

## Legislation Details (With Text)

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<b>On agenda:</b>		<b>Final action:</b>		3/22/2018	
<b>Title:</b>	Urging the United States Senate to pass S. 1804, the Medicare for All Act of 2017, and affirming universal access to health care as a human right.				
<b>Sponsors:</b>	Councilmember Gym, Councilmember Green, Councilmember Bass, Councilmember Parker, Councilmember Reynolds Brown, Councilmember Blackwell, Councilmember Greenlee, Councilmember Jones, Councilmember Johnson				
<b>Indexes:</b>					
<b>Code sections:</b>					
<b>Attachments:</b>	1. Resolution No. 18025100.pdf, 2. Signature18025100.pdf				

Date	Ver.	Action By	Action	Result	Tally
3/22/2018	0	CITY COUNCIL	ADOPTED	Pass	14:3
3/15/2018	0	CITY COUNCIL	Introduced and Ordered Placed On Next Week's Final Passage Calendar	Pass	

Urging the United States Senate to pass S. 1804, the Medicare for All Act of 2017, and affirming universal access to health care as a human right.

WHEREAS, Every person in the City of Philadelphia and across the United States-regardless of citizenship status-deserves quality healthcare; and

WHEREAS, Over 27 million Americans, and over 165,000 residents in the City of Philadelphia, have no healthcare coverage; and

WHEREAS, Nearly 28 million Americans with private health insurance struggle to cover their deductibles and, as a result, cannot receive care without accruing substantial medical debt; and

WHEREAS, People of color are at a higher risk of becoming uninsured, with Latino and Black populations having lower rates of health insurance enrollment (83.1% and 88.3%, respectively) as compared to their white counterparts (92.4%); and

WHEREAS, Our current healthcare system largely ties health insurance coverage to employment, hurting vulnerable workers and the underemployed; and

WHEREAS, Unemployed individuals have, on average, poorer mental and physical health and are less likely to receive necessary medical care because of weak coverage and high medical costs; and

WHEREAS, The United States spends \$3 trillion on healthcare each year, significantly more than industrialized countries that provide universal health coverage; and

WHEREAS, Twenty-two percent of Americans have reported that they have experienced a hike in the price of

prescription drugs during the course of 2017. Approximately one third of these individuals reported that they chose to not fill a prescription or spent less on groceries or other family needs due to rising prescription prices; and

WHEREAS, S. 1804, the Medicare for All Act of 2017, provides a path towards a single, unified, comprehensive national health program that calls for the elimination of premiums, copays, and deductibles for medical coverage as well as a jobs program for insurance industry employees affected by the transition to single-payer healthcare; and

WHEREAS, The program instituted with the passage of S. 1804 will provide coverage for the continuum of medically-necessary services for all Philadelphians and all U.S. residents, including primary care, inpatient care, outpatient care, emergency care, prescription drugs, durable medical equipment, reproductive care, mental health services, dentistry, eye care, podiatry, chiropractic, and substance abuse treatment; and

WHEREAS, S. 1804 will mean that Americans will not have to select provider based on whether or not they are in-network, leading to an expansion of the choice that patients will have in receiving the treatment and care that they need; and

WHEREAS, Pennsylvania HB 1688 and SB 1014, the Pennsylvania HealthCare Plan, also support the effort to provide more comprehensive access to healthcare coverage through the creation of a public system for healthcare financing that would provide coverage to all residents of the Commonwealth of Pennsylvania; and

WHEREAS, Nearly one-third of U.S. healthcare spending goes to administrative costs that would be reduced with a Medicare-for-All national health insurance program; and

WHEREAS, According to an April 2017 poll, 60 percent of Americans support the expansion of Medicare to all Americans; and

WHEREAS, A universal single-payer Medicare-for-All national health insurance program is projected to cost the U.S. \$6 billion less than the current health system over the next ten years; and

WHEREAS, According to Article 25 of the United Nations Declaration of Human Rights, “Everyone has the right to a standard of living adequate for the health and wellbeing of himself and of his family, including food, clothing, housing and medical care and necessary social services.” The World Health Organization Constitution similarly touts “the right to the highest attainable standard of health” as a fundamental human right. The enactment of S. 1804 and its companion bills in the Pennsylvania State Legislature uphold the right of access to adequate health assistance; now, therefore, be it

RESOLVED, THAT THE COUNCIL OF THE CITY OF PHILADELPHIA, Urges the United States Senate to pass S. 1804, the Medicare for All Act of 2017, and affirms universal access to health care as a human right.