

My name is Rohith Palli. I am here because the people of Rochester need the New York Health Act. It will create a more just, efficient health system that returns decision making to patients and their doctors.

During my second semester of medical school, I saw a young girl at pediatrics clinic suffering from an extreme asthma attack. Her mother explained to us that she was unable to pick up her daughter's prescription because the insurance company no longer covered that brand of inhaler. We ultimately had to send this girl, struggling to breathe, to the emergency room to get the medication that would have avoided this episode. Our system adds cost, time, and even threatens the lives of our children.

Administrative hurdles cost money in addition to their human toll. Right now, the health system is burdened with administrative costs that frustrate patients as well as health care workers, decreasing the resources available for care. Physicians are estimated to spend 3 hours per week directly interfacing with insurance companies. This time not seeing patients adds to administrative waste in our doctors offices. The Rand corp estimates hospital and doctors office administration will cost 26.4 billion dollars in 2022 under the status quo. Comparison with Canada's system, however, shows we can cut this spending by 13% under the New York Health act. Billing in doctor's offices, however, isn't the most wasteful part of the health system.

Here in Rochester, our largest insurance provider, Excellus, made 150 million dollars in profit last year and paid their CEO almost 3 million dollars, a 22% raise over the previous year. This is an unacceptable use of our health care money. The New York Health act will eliminate the excessive profits of these insurance companies. This will allow health plan overhead to be just 6% of overall health spending. Compared to the current system, this will save us almost \$12 billion a year. Together, the reduction of waste at both the central administration and doctors offices will allow us to provide health care to all new yorkers.

Expansion of who gets care isn't the only way we will build a more equitable health system. Robust evidence from Polsky and Rhodes shows that payment rates for Medicaid are directly tied to availability of primary care appointments for new Medicaid patients. This means that how much we pay doctors to see people with medicaid determines their ability to access care. Medicaid payment rates are often far below those of medicare or private insurance, ensuring that people with medicaid have less access to care. That means they end up waiting longer to see the doctor. This underscores the unequal nature of our current healthcare system. We ration care based on who has the ability to pay. When a child needs an inhaler or an adult needs a heart surgery, they should receive them regardless of their employment or income status.

The New York Health Act will make this a reality. We should not be wasting our resources on unnecessary administration or millions in profits. We should not be prioritizing treating the richest in society. The New York Health Act will fundamentally alter the structure of our health system so resources will be allocated to those who need them the most. Health care is a human right and it's time we started acting like it in New York.