

## Testimony in Support of LD 1269

### Resolve, to Study the Costs and Funding of a Universal Health Care Plan for Maine

Daniel C. Bryant, M.D.

Senator Bailey, Representative Mathieson, members of the HCIFS Committee, my name is Daniel C. Bryant, M.D., of Cape Elizabeth, and I thank you for allowing me to testify in support of LD 1269. I should advise you I was involved in Maine AllCare's creation of the "All Maine Health Program" referenced in the bill.

It is generally agreed that health care costs are high and uncontrolled. To address that problem, the Maine Legislature created the Office of Affordable Health Care, which has produced excellent reports on the Public Option, increasing MaineCare eligibility, and Marketplace subsidies, none of which, though, address controlling health care costs overall.


For many years, some policy makers have argued that a publicly funded universal health care system ("single-payer") could control costs by reducing provider and payor administrative costs; reducing diversion of health care funding to middlemen; negotiating professional, institutional, and drug prices; consolidating most of the known and hidden<sup>1</sup> costs of care; and prioritizing primary care's prevention potential. Studies of this model<sup>2</sup> at the state level have generally concluded that health care costs would be controlled if not reduced. Indeed, a 2002 Mathematica study<sup>3</sup> found that "... a single payer system appears to be economically feasible for Maine," and 2019<sup>4</sup> and 2024<sup>5</sup> studies of publicly funded models by the Maine Center for Economic Policy found they would reduce costs for large segments of the population.

LD 1269 would direct the Office to do an updated study of such a system, in particular, of "the model provided by the All Maine Health Program prepared by Maine AllCare." That model was the basis for this session's LD 1883, An Act to Enact the All Maine Health Act; and perhaps, if there is a work session for LD 1269, that wording should be updated.

Cost will be top of mind for Maine legislators and residents considering the pros and cons of LD 1883; enactment of LD 1269 would give them facts on which to base support for or opposition to such reform. Should the study show that the bill would lower or control health care costs, the Legislature could pursue that approach; should it show otherwise, proponents could refine their proposal for future submission.

If the Legislature is truly committed to controlling these costs, it should pursue study of all reasonable models, including the publicly funded model. The OAHC would be the obvious entity to do that given its founding charge to develop "proposals to improve the cost-efficient provision of high-quality health care." Should funding such a study be an impediment, the Committee could amend the bill in the work session to include the possibility of private funding.

In summary, the importance of investigating the fiscal feasibility of publicly funded universal health care cannot be overstated. I urge you to vote Ought to Pass on LD 1269. Thank you.



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<sup>1</sup> Bryant, D. "Single-Payer Health Care Reform: Cost Considerations in Maine." *Maine Policy Review*. 2024;33(1): 38-43. Available at <https://digitalcommons.library.umaine.edu/mpr/vol33/iss1/9>.

<sup>2</sup> Listing of single-payer cost studies: Healthcare-Now, available at <https://www.healthcare-now.org/single-payer-studies/listing-of-single-payer-studies/>

<sup>3</sup> Mathematica Policy Research, Inc. Feasibility of a Single-Payer Health Care Model for the State of Maine. 2002. Available at <http://www.mathematica.org/-media/publications/pdfs/mafecfeasibility.pdf>

<sup>4</sup> Myall J. Assessing the Costs and Impacts of a State Level Universal Health Care System in Maine. 2019. Available at <https://legislature.maine.gov/doc/3626>.

<sup>5</sup> Myall, J. Re-Assessing the Costs and Impacts of a Universal Health Care System in Maine. 2024. Available at <https://mainecare.org/wp-content/uploads/2024/12/Re-Assessing-the-Costs-and-Impacts-of-a-Universal-Health-Care-System-in-Maine-FINAL-Nov-24.pdf>