Verbal presentation for hearing on "New York Health"

I am Dr Marc Lavietes, New York City resident, semi - retired pulmonologist and secretary of our local Physicians for a National Health Program, NY - Metro chapter.

I strongly support passage and implementation of our bill "New York Health". This bill creates a single payer system that will deliver comprehensive universal health care. As a single payer system, it will recruit the largest possible group of subscribers and thus distribute risk among the greatest number of potential enrollees. A single payer system will also greatly minimize administrative costs and thus provide further substantial cost savings. Plans for incremental reform - often discussed in the national discourse - allow for multiple payers and thus can not provide high quality care at the lowest possible cost.

In my work, I see stable patients with chronic illnesses on an out

- patient basis. Most of my patients present with asthma, emphysema or issues of sleep disordered breathing. The simple act of filling a prescription can be a nightmare for them - or for me. Often I must obtain a pre authorization request for use of a standard medication.

Different payers have different formularies. Each payer may change its formulary from year to year. Patients too often are forced to change their insurance plan and thus their payer. I spend too much time responding to notices from insurance companies telling me that my patient's therapy is no longer on formulary. And the costs of the newer "biologics" for asthma is prohibitive.

Patients with sleep disordered breathing present further problems.

Their therapy often involves the use of a mechanical ventilator for breathing support while they sleep. Prescribing so - called durable medical equipment (DME) for home use is often daunting. Administrative problems arise at every step: obtaining the sleep study for diagnosis, receiving the results, transmitting the results to a DME supplier, paying the DME provider, delivering the DME and coaching the patient in its use at home - all present challenges to patient and physician.

This process may require as much as six months. Many patients become discouraged before the process ends. Anyone who has observed or participated in this process is aware of how many slip ups regularly occur.

Jur legi. I join with everyone in this room to urge our legislature to pass NY Health.

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