



Testimony on SF 49 (Wiklund) – Article 4, Section 1
MN Senate Commerce and Consumer Protection Committee, Tuesday, April 11, 2023

Thank you, Chair Klein and members of the committee,

Citizens' Council for Health Freedom would like to share our opposition to Article 4, Section 1 of SF 49 and the funding of a report to study the benefits and costs of a universal health care system.

Reports are only funded if there is an intention to implement what is being studied. The report created under this bill would be the first step towards a single-payer system. Thus, we would like to speak to three key concerns that we see with universal health care and respectfully ask that you oppose any proposal to begin transitioning Minnesota to a single-payer system.

Our first concern is access to care. We can simply look to Canada to note the lack of access to care under a universal health care system. In Canada, “Specialist physicians surveyed report a median waiting time of 27.4 weeks [over six months] between referral from a general practitioner and receipt of treatment.”¹ Additionally, Americans have nearly double the access to new drugs as Canadian patients. Universal health care will reduce Minnesotans’ access to medical care.

Our second concern is the immense cost. Government-financed health care will be paid for by Minnesota taxpayers. This is even more concerning when you consider that there will likely be an increase in use or improper use of medical care – such as an increase in ER visits or non-residents coming to Minnesota for care. As costs increase, patient access to care will likely be reduced.

Our third concern is the limitation of choice. The bill language claims that universal health care will allow patients to choose their doctors, hospitals, and providers. However, that “choice” is only within the practitioners and facilities approved and funded by the state, which will likely be a limited subset of current providers. Additionally, a single-payer system would lead to implicit and explicit rationing of care. The bill states that the proposal would cover all necessary care – however state officials would determine what is necessary, not the doctor or the patient. This will likely lead to an increase in the denial of services deemed unnecessary.

We recognize that there are shortcomings in our current system. However, we strongly believe that a single-payer system is not the solution. A much better option would be a return to real insurance – the medical indemnity policies that pay the patient directly. Patients would then be able to use these dollars towards medical care of their choice. Minnesotans should not fund a report that will exacerbate the current issues and create new ones.

Twila Brase
President and Co-founder

¹ [Waiting Your Turn: Wait Times for Health Care in Canada, 2022 Report | Fraser Institute](#)