

Thank you Chairman McGovern and thank you Ranking Member Cole for inviting me to be here today. My name is Farzon Nahvi. I'm an emergency medicine doctor in New York City and I support Medicare for All.

As an ER doctor, I have the opportunity to help all sorts of people in all sorts of ways. I get to save investment bankers from heart attacks and homeless veterans from hypothermia.

That's what I love about my job -- the idea that I can help anyone with any problem at any time is what attracted me to medicine in the first place.

But over the years, I've learned that it becomes impossible to care for someone when our medical system forces them to fear things like bankruptcy and foreclosure when they seek medical care.

If you ask any ER doctor, nurse, or janitor in this country, you will hear countless stories of patients who came to seek medical care only to walk out in the middle of their treatment "AMA," or against medical advice. They often walk out Against Medical Advice out of concern for the cost of their treatment.

The reality for many people in this country is that seeking medical care means weighing their health against their wallet.

You all already know all the statistics. You already know that 41% of Americans have skipped a visit to the ER in the past 12 months because of cost concerns. And you already know that 45% of Americans live in fear that a health event could lead to bankruptcy.

But I see this every day on the ground level, I have to look these people in the eye, and I want to put some faces on those numbers that you all already know so well.

A few weeks ago, I took care of a patient who I was sure had appendicitis. I recommended a CT scan and we discussed IV antibiotics and possibly an operation. But a short while later this patient pulled me aside and asked me to pull out her IV so she could go home.

Now, this patient wasn't stupid. She was not crazy. She did some research on her phone learned that in some rare cases appendicitis can be treated with antibiotics alone and without an operation, and she asked me if I could just discharge her with a prescription. You don't need to be a doctor to know that this is *far* from the standard of care for appendicitis and an incredibly risky idea. I told her that there were too many things that could go wrong and strongly recommended against it.

She asked me the risks of her plan and I told her the truth. I told her about the possibility of a perforation of her bowels, an abscess formation, sepsis from her infection, and even death. This wasn't an exaggeration, this was the truth. She sat back, asked for some time, thought about it

for a long while but she eventually did decide to leave. In her own words she said, "Thanks doc, I appreciate all you've done, but I just don't know if I'll be able to afford this -- I'm going to take my chances."

In my line of work I often have to tell people that their spouse, their parent, or their child has died -- but I can tell you that watching someone sick walk out the door with something that is completely treatable right here in the richest country in the world is just as awful of a feeling.

About one year ago I took care of a young lady who came in for an overdose on fish antibiotics. She had had a fever, could not afford an ER visit, so decided to go to a local pet store to buy fish antibiotics for her symptoms. The antibiotics came as a packet of powder and the directions were designed for a fish tank. There were no instructions for human consumption. She accidentally overdosed by an order of magnitude, the side effects ended up affecting her brain, she ended up falling down a staircase while on a job interview, and needed to be admitted to the the ICU.

Twenty one years ago, when she was ten years old, my fiance lost her mother because her mother decided to delay medical care for her abdominal pain until only after her stomach cancer had already spread beyond any hope for treatment. A housekeeper raising two daughters, my fiance's mother was worried about the cost of her care and she paid for it with her life.

I'm here today because my patients and my fiance deserve better. These stories and countless others are absolutely ridiculous to be taking place here in the richest country in the world.

All I want is to practice medicine in a world where I no longer have to watch a patient walk out of the ER without medical care that could save their life because they are worried about going bankrupt. All I want is to never see another patient who thinks their best option for medical care is to go to their local pet store. To simply treat someone for a problem so simple as appendicitis and to have human patients take human antibiotics from a human pharmacy are not radical ideas.

From my perspective on the ground, the solution has to involve approaching medical care in just the same way we approach educating our children, maintaining our roads, and supporting our armed forces. This means treating healthcare like any other public good and creating a universal healthcare system like Medicare for All so that when they're at their most vulnerable, my patients never have to make any consideration except to simply do what they need to do in order to get better.

Once again, thank you Chairman McGovern, Ranking Member Cole, and the Rules Committee for allowing me to testify. I'm looking forward to any questions you may have.