Your Community Impact Statement has been successfully submitted to City Council and Committees.

If you have questions and/or concerns, please contact the Department of Neighborhood Empowerment at NCSupport@lacity.org.

This is an automated response, please do not reply to this email.

Contact Information

Neighborhood Council: Historic Cultural Neighborhood Council

Name: J. Michael Maier

Phone Number: (310) 721-8930 Email: michael@hcnc-adlt.org

The Board approved this CIS by a vote of: Yea(11) Nay(0) Abstain(2) Ineligible(0) Recusal(0)

Date of NC Board Action: 09/10/2019

Type of NC Board Action: For

Impact Information Date: 09/17/2019

Update to a Previous Input: No

Directed To: City Council and Committees

Council File Number: 19-0002-S157

Agenda Date: Item Number:

Summary: The Historic Cultural Neighborhood Council joins, to date, eight other neighborhood councils in calling on the Los Angeles City Council to pass a resolution of support for Medicare for

All (HR 1384 and S.1129) to establish single-payer, universal healthcare.

Community Impact Statement

DATE: September 10th, 2019

TO: LA City Council

Los Angeles, CA

RE: Community Impact Statement in SUPPORT of Council File #19-0002-S157

HR 1384 / The Medicare for All Act

Approved at [09/10/19] General Meeting by VOTE: 11 AYE, 0 NAY, 2 ABSTENTION, 2 NOT PRESENT.

Members of the Los Angeles City Council,

The Historic Cultural Neighborhood Council joins, to date, eight other neighborhood councils in calling on the Los Angeles City Council to pass a resolution of support for Medicare for All (HR 1384 and S:1129) to establish single-payer, universal healthcare.

It is important that the City of Los Angeles join San Francisco, Oakland, Denver, Detroit, Cambridge, Pittsburgh, Seattle, and Chicago in advocating for the moral right to healthcare for all people, the rational organization of our healthcare system under single payer, and the sustainability of our economy and our government's operability by confronting and controlling the drivers of costs.

The City of Los Angeles is dealing with a massive housing and homlessness crisis. Healthcare and housing are intrinsically tied together and it is of utmost importance to work towards finding solutions to help all Angelenos flourish. Universal, single payer healthcare is a needed step in that direction.

The Medicare for All Act of 2019 will guarantee that all residents of Los Angeles will be fully covered for health care without copays, deductibles or other out-of-pocket costs, and would save millions in taxpayer dollars now spent on premiums that provide often inadequate health insurance coverage for government employees.

Sincerely,

J. Michael Maier, President, Historic Cultural Neighborhood Council

Please see below for the resolution that the Historic Cultural Neighborhood Council has passed.

WHEREAS, the number of Americans without health insurance is still nearly 30 million, while more than 40 million Americans remain underinsured, despite important gains made since the implementation of the Affordable Care Act; and

WHEREAS, approximately 3 million Californians lacked health insurance as of 2016, including 893,000 in Los Angeles County alone; and

WHEREAS, every person in Los Angeles deserves high quality health care; and

WHEREAS, the never-ending rising costs of health care add challenges to our already strapped municipal budget and our small businesses, which keep our communities thriving; and

WHEREAS, the rising costs of health care contribute to our city's housing and homelessness crisis by making it difficult for Angelenos to pay the rent; and

WHEREAS the Medicare for All Act of 2019 would provide national health insurance for every person in the United States for all necessary medical care including prescription drugs; hospital, surgical and outpatient services; primary and preventive care; emergency services; women's reproductive care; mental health, dental and vision care; and long-term care; and

WHEREAS the Medicare for All Act of 2019 would provide coverage without copays, deductibles or other out-of-pocket costs, and would slash bureaucracy, protect the doctor-patient relationship and assure patients a free choice of doctors; and

WHEREAS, recent polls show that a majority of Americans support Medicare-for-All; and

WHEREAS, the Medicare for All Act of 2019 will guarantee that all residents of Los Angeles will be fully covered for health care without copays, deductibles or other out-of-pocket costs, and would save millions in taxpayer dollars now spent on premiums that provide often inadequate health insurance coverage for government employees; and

WHEREAS, the quality of life for the residents of Los Angeles will vastly improve because they would be able to get the ongoing care they need, instead of waiting until they have a medical emergency that could upend their lives as well as further burden local resources;

NOW THEREFORE BE IT RESOLVED, that by the adoption of this resolution, the Historic Cultural Neighborhood Council calls on the City of Los Angeles to include in its 2019-2020 Federal Legislative Program SUPPORT for the Medicare for All Act of 2019 (H.R. 1384 and S. 1129), which will assure appropriate and efficient health care for all residents of the United States

-----BACKGROUND NOTES ON THE ISSUE------

Council District

10

Pending in Committee

Rules, Elections, and Intergovernmental Relations Committee

Mover

HERB WESSON, JR.

Second

BOB BLUMENFIELD
MIKE BONIN
MARQUEECE HARRIS-DAWSON
PAUL KORETZ
NURY MARTINEZ
DAVID E. RYU

Current Status:

Herb Wesson's motion is set to go before the Rules Committee, which is scheduled to meet on Friday Sept. 20th. If it goes through the Rules Committee w/o any issues then it will go back before City Council, which could happen as soon as the next Friday, Sept. 27th (this is when we could publicly speak).

The House bill HR 1384 has picked up another important co-sponsor: Hakeem Jeffries (D-NY). Hakeem is seen as being next in line to be Speaker of the House so this really is a big deal and a sign that this bill is still gaining steam!

HR 1384 has 119 co-sponsors, over half the democratic caucus. It really could make its way to the floor for a vote this Fall, which would be historic. But this House has shown *all year* that they have an appetite for passing progressive legislation and this Fall should be no different.

NC's who have approved CIS's

- 1. Boyle Heights
- 2. Central Hollywood
- 3. Eagle Rock
- 4. Glassell Park
- 5. Hermon
- 6. Historic Highland Park
- 7. Los Feliz
- 8. +Palms
- 9. Rampart Village
- 10. +Silver Lake
- 11. Echo Park pending
- 12. Van Nuys pending

How this issue affects our local communities

- In LA county, there are 893k uninsured as of 2017:
- That's 18.4% of people in Los Angeles County uninsured, higher than the national average of 13%
- 60% of Skid Row's 50-block district's thousands of homeless people have mental health disorders, a history of addiction, or both and get primary treatment from jail:
- Homeless in Skid Row have a life expectancy under 50, compared to 78 for the general population. They have much higher rates of heart disease, cancer, liver disease, kidney disease, skin infections, HIV/AIDS, pneumonia, and tuberculosis, mental illness, and addiction -- and are least likely to be able to afford any healthcare:
- In Los Angeles, for example, the city spends over \$2 billion a year to maintain the status quo for people living in places like downtown's Skid Row:
- Without M4A, leaving a homeless person on the street costs Los Angeles an average of \$35,000 each year in medical and emergency services, mental health care, social services, etc. Jailing a homeless person pushes that cost up by a third, but is the primary place they get medical treatment.

The challenges of Medical or Medicare:

- This system segregates people into different standards of care.
- Medicaid was never designed to serve everyone who is poor, nor to meet all health care needs of those eligible. Generally, Medicaid eligibility is linked—and limited—to the categorical groups and income levels defined for the cash assistance programs; with limited exceptions, the standard of "poverty" for Medicaid is not the Federal poverty level. And, beyond a core set of mandatory, essential services, each State has, and has exercised, considerable discretion in offering additional types of health services to its Medicaid-eligible population. (National Institute of Health)

Countries with Universal Healthcare:

- 1. australia
- 2. austria
- 3. bahrain
- 4. belgium
- 5. brunei6. canada
- 7. cyprus
- 8. denmark
- 9. finland
- 10. france
- 11. germany
- 12. greece 13. hong kong
- 14. iceland
- 15. ireland
- 16. israel
- 17. italy
- 18. japan
- 19. kuwait
- 20. luxembourg
- 21. netherlands
- 22. new zealand
- 23. norway
- 24. portugal
- 25. singapore
- 26. slovenia
- 27. south korea
- 28. spain
- 29. sweden
- 30. switzerland
- 31. UAE
- 32. united kingdom