

## FACT SHEET ON COLORADO HEALTH SERVICES SINGLE PAYER PROGRAM

Presented to the Colorado Blue Ribbon Commission for Health Care 2007

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What: Colorado Health Services Single Payer Program

Why: A Single Payer health care system automatically includes all residents of the State of Colorado. It is simple and cost effective, efficient, accountable and transparent, assuring fiscal stability, decreasing Colorado statewide (public and private) health care spending by \$1.4 billion per year from the \$30.1 billion spent under the current system.

Advantages :

Replaces all eligibility determinations. "Everybody In, Nobody out."

Replaces Medicare, Medicaid, SCHIP, all entitlement programs, Worker's Compensation medical portion, and auto insurance medical portion.

Comprehensive benefits including preventive care, acute care, chronic care and disease management, emergency transportation, hospitalization and surgery, prescriptions, mental health, dental care, vision care, hearing care, physical therapy and rehabilitation, medical equipment, long term care and hospice.

No co-payments and no deductibles. No caps on coverage benefits. Physicians decide patient needs.

Choice of personal physician and hospital.

Cost is shared by all:

All Individuals and families' contribution to health trust fund: 8.1% of annual income

All employers' contribution to health trust fund: 6% payroll tax

Transfer of federal, state, county and municipal health care funding to Colorado health trust fund

Federal funding of Medicare, Medicaid and SCHIP

Federal funding of other health care entitlement programs, federal employee health benefits

State funding of Medicaid and safety net programs

State employee health benefits

Municipal and county employee health care benefits

Military personnel under CHAMPUS

Indian Health Services