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Sen. Vinehout writes about the introduction of her Badger Health Benefit Authority bill to create a state health marketplace. She shares how Wisconsin can do better for serving all with affordable and accessible health care.

MADISON - An older man contacted me recently with a problem. A visit to the doctor left him with thousands in unpaid bills. Medicare deemed the tests “routine” and not a “medical necessity.” But the gentleman was told, for his occupation, the tests were absolutely necessary.

He was left with a medical bill costing more than his 2017 income.

The top-notch staff at the Department of Health Services (DHS), discovered the man was likely eligible for Medicaid. But the man wasn’t interested.

The constituent relations department within DHS has been a godsend over the years, helping me solve many difficult medical cases. I’m very grateful for their help. I’m sure they saved many lives by connecting people to health coverage. But, if a person doesn’t want state help, there is little they or I can do.

Unless we change our state health care system and the perception of seeking assistance.

What if everyone had affordable health care? If you hadn't signed up, you could sign up the first time you saw the doctor, physician's assistant or nurse practitioner.

Behind the scenes, hospitals and clinics know they'd be paid. If you were eligible for Medicaid, you'd get the benefits. Seamlessly, payers would pay bills, providers would be paid and people would no longer pay any insurance premiums.

You could choose a provider in your area from several options. Your plan would include comprehensive benefits including maternity and mental health coverage.

If you lost your job, you could keep your health coverage. If you took a new job or started your own business, you could keep your health coverage.

Employers no longer would worry about health coverage. Sure, they could offer extra benefits if they wanted, but basic coverage would be disconnected from employment – taking a huge irritation off a company's plate.

Health care doesn't have to be so complicated. Other countries have figured out how to solve this problem. And Wisconsin can too.

In fact, ten years ago this summer, Wisconsin actually had a plan on the table to create such a system. Senate Democrats introduced Healthy Wisconsin, a plan written by Senators Erpenbach, Miller and myself. Under our plan, coverage would have cost 14.5% of payroll – split between employers and employees.

This summer, an idea to offer BadgerCare for all attracted attention. I support the plan and see the idea as a first step. Details of the plan are sparse, but it would require the Trump administration to allow a public option in Wisconsin on the federal marketplace Healthcare.gov.

Minnesota's Governor Dayton introduced a plan to offer MinnesotaCare as a public option. He

used the state's authority and the state's own health care marketplace, MNsure. He put together a plan that leveraged federal dollars and the state's large Medicaid pool to add self-employed and small business people. According to the Minnesota Department of Health, the cost would be entirely funded by premiums and tax credits.

GOP controlled Legislators didn't deliver Dayton's request, but Minnesota is a lot closer to moving to a public option than Wisconsin. Wisconsin needs the flexibility of our own marketplace to explore options that work best for our state. That's why I recently introduced a bill to create Wisconsin's own health care marketplace.

Senate Bill 359 and Assembly Bill 445, the companion co-authored by Representative Sargent, creates a unique badger-based approach to a health marketplace. Using innovations to balance high quality, cost control and wide access, Wisconsin can have its own approach.

We can move toward a system that minimizes the everyday hassles of health insurance and eliminates the fear of a loss of coverage just when you need it the most.

Access to affordable, high quality health care is a duty of our society to everyone. Health care for all is a moral responsibility of our people to each other. Finding the best way to pay for and deliver the care should be the topic of discussion. Instead, some public officials propose dropping coverage and cutting state budgets. Harsh talk stigmatizes Medicaid.

Instead, let's share our vision of what health care for all looks like for each of us. And, meanwhile, support leaders who find ways to work together and take steps toward our mutual vision.