

RESOLUTION ON HEALTH CARE A FUNDAMENTAL RIGHT

WHEREAS, nearly one-third of non-Elderly North Carolinians were without health care coverage for three months or longer during 2001-2. ⁱ

WHEREAS, the number of people without health insurance for the entire fiscal year in four NC counties rose 15% between 1999 and 2002ⁱⁱ and 1.32 million NC residents were “officially counted” as uninsured in 2005 (i.e. whole year, Jan 1 – Dec 31).

WHEREAS, the proportion of Americans going without or delaying needed medical care increased sharply between 2003 and 2007 with one in five Americans (59 million people) reporting not getting or delaying needed medical care in 2007, up from one in seven — 36 million people — in 2003.. ⁱⁱⁱ

WHEREAS during a single year 38% of *insured Americans* report problems in accessing care due to limitations in their insurance (mental health, vision, dental exclusions and limits), or due to exclusions for their chronic conditions. ^{iv}

WHEREAS, ethnic minorities, the working poor, young adults and children are disproportionately uninsured in NC, while specifically NC is the worst of the 50 states in the rate of uninsurance among hispanics , ^v , ^{vi}

WHEREAS, more than half of individual bankruptcy filings in NC were related to medical bills in 2004 with about $\frac{3}{4}$ of those the individuals health-insured at the time they got sick and with those illnesses directly affecting over 51,000 family members in just that year. ^{vii}

WHEREAS, 24% of US health care expenses go to administrative costs, while Medicare operates with 3-4% for administration. ^{viii}

WHEREAS, uninsured North Carolinians generate a cost to hospitals of \$1.3 billion per year, largely repaid through taxes and charges to the general population, so that facilities will continue to exist throughout our counties. ^{ix}

WHEREAS, the profit rate of the pharmaceutical industry is 4 times that of the Fortune 500 average and there would be enormous cost-saving in pooling our purchasing and negotiating prescription drug prices, as done by the Veterans Administration. ^x

WHEREAS, Some 64% of our health care system is currently financed by public money: federal and state taxes, property taxes and tax subsidies and that these taxes are being paid heavily by low-income uninsured Americans. ^{xi}

WHEREAS, 83% of North Carolinians of voting age agreed that “the State Legislature should make a plan so that all North Carolina residents can get decent health care on a regular basis” ^{xii}

WHEREAS, the United States, while paying approximately twice per capita on health care what other industrialized nations spend ^{xiii}, is the only advanced industrialized country without coverage for all our people.

WHEREAS, the World Health Organization analyzed the world’s health systems, in 191 member nations and found that the USA while spending a far higher portion GDP than any other country ranks 37 out of 191. ^{xiv}

WHEREAS, The Declaration of Independence states that the right to life is an inalienable right, and considering that this right cannot be secured without health care,

WHEREAS, The US Constitution (Amendment 6, clause 2) asserts that international conventions shall be “the supreme law of the land” binding upon all judges within every state,

WHEREAS, The US has signed and ratified treaties directly contradicting the exclusivity and disparities of our current health care and indicating the governmental obligation to assure health care to all Americans, including: the UN Charter, UNDHR, ICERD, ICCPR, as well as the ICESCR, UNCRC which have been signed but not yet been ratified.^{xv}

WHEREAS, the UN Declaration of Human Rights states that “Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.”

WHEREAS, The Right to Education was enacted in our state to allow the people opportunities to develop themselves and contribute creatively and productively to our state, precisely so do North Carolinians need regular appropriate health care,

NOW, THEREFORE BE IT RESOLVED,

That the township (city council, County Commission) of _____ , recognizing that all North Carolinians have a Right to Health Care, calls on the North Carolina House and Senate to immediately set upon development and directly thereafter implement a system allowing health care access for ALL North Carolinians. Such a system must be designed so that it guarantees appropriate health care on a regular basis for not 80 or even 98% of state residents but ALL residents, just as education is denied to no child .

THE MONTH OF _____ DAY OF _____ 2008.

ⁱ Families USA, June 2004, "one in Three: Non-Elderly Americans Without Health Insurance", 2002-2003. Report states 2.44 MIL NE NC' nians without insurance, of which just 7.1% were uninsured less than 3 months.

ⁱⁱ "Triad uninsured up 15% since 1999" by Mark Tosczak
<http://triad.bizjournals.com/triad/stories/2005/01/24/story4.html>

ⁱⁱⁱ Center for Studying Health System Change June 2008 "Falling Behind: Americans' Access to Medical Care Deteriorates, 2003-2007" <http://www.hschange.org/CONTENT/993/>

^{iv} "Underinsured in America: Is Health Coverage Adequate?", Kaiser Commission, Key Facts, July 2002. see http://www.kaisernetwork.org/health_cast/uploaded_files/4060.pdf

^v 26 and 21% of the uninsured are African-American and Hispanic respectively in NC (8th highest of all states in percentage uninsured who are African American) 2002-3 data. NC is 9th highest in the rate of uninsurance among African Americans and FIRST in the nation for uninsurance among Hispanics.

<http://statehealthfacts.org/cgi-bin/healthfacts.cgi>

^{vi} 64% of the uninsured had at least one full-time worker in their household in 2002-3 in NC.

<http://statehealthfacts.org/cgi-bin/healthfacts.cgi>

^{vii} Health Affairs article Feb 2, 2005 or

http://www.pnhp.org/bankruptcy/state_by_state.pdf

^{viii} H.J. Aaron, "The Cost of Health Care Administration in the United States and Canada—Questionable Answers to a Questionable Question," *New England Journal of Medicine* 349, no. 8 (2003): 801–303. And S. Woolhandler, T. Campbell, and David U. Himmelstein, "Costs of Health Care Administration in the United States and Canada," *New England Journal of Medicine* 349, no. 8 (2003): 768–775.

^{ix} LOFrom "Future of Reimbursement Study" funded by the NC Hospital Assoc and performed by Deloitte and Touche (published in Jan 2001). These data from US Census, NC DHHS and HCFA and Office of Actuary Analysis. In 2000 cost was 1.21 BIL, estimates for 2001 and 2002 were 1.28 & 1.35 BIL.

^x Public Citizen update by S.W. Schondelmeyer, "Competition and Pricing Issues in the Pharmaceutical Market, PRIME Institute, Univ of MN And Baltimore Sun, Business, "VA buys drugs cheaply, many veterans benefit

Medicare" By Cyril T. Zaneski, Sun Staff, Originally published May 5, 2004

^{xi} http://www.pnhp.org/facts/singlepayer_faq.php

^{xii} The Carolina Poll 2000

^{xiii} Public expenditure includes benefit costs for govt. employees & tax subsidy for private insurance. Source: *NEJM* 1999; 340:109; *Health Aff* 2000; 19(3):150

^{xiv} The findings were published 21 June, in *The World Health Report 2000 – Health systems: Improving performance.*

<http://www.who.int/inf-pr-2000/en/pr2000-44.html>

^{xv} UN Declaration of Human Rights, International Convention on the Elimination of All Forms of Racial Discrimination, International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights and UN Convention on the Rights of the Child, respectively. For details see <http://www.righttohealthcare.org/Docs/Docs.htm>