



## Myths and Facts about the NY Health Act: Guaranteed Health Care for ALL New Yorkers

**MYTH:** The NY Health Act will end Medicare as we know it.

**FACT:** The NY Health Act will greatly improve benefits for Medicare beneficiaries by covering vision, dental, hearing, and long-term care, while lowering cost by getting rid of copays, deductibles, and cost-sharing. You will have free choice of doctors, hospitals and other providers. The NY Health Act will not reduce any benefit or right currently available through Medicare, but it will strengthen access to care for Medicare beneficiaries, and guarantee health care for the rest of us, too.

**MYTH:** The NY Health Act will quadruple your taxes.

**FACT:** Studies show that 90% or more of New Yorkers will actually pay *less* in NY Health taxes than they do now for premiums, deductibles, copays and out-of-pocket costs for health care and prescription drugs.

**MYTH:** The NY Health Act will cause large job losses.

**FACT:** The savings from NY Health will put money back in people's pockets – including employers – and actually create 200,000 new jobs. People in jobs that are no longer needed in health plan and health care provider administration will take new jobs, aided by NY Health funds that can pay for re-training and transitioning, in a healthier NY economy stimulated by the savings of NY Health.

**MYTH:** The NY Health Act is bad for business.

**FACT:** Today, businesses are burdened by rising health care costs and health insurance paperwork. Many small businesses can't provide insurance because of its cost, and lose good employees to jobs that have health benefits. The NY Health Act is simple with predictable costs, necessary for businesses to thrive and for workers to stay healthy.

**MYTH:** The NY Health Act can't work if we don't get federal waivers for Medicare and Medicaid.

**FACT:** Even without federal waivers, New York can incorporate Medicaid, wrap around Medicare, and provide truly universal health care to all residents of New York at less cost than now. Federal waivers would help the system run more smoothly – for us and for the federal government – but they are not necessary for the system to work.

**MYTH:** The NY Health Act will cut payments to doctors and hospitals.

**FACT:** There are sufficient savings in NY Health that provider reimbursement rates can be raised so that they can actually see greater take-home pay. A majority of doctors now favor a plan like NY Health

because they are so frustrated with the current system. It will statutorily guarantee reasonable and adequate payment rates, and save providers billions in reduced administrative costs.

**MYTH:** The NY Health Act is government-run health care.

**FACT:** With NY Health, you and the health care providers you choose are responsible for your health care. NY Health just pays the bill. Medicare – an enormously popular program – is not “government run health care,” and neither is NY Health. But today, insurance companies largely run our health care – for their benefit.

**MYTH:** Employer-provided insurance is better than the NY Health Act.

**FACT:** The benefits of the NY Health Act are more generous and more certain than any private or public plan that currently exists. People who currently receive health insurance from their employer will have the peace of mind knowing that high quality, affordable health care will be there for them whether they have a job, move to a new job, or lose their job. Today, every year more money goes to skyrocketing costs of health insurance – a burden on employers, employees, and unions. With NY Health, almost all of us will keep more money in every paycheck and get better access to health care.

**MYTH:** Why don't we just cover the 5% of people who are currently uninsured?

**FACT:** While covering everyone is a major goal of the NY Health Act, just extending coverage to the uninsured does nothing for the ten times or more New Yorkers who struggle with premiums, deductibles, copays, out-of-network charges and unjustified denials of care. With NY Health, everyone is covered with high quality affordable health care, ending underinsurance for good.

**MYTH:** Government programs aren't very good. This will be second-class care.

**FACT:** What's not good is getting health coverage from companies that make money by getting in the way of the health care your doctor should be providing. The NY Health Act has statutory guarantees of comprehensive benefits, complete choice of providers, no out-of-pocket charges, and reasonable and adequate payment to providers. People with wealth and influence – including every legislator and the governor – will be in the same plan as the rest of us. They will make sure that their coverage is as good as can be, and the rest of us – and our doctors and hospitals – will be in the same plan with them.

**MYTH:** We shouldn't force everyone into this plan. We can just offer a public option.

**FACT:** Having everyone in the same plan is crucial to making sure we all have the best possible coverage and care. Keeping most of us in insurance company coverage, and adding an extra “public option” plan, guarantees that the billions of waste, unfair charges and unjustified denials of care in the current system continue. If the “public option” plan offers better access to care, then it will attract a disproportionate share of people who need a higher-than-average amount of care, and the plan will face higher and higher costs and fail. If it isn't better, what's the point – other than being a distraction from the sensible NY Health Act.

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