It appears that the Task Force is planning to recommend to the Legislature that the Universal Health Care be implemented. I have the following comments as an employee and tax payer in Oregon.

- 1. Your report does not address any ability to opt out. We couldn't opt out of ACA and obtain our own private health insurance without paying for the mandates. Even your report acknowledges that one of the reason this is being studied is because of the rising cost of healthcare (outpacing other rising costs). How this proposal addresses that is beyond understanding. Your phony math doesn't work. Taxes go up for the working class to pay for more handouts.
- 2. The fact remains that there are NO uninsured people in Oregon. Access to healthcare cannot be denied. Most of those who do not have healthcare have reasons. The others probably just flat out don't understand the complexities that our government (YOU!) create.
- 3. Do benefits include free abortions? No doubt, though you don't mention that even though it, theoretically, is so important to women's healthcare. Why not acknowledge your plan? (let me guess.... you'll be able to offer free reproductive healthcare to teenage girls and boys without parent participation because you'll run it through the schools.)
- 4. "The Task Force is working to set up a plan that would reduce the cost of health care for most people in Oregon" ... aka, soak the working class through a progressive payroll tax. Thus, drive more people and business out of Oregon. It's clear that you are reaching into pocketbooks (that YOU assume can afford it) to bail out those that you choose to bail out. This system to will continue to exacerbate the income gap. Who is incentivized to get a job and pay for this when the state will just hand it to you?!
- 5. "The Universal Health Plan seeks to reduce waiting times" Demonstrate one single example where government-run programs have had acceptable (to most) waiting lines. You mention in your Q&A that the less complication in the system will reduce waiting lines. What you are likely failing to acknowledge is that "free" means "come and get it". There is a disincentive right now to go to an emergency room for a minor incident. This will literally open the door to even more people coming to the emergency room (or other health care facilities) as it's FREE! No reason to not come. Please define (in minutes or hours) an "acceptable wait time"? What is the goal you are striving to meet? If you can't define it, you can't measure progress.
- 6. Seeking treatment under Universal Health Care I personally know of extended family who live in universal healthcare systems outside the US. Yet, for some reason, they all come to the US for major healthcare? Why? Waiting lists for cancer treatment. Even Canada just acknowledged that they'd be better off expanding euthenasia to reduce the cost of universal healthcare costs.
- 7. Next time you declare an emergency (like COVID-19), will you shut down all government-run healthcare??? This state's decisions have contributed to an excess death rate. How will universal health care address that travisty? (i.e. access to healthcare that meets MY needs, not YOUR needs)

Last comment.... After living here for nearly 20 years, I cannot name one single government-led item that has become less expensive to taxpayers or increased system efficiency. (DMV computer system, Oregon's 2015 Cover Oregon debacle that wasted \$300M+ just to name two things in my tenure here)

I sincerely hope that taxpayers do not accept your plans although given the past few years, I suspect you'd ram it down our throat under an emergency declaration just like the 2021 Climate Bill.