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Members of the Health Care, Financial and Insurance Committee.

My name is Jeff Gardner, I live in Cumberland, ME and Wiesbaden, Germany. I am pleased to provide testimony in favor of LD 1405. I am a Maine native and West Point graduate who has experienced large, government operated health care programs in the US, Germany and Italy. I am currently retired and my primary residence is in Germany. I have been covered by the German National Health Insurance program for over 40 years and I must say this experience has given me a very different perspective on the importance of affordable health to the physical and mental well being of the general population and the productivity of the workforce.

As an employer in Germany and Italy health care costs were shared between the employer and the employee. The national health plans in these countries basically covered the costs of preventative care as well as treatment of all health related issues. Workers did not avoid preventative care because of outrageous deductibles/copays. Workers very seldom came to work sick avoiding possible infection of coworkers. A serious illness did not threaten people with financial hardship or bankruptcy. In the end the availability of reasonably priced health care removed an existential issue from people's lives and as a result they were more productive.

As a consumer of health care I have had two rotator cuff surgeries and a knee scoped in the last two years. The process was thorough- MRI's within a week for each diagnosis, and then arthroscopic surgery. The repairs were successful and all told I paid approximately \$150 out of pocket for all 3 surgeries. I have passed on Medicare because my current coverage is as good as Medicare or better.

I have long felt that my American family and friends are being taken advantage of by the health care system in the US. If more Americans had the opportunity to experience what is possible with a universal health care system they would stop listening to all the fear and doom forecasts of those profiting from the status quo.

I have two comments on the general design of any program. Private insurance can still be an option either in whole or as a supplement. But in Germany you have to 'opt out' of the national health plan and if you opt out for a totally private plan- you can never get back into the national plan. This allows people choice but avoids damaging the quality of the risk pool because most folks are prudent and understand that as they age their private insurance will become much more expensive than the national plan. The other issue for consideration is tort reform. In Germany because the Health care coverage is complete and comprehensive the very large punitive awards that you see in the US are simply not allowed.

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