**Sample resolution in support of single-payer improved Medicare for All**

WHEREAS, 28.5 million Americans lacked health insurance in 2017 (1), and

WHEREAS, compared to ten other high-income countries, the United States ranks last in health care affordability, and has the highest rate of infant mortality and mortality amenable to health care (2), and

WHEREAS, employer-sponsored health plans are increasingly unaffordable for workers since 85% of these plans include an an- nual deductible and the average deductible was $1,573 for single coverage in 2018 (3), and

WHEREAS, in 2017 the United States spent $3.7 trillion on health care, or 17.9% of GDP (4), twice as much per capita on health care as the average of wealthy nations that provide univer- sal coverage (5), and

WHEREAS, 62% of all bankruptcies in 2007 were medical and 75% of people bankrupted by medical bills had private insur- ance at the onset of illness or injury (6) and medical bankruptcy did not fall in Massachusetts after that state’s implementation of reform in 2006 (7), and

WHEREAS, overhead consumes 12.2% of private insurance premiums (8), while the overhead of fee-for-service Medicare is less than 2% (9), and

WHEREAS, providers are forced to spend tens of billions more dealing with insurers’ billing and documentation requirements (10), bringing total administrative costs to 31% of U.S. health spending, compared to 16.7% in Canada (11), and

WHEREAS, the U.S. could save over $500 billion annually on administrative costs with a single-payer system (12), and

WHEREAS, billing-driven documentation that contributes to physician burnout would be greatly reduced under a single payer reform (13), and

WHEREAS, the savings from slashing bureaucracy would be enough to cover all of the uninsured and eliminate cost sharing for everyone else (14), and

WHEREAS, a single-payer system could control costs through proven-effective mechanisms such as global budgets for hospi- tals and negotiated drug prices (14), thereby making health care financing sustainable, and

WHEREAS, a single-payer reform will reduce malpractice law- suits and insurance costs because injured patients won’t have to sue for coverage of future medical expenses, and

WHEREAS, a single-payer system would facilitate health plan- ning, directing capital funds to build and expand health facilities where they are needed, rather than being driven by the dictates of

the market, and

WHEREAS, a single-payer reform will dramatically reduce, al- though not eliminate, health disparities. The passage of Medicare in 1965 led to the rapid desegregation of 99.6% of U.S. hospitals (15), and

WHEREAS, a single-payer system will allow patients to freely choose their doctors, gives physicians a choice of practice setting, and protect the doctor patient relationship, and

WHEREAS, there is single-payer legislation in both houses of Congress, therefore

BE IT RESOLVED that [this organization] express its support for universal access to comprehensive, affordable, high-quality health care through a single-payer national health program, including single-payer legislation at the state level.

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