

WHEREAS, every person in the city of New Orleans, the state of Louisiana, and the entire United States deserves high quality health care; and

WHEREAS, although Louisiana has made great strides in increasing our insurance coverage through the 2016 Medicaid expansion, which provided 53,000 New Orleanians^[1] with coverage, we struggle to ensure quality health care for all; and

WHEREAS, the Medicaid program comprises a significant portion of the State budget, leaving it vulnerable to partisan budget debates and insufficient to meet the demands of the population^[2] under normal conditions, much less during a pandemic which causes massive layoffs and likely increases in Medicaid applications; and

WHEREAS, Louisiana suffers from some of the worst racial health disparities in the nation, clearly demonstrated by both the maternal and neonatal mortality rates amongst Black Louisianians^[3] and the unequal distribution of morbidity and mortality during the COVID-19 pandemic; and

WHEREAS, New Orleans' culture and tourism depends heavily on its hospitality industry, an industry with already low rates of health coverage^[4] and which now faces significant loss of income, and many hospitality industry workers frequently oscillate between Medicaid and other insurance or no insurance due to unstable wages, leading to interruptions of care for chronic disease management, which worsens outcomes^[5]; and

WHEREAS, many people delay seeking needed health care due to an inability to pay^[6], leading to a sicker and poorer population in the long run; and

WHEREAS, such a population is significantly more likely to develop serious illness if exposed to COVID-19 and will subsequently face higher mortality rates from the disease; and

WHEREAS, medical bills are a leading cause of bankruptcy in this country^[7], Louisiana ranks second in the nation for the proportion of people living with unpaid medical bills, and the percentage of residents in Orleans Parish living with medical debt is higher than the national average^[8]; and

WHEREAS, the current COVID-19 pandemic has led to record levels of unemployment, loss of employer-sponsored health insurance, a severely strained health care system, widespread illness, and taken a profound toll on our community's mental health, all of which is placing significant demands on our health care system, and

WHEREAS, the ever-increasing costs of health care, which are further elevated due to the pandemic, may challenge our already strapped state and municipal budgets^[9]; and

WHEREAS, COVID-19 related treatment is likely to cost uninsured patients tens of thousands of dollars^[10]; and

WHEREAS, in order to equitably and effectively address the health care burden of the COVID-19 crisis, we must urge the United States Congress to expand health insurance coverage to provide comprehensive coverage to every resident of the United States without any cost sharing; and

WHEREAS, the *Health Care Emergency Guarantee Act* would guarantee all residents full coverage for medically necessary health care without copays, deductibles or other out-of-pocket costs from now until an FDA-approved COVID-19 vaccine is widely available to the public; and

WHEREAS, the *Medicare for All Act of 2019* would provide similarly expanded coverage in perpetuity; and

WHEREAS, other COVID-19 relief legislation packages will be and are being considered for adoption by Congress, some of which will provide sufficient health care coverage as described above and some of which will not; **NOW THEREFORE**,

BE IT RESOLVED, That the New Orleans City Council hereby endorses and urges federal legislation to provide universal, comprehensive health coverage with zero cost-sharing for patients during this crisis, such as the *Health Care Emergency Guarantee Act*, and beyond, such as the *Medicare for All Act of 2019* and calls on our federal legislators to work toward the immediate enactment of this, or substantially similar legislation, to ensure appropriate health care coverage for all residents of the United States during this crisis and the crisis recovery period.

[1] Louisiana Health Insurance Survey 2017

[2] Prior to the new Hepatitis C drug subscription model, only 3% of HCV+ Medicaid patients and inmates could access treatment. Louisiana Hepatitis C Elimination Plan, LA Dept. of Health

[3] Louisiana Maternal Mortality Review Report 2011-2016, LA Dept. of Health

[4] 31% of restaurants nationwide offer health insurance, Toast Restaurant Industry Report 2019

- [5] Estimated 37-45 thousand Americans die per year for lack of access to care. Woolhandler & Himmelstein, *Annals of Internal Medicine* 2017;167:424.
- [6] Over half of people receiving a tax refund put some of it towards deferred medical care, JPMorgan Chase Institute Tax Refund Data, 2018.
- [7] Himmelstein, et al. *American Journal of Public Health* 2019;109:431.
- [8] Debt in America: An Interactive Map, 2019.
- [9] New Orleans relies on \$21.2MM grants to supplement \$20.7MM from the general fund for its health department (New Orleans Proposed 2019 Budget). Additionally, New Orleans spends \$59.8MM annually on health claims, 3.8MM administrative, covering 11k active, retired, and dependent members. New Orleans's Chief Administrative Office, 2019.
- [10] Estimated cost of treating the uninsured hospitalized with covid-19, Kaiser Family Foundation, 2020.