

The Ohio Health Care Plan and the Ohio Health Security Act

Healthcare providers know that our current healthcare system costs too much. It does not deliver good healthcare for our patients and burdens the practice of medicine with administrative waste. There is a solution that will help patients be healthier and allow providers to focus on the practice of medicine. Single Payer Action Network (SPAN) Ohio is excited to announce the initial findings of an “Economic Analysis of Single Payer Health Care in Ohio: Context, Savings, Costs, Financing” by Gerald Friedman professor of economics at the University of Massachusetts at Amherst.

What is in it for health care providers?

- The complexity of billing numerous insurers with different coverage levels, copays, deductibles and limited provider network rules is simplified.
- Physician billing bad debt would be virtually eliminated by covering the 6% of Ohioans that are uninsured and eliminating copays and deductibles that are too high.
- Medicaid payments would increase by about 30% to Medicare rates.
- Less money and time on billing would allow an added 6 hours per week in patient care.
- Overall, the percentage of total spending going to administration for physician offices and hospitals would drop from 21% to 14%.
- Overall, the money going to doctors and hospitals would increase from 56% of total spending to 80%.
- Since no specialists would be outside the “network”, Physicians are free to use best judgement in referrals.
- Physicians will be able to use best practices in medicine, free of insurance company constraints.

What is in it for the Patient?

- There would be no surprise bills for patients due to out of network care.
- Patients would be more likely to keep appointments, get prescribed tests, and take their medications because out of pocket costs are eliminated.
- There would be substantial savings on pharmaceutical and device prices as the Ohio Plan would negotiate prices just as the VA and other countries do now.
- Financial stress negatively impacts quality of care. Single-payer substantially minimizes this burden.
- The quality of care would improve. The greatest inequity is not giving people the medical care they need because they cannot afford it.

The analysis shows that “The question then is not whether Ohio can afford single payer because a single-payer plan is cheaper than continuing with the status quo. Rather the question is whether the people of Ohio can continue to pay for an inefficient and wasteful health care system that often fails to care for them.” They can certainly afford one that is more effective and less wasteful with their money.