

January 24, 2022

The Honorable Ash Kalra California State Assembly 1021 O Street, Suite 5130 Sacramento, CA 95814

RE: Assembly Bill 1400 (Kalra) - SUPPORT

Dear Assembly Member Kalra,

I am writing in strong **SUPPORT** of your **Assembly Bill 1400**, the California "Guaranteed Health Care for All" Act, which would enact a comprehensive framework for a single-payer health care coverage system in California. We look forward to working with the author and sponsor to ensure that the new system has appropriate consumer and fiscal solvency protections in place to maximize Californians' access to quality, accessible, and affordable care.

The implementation of the federal Affordable Care Act under the administration of two governors and two insurance commissioners has been a historic success. The number of uninsured in California is at an all-time low. Millions of additional Californians now have coverage through the creation of Covered California and expansion of Medi-Cal. From the Legislature's passage of Health4All Kids in 2015 which I proudly authored to Governor Gavin Newsom's latest budget proposal to cover all income-eligible Californians regardless of where they were born, our state is light years ahead of the rest of the nation in ending health care discrimination in our immigrant communities.

Despite the incredible progress we have made, the pandemic has laid bare the inequities in how Californians access health care coverage. We have paid a deadly price for the needless discrimination, complexity, and excessive costs of for-profit insurance. That is why we need to continue to fight for a single-payer plan that will protect all Californians and serve our collective public health.

Insurance companies and health care plans are going to fight to keep their profits before all else and we need to keep fighting for people's right to quality health care. I believe the only way to achieve "health care for all" is to keep pushing for it. Personal health is public health. Because when the system doesn't work, we all pay the price.

The facts of the pandemic are plain. America has seen far more death and illness than any other high-income, industrialized nation, and California has not been spared. In addition to those who lack health insurance coverage, others struggle to afford their coverage or the out-of-pocket costs of the coverage they have purchased. Many consumers with health insurance still have problems paying their health care bills, and it is far worse for people without insurance. Our Black, Latino, Asian American, Native, immigrant communities, and working families have paid the highest price.

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Immigrant communities, rural Californians, persons with disabilities, and young people are still struggling to access affordable high quality care. In addition, our health care system is still faced with pervasive health disparities along racial, ethnic, economic, and geographical lines with less access to safety net programs. According to an October 2021 report commissioned by the California Health Care Foundation¹:

- Life expectancy at birth in California was 81.0 years. Black Californians had the shortest life expectancy at 75.1 years, and the Asian population had the highest life expectancy at 86.3 years.
- Latino Californians were more likely to have incomes below the federal poverty level and to report being uninsured. About one in five Latino Californians reported not having a usual source of care and experiencing difficulty finding a specialist.
- The Black population in California experienced the highest death rates from breast, cervical, colorectal, lung, and prostate cancer among all racial and ethnic groups.
- Black Californians experienced the highest rates of prenatal and postpartum depressive symptoms, low-risk; first-birth cesareans, preterm births, low-birthweight births, infant mortality, and maternal mortality.
- The COVID-19 pandemic has had a disproportionate impact on racial and ethnic groups in California. The COVID-19 vaccine has not been equitably administered across the state by race/ethnicity to date.

We know that those who do not have access to care have significantly worse health outcomes and are disproportionately people of color. The COVID-19 pandemic has exposed how grossly flawed and inequitable our multi-payer health system is and how critical it is for all Californians to be guaranteed access to health care.

An estimated 3.2 million Californians remain uninsured² and millions more with coverage often delay or are unable to access necessary medications or health care services due to cost. Since the COVID-19 pandemic, that number has grown as many workers have lost their employer-based coverage or were unable to afford the high cost of health care due to economic constraints.

Our current health care system is a complex, fragmented multi-payer system that still leaves wide gaps of coverage and poses significant issues of affordability. Despite health care spending in the United States far exceeding that of other high-income, industrialized countries that offer a publicly financed single-payer system, we consistently report worse health outcomes and disparities among vulnerable populations.

I know first-hand the challenges that families face when they do not have access to quality health care. I personally know about health care being a trip to the school nurse. I know about taking home remedies because prescription drugs are too expensive. I have family members who have had to choose between paying rent or paying for a medically necessary procedure, friends who have had to choose between buying groceries or filling their prescriptions. Health care is a right, not a privilege only for those who can afford it.

¹ <u>https://www.chcf.org/publication/2021-edition-health-disparities-race-ethnicity-california/#related-links-and-downloads</u>

² <u>https://laborcenter.berkeley.edu/undocumented-californians-projected-to-remain-the-largest-group-of-uninsured-in-the-state-in-2022/</u>

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As a member of the California State Senate, I proudly authored Senate Bill 562, the Healthy California Act, which would have created a universal, single-payer health care system in California. I also authored Senate Bill 4, the Health4All Kids (Chapter 709, Statutes of 2015), that extended health care to all children regardless of where they are born. Today, over 100,000 undocumented children have full-scope health care.

Now as Insurance Commissioner, my commitment to improving health access and care for California's consumers continues. In this role, I have fought to expand coverage and access for all Californians. Last year, I sponsored Assembly Bill 570, the Parent Healthcare Act (Santiago, Chapter 468, Statutes of 2021), to help reduce health insurance costs for California's working families. In addition, I sponsored Senate Bill 280 (Limón, Chapter 636, Statutes of 2021), which expands the benefits required in large group health insurance products and forbids health insurers from discriminating based upon demographic factors including sexual orientation and gender identity. I have issued multiple regulations, notices, and bulletins to ensure insurers do not pass costs onto consumers, cover HIV PrEP without cost-sharing, and ensure transgender youth have access to gender affirming care for gender dysphoria.

We have worked to make quality, affordable health care more accessible. Now is the time to finish the job of making health care available to all Californians.

For all these reasons, I am in strong **SUPPORT** of your **Assembly Bill 1400**. Please contact me or Michael Martinez, Senior Deputy Commissioner and Legislative Director, at (916) 492-3565 if you have any questions.

Thank you for your tremendous leadership and for fighting for accessible and affordable health care for all Californians.

Sincerely,

RICARDO LARA

Insurance Commissioner

cc: The Honorable Alex Lee

The Honorable Miguel Santiago

The Honorable Dr. Richard Pan, Chair, Senate Committee on Health

The Honorable Jim Wood, Chair, Assembly Committee on Health

Melanie Moreno, Staff Director, Senate Committee on Health

Rosielyn Pulmano, Chief Consultant, Assembly Committee on Health

Tim Conaghan, Consultant, Senate Republican Caucus

Angie Wei, Legislative Secretary, Office of the Governor

Tam Ma, Deputy Legislative Affairs Secretary, Office of the Governor

Marko Mijic, Deputy Secretary, California Health and Human Services Agency

Andrew Hoang, Staff Finance Budget Analyst, Department of Finance