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On Behalf Of: Myself

Committee: Senate Committee On Health Care

Measure: SB704

The cradle to grave intrusion of government into the lives of citizens not only increases the size AND cost of government, it creates gaps in healthcare and rationing to control its cost.

This had NOT worked out well in Finland where government run healthcare was found to cause the collapse of one of the most statist governments in the free world. https://intellectualtakeout.org/2019/03/single-payer-healthcare-topples-nordic-government/#disqus\_thread

Failures of such a program(s) force citizens to turn to private care for lifesaving treatment which forces them to pay out of pocket anyway.

And some have to leave their home country to get it.

Canadian citizens have come to the U.S. to receive healthcare and even lifesaving treatments and procedures.

https://torontosun.com/news/national/canadians-continue-to-leave-the-country-for-health-care-says-new-report

The inherent failure of universal healthcare caused the rise in Obamacare premiums and was NOT Trump's fault.

While the Affordable Care Act passed in 2010, most of its insurance reforms didn't begin until 2014. Health insurers began reflecting those changes in their 2014 premiums, which were announced in 2013.

The initial premium increases were moderate, reflecting higher costs imposed by the new coverage mandates, such as covering preventive care with no out-of-pocket costs, ending lifetime spending limits, etc. In addition, insurers bumped up premiums because of increased costs associated with having to accept applicants with major medical conditions.

Actuaries didn't know how to price all of those changes, and insurers quickly realized that claims costs were much higher than anticipated.

More dramatic premium increases began in ObamaCare's second year, 2015, but even that didn't stop the financial bloodbath.

Trump was elected in November 2016, after insurers had already announced their 2017 premiums.

That 105% percent increase over four years was pre-Trump, and consistent with the current 25% to 30% one-year increase in some Maryland and Virginia policies.

This failure is symptomatic of non-representative social engineering agenda driven government that has overstepped it's proper role.

Universal healthcare at the state or federal level is NOT the answer.