health care history places me as one of the lucky ones, covered by university and even Cadillac corporate health plans, and now Medicare. But for 11 years I lived in British Columbia, where I completed a doctorate and taught, and never had to think for a moment about medical costs. Everyone was covered equally, including me.

Their coverage is provincially based, and the provinces all respect each other's plans, so Canadians can travel freely around their country. But most Canadians are fearful of spending time in this country without buying supplementary travel insurance, which can be pretty expensive.

So how did all the Canadian provinces come to have single payer? It wasn't easy. In October of 1961, one medium small province, Saskatchewan, had just elected a new government led by the Canadian icon Tommy Douglas, and Douglas' New Democratic Party passed a single-payer healthcare system for Saskatchewan.

The province's doctors were not happy about it. Not merely furious, the Saskatchewan College of Physicians and Surgeons went out on strike! And a nasty strike it was, going on for weeks. The government brought in doctors from the US and Britain, and there were cases in which nurses were fired and blacklisted for treating critical emergency patients. This did not sit well with the public, and unions came out supporting the government. In the end, the doctors had to negotiate a settlement. The people gained a lot, and the doctors were unhappy in the short run, but were well compensated and by 1965 many had come around.

So, Canadian single-payer was launched in Saskatchewan, and it was so clearly successful that all the other provinces followed suit relatively peacefully within a few years.

Now, Oregon is a medium-small state, but large enough to support single-payer. Success would be a model for other states to follow, even if the federal government remains blocked. Big pharma and insurance profiteers may well fight intensely, but it will be the best path forward for our nation's healthcare.

I so appreciate the work of this Task Force, and look forward to seeing a solid single payer model, avoiding pitfalls like public options that would inevitably kill universal coverage through cherry-picking.

What Saskatchewan did for Canada, Oregon may be able to do for the United States thanks to you.

Thanks for permitting me to testify.

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