Congress of the United States Washington, DC 20515

June 23, 2009

The Honorable George Miller Chairman Committee on Education and Labor 2181 Rayburn House Office Building Washington, D.C. 20515

Dear Chairman Miller:

As you craft health reform legislation in your respective Committees, we are writing to ask you to include provisions that will improve health care for millions, drastically reduce medical bankruptcies, and control rising health care costs. We request that you remove federal barriers that prevent states from enacting single payer health care plans, and provide financial assistance for the implementation of such plans.

Your past support of national single payer health care suggests you are already aware that it eliminates enough spending on administrative waste to grant full coverage of all medically necessary care, provides a single high standard of care for all, controls costs, and shifts control of care from health insurance companies to the doctor and the patient. It is the only time-tested health care insurance mechanism to do so, short of the popular and effective government-run health care plans like those provided to the military and veterans.

Doctor and patient-run health care legislation enjoys significant support in Congress and across the country. The United States National Health Care Act, HR 676, has 83 cosponsors so far and had 93 in the 110th session of Congress, including the Chairs of key Committees and Subcommittees. Fifty nine percent of American doctors support single payer; it also has the endorsements of the U.S. Conference of Mayors and the American College of Physicians.

As states weigh their options to reduce costs and increase the quality and quantity of coverage, they are turning increasingly to doctor and patient-run health care. In the last three years, the California State legislature has twice passed such a bill. Pennsylvania, Colorado, Illinois, Montana, New York, Washington, Minnesota and Ohio are also home to single payer bills with strong grassroots movements behind them. Unfortunately, states face significant barriers to enacting such laws, including potential ERISA preemption, which could prevent states from enacting a single payer plan. In addition, some states would benefit greatly from federal financial assistance to facilitate the transition.

As you progress toward the difficult task of overseeing the formation of health care reform legislation, please consider the needs of states that wish to deploy a health care model that is known to work. Thank you for your consideration.

Sincerely,

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