

Ellen's Plans for Fixing Health Disparity in America

Universal Healthcare via the Public Option

Ellen is committed to creating universal healthcare using a public option that builds on the Medicare system.

The United States has amazing doctors, nurses, hospitals and other healthcare providers. We also have huge disparities in both access to care and quality of care linked to economic status, geographic location, race, gender, and age, among other factors. Health insurance has become less a means of sharing the risk of severe illness or injury and more a gateway for access to even basic medical care. High drug prices for essential medications create further obstacles to care, as do high copayments and deductibles. Unpredictable out-of-network billings associated with hospitals can bankrupt even those who have good health insurance and go to in-network hospitals. Medicare is fantastic but has significant gaps, including in connection with drug costs and long-term care options--and Medicare does not fully cover the cost to hospitals of providing services.

Ellen believes we must move rapidly to remake our healthcare system to provide access to affordable healthcare for all Americans. She also recognizes that healthcare is around 18% of the economy, and we must approach changes in a careful and analytical way, understanding that details matter, as do costs. Ellen favors a "public option" that automatically enrolls everyone who will qualify for free coverage, provides an option for others to choose either Medicare or private health plans, and allows employers to make Medicare one of their employer-funded options for employees. This approach is preferable to most Americans and Ellen believes that for such a huge change in our economy and healthcare, we must have majority support. (Lopes, 2020)

Ellen will sponsor bills that will:

- Create a "public option" for the Medicare system as described above (Mayoclinic, 2019)
- Preserve choice and service competition by allowing private plans to compete for customers.
- End 'surprise billing'. (Young, 2019)
- Ensure coverage of pre-existing conditions
- Tailor payment for services to the costs of providing those services, so that hospitals are not subsidizing the cost of care for Medicare
- Eliminate administrative waste and address conflicts of interest that favor more expensive care or denial of services. (Gee, 2019)
- Address the high costs of medical malpractice insurance while continuing to hold medical professionals accountable for the quality of care provided.

- Provide funding for aspiring doctors and nurses to attend medical and nursing school, and pay down student debt already incurred by doctors and nurses, in exchange for commitments to serve where needed for an agreed period and
- Create a resilient, cost-effective system that can withstand Constitutional challenges and under which access to care will be protected notwithstanding shifts in political power. (Tahir, 2019)

We are also going to need to evaluate the weaknesses in our healthcare system that the Covid-19 crisis has made increasingly evident. Ellen believes all costs of Covid-19 care, from testing to weeks'-long intensive care, including all co-payments and deductibles, should be covered fully by the US government out of taxpayer dollars to the extent not covered by private insurance or existing programs such as Medicare and Medicaid. We are all in this together, and the costs of care should not fall disproportionately on some individuals, families or hospitals and not on others. A rapid assurance from the government that all costs will be covered should also significantly reduce the risk that those critically ill will be turned away at hospitals and other healthcare providers over coverage issues.

We must also ensure this does not happen again by restoring the pandemic team that was eliminated by the current president and amending the Pandemic and All Hazards Preparedness Act to reflect lessons learned, including those related to management of national stockpiles. If the next president does not restore the White House Task Force, Ellen will support a House committee on Health and Public Safety.

Prescription Drug Pricing

Ellen is committed to reducing the cost of prescription drugs and ensuring that all Americans can afford to take essential medications

The cost of prescription drugs is currently a key weakness in our healthcare system. Many drug manufacturers have monopoly power with respect to essential medications, allowing them to set prices for drugs that are unrelated to the cost of manufacturing those drugs. And there are limited options for lower-cost generic equivalents. We must fix the prescription drug gap in coverage by allowing the federal government to negotiate the prices at which drugs are purchased by Medicare, and find ways to eliminate monopoly pricing without jeopardizing innovation or supply.

Ellen supports legislation that will:

- Give the federal government the ability to negotiate prescription drug prices.
- Give the federal government the ability to produce generic drugs when necessary to assure adequate supply of lower cost medication
- Revise patent laws that have allowed older drugs to be brought back under patent protection with minimal changes, preventing development of a market for generics

- Combine additional federal support for research and development for new drugs with restrictions that will prevent companies from making excessive profits on drugs developed in partnership with government
- Establish a maximum price schedule for drugs based on the average international price (AIM)
- Establish conflict of interest policies that prevent pharmaceutical companies and their representatives from providing gifts to physicians.

Ellen is also committed to supporting research for a Covid-19 vaccine and for treatments that lessen the severity and duration of illness, and to ensuring that a vaccine for Covid-19 and such treatments, when developed, are distributed fairly. Fair distribution for a vaccine would include prioritizing people by their exposure (e.g., medical professionals and others who work in hospitals, and those who work in other essential businesses for whom distance working is not possible) and by their risk (She notes that under these criteria, she would likely be fairly far back in the line for a vaccine.)

Addiction in America

Ellen is determined to refocus our system from punishing addiction in the criminal justice system to treating it in the healthcare system. She supports holding companies responsible for promoting highly addictive drugs, such as those that led to the opioid crisis, and also supports legalizing marijuana.

The United States has long struggled with forming a cohesive, compassionate and health-based response to abuse of addictive substances. Unfortunately we have continued to treat addiction as a criminal issue instead of a health issue. Working to confront addiction in the country will require adjusting to a health-based approach that encourages people to get treatment instead of threatening them with prosecution (although we should continue to prosecute illegal drug sales). We also need more community-based support for those with mental health issues and those dealing with trauma so that the members of our community who are suffering have care options other than self-medicating with dangerous drugs.

Ellen will promote legislation to:

- Legalize marijuana, which should be regulated similarly to alcohol
- Promote funding for programs such as the Yellow Line Project, which are designed to move those with addiction issues rapidly into community healthcare programs instead of trapping them in jails and prisons.(Werner, 2018)
- Support funding for community-based mental health treatment facilities, in-school counseling programs for at-risk youth and stronger community-based support networks

Health Services in Rural Communities and Healthcare Deserts

Ellen understands that access to care requires that all communities have reasonable access to nearby hospitals and healthcare providers, and is committed to developing hospitals in healthcare “deserts” and incentivizing providers to work in underserved areas.

When a community’s hospital closes, the community it supports suffers as well. People are reluctant to move to communities that lack a hospital, and businesses are less likely to invest there. Starke County is one of the “maternity deserts” in the district—it does not have a hospital that provides obstetric care. Lack of access to emergency care can increase mortality rates. We need to make sure that those in our rural communities, which comprise much of the district, have access to health care as needed.

To improve health in our rural communities Ellen will support legislation that will:

- Expand health insurance coverage for low-income Americans, including through automatic enrollment in a public option as described above, as lack of such insurance is strongly correlated with rural hospital closings
- Support programs to assist medical students with tuition forgiveness if they agree to serve five years in an underserved community.
- Support visas for qualified medical professionals who agree to five years service in a hospital designated as short of required staff. (Conrad 30 Waiver Program)
- Engage public health experts in determining ways to optimize access to care and provides for implementation of such recommendations
- Provide funding to reopen shuttered hospitals, develop community health clinics, support emergency care and increase access to tele-medicine (including increased access to broadband internet)

Citations

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