

Here's the straight skinny on Medicare for All

The British people have been widely admired for their steady demeanor in times of adversity—stiff upper lip and all that. Until Donald Trump, that is.

In June, our presidential popinjay descended on London with a bombastic proposition that caused the upper lips of the entire British population to quiver at once. There as a guest, and treated to the full pomp of a state visit, The Donald blurted out what he hailed as a “phenomenal” gift in the form of a new US-UK trade deal: He was offering to bring in America’s healthcare profiteers to start privatizing Britain’s National Health Service.

“Of all the forms of inequality, injustice in healthcare is the most shocking and inhumane.” –Dr. Martin Luther King Jr., March 25, 1966

It’s possible that Trump was simply ignorant, unaware that Brits love their NHS, since its socialized plan provides quality care to all without families fearing they’ll be bankrupted or priced out of treatment by private insurance giants, hospital chains, or Big Pharma. Or possibly, he was hornswoggled by the right-wing pontificators of Fox News (Trump’s most trusted policy advisors) and their steady stream of lies about anything with the word “social” in it.

Last year, after seeing (What else?) a Fox News segment reporting that thousands of Brits were marching in protest of their health system, Trump smugly trumpeted that they were fed up with care-for-all socialism. But—oops—the uproar was actually in support of the NHS, demanding that the miserly Tory government strengthen it with “more staff, more beds, more funds.”

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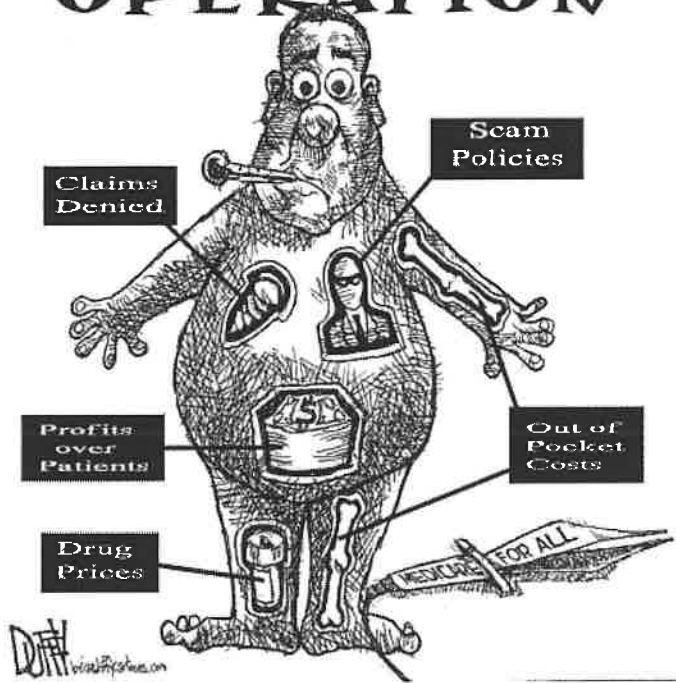
Trump aside, no country that’s even quasi-advanced is going to throw its people into a healthcare future modeled on the USA’s care-denying medical industry. Our for-profit system amounts to Plutocrat-care, providing concierge attention and top-notch treatment to moneyed elites (such as the Trump clan) who, therefore, perceive it as a marvel of free-market efficiency. They never witness the harsh realities that most US working stiffs, middle-class families, students, the poor, and others routinely experience from the most expensive, worst-performing health scheme in the developed world.

Karla Diederich, an intensive care nurse in California, bluntly calls the US industry “barbaric.” She told the New York Times about her friend Nelly Yap, also a nurse, who had cancer and was scheduled for chemotherapy—until her hospital changed owners. She lost her job, her insurance ... and her cancer treatment. “Nelly spent most of her life taking care of other people,” Diederich says, “and when she needed that care herself, it was not there.”



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OPERATION



Cartoon by Brian Duffy

Another nurse, Melissa Johnson-Camacho, recalls: "I had just finished explaining [to a cancer patient] how important it was to take this medication faithfully. 'Every day you skip it is a day that the cancer has to potentially spread,'" she told him. "And then we had to send him home without it," because the insurer wouldn't cover the cost.

Similar nightmare stories abound and most Americans dread they may be next. A nation that only 40 years ago boasted a world-class system of care has been sickened by a corporatized network that treats patients as bookkeeping entries and reduces doctors and nurses to functionaries on the medical assembly line. The hard numbers paint an embarrassing picture:

The US ranks 34th worst among developed nations for the percentage of people without coverage (44 million Americans, including 4 million children)—lower than Chile, Greece, Kuwait, Slovenia, and Turkey.

As many millions of "insured" Americans learn the hard way, high deductibles and co-pays can make treatments unaffordable, i.e., unusable.

Price gouging by drug makers puts essential medicines out of reach; surprise bills from hospitals and clinics drown families in medical debt; and—most commonly—insurance bureaucracies assiduously work their fine print to deny payment for your condition, injury, medicine, surgery, or rehab.

Our country spends the most (more than \$10,000 per year, per person) on a system that often delivers the least. (US life expectancy has fallen to the bottom among wealthy nations.)

Most shamefully, roughly a third of the \$3.5 trillion we pay into the US system each year is sucked up by corporate paper shuffling, advertising, executive pay and perks, expensive headquarters, and other non-care charges. Canada runs its full-coverage programs with less than half (12%) those administrative expenses.

The problem with the system is—Hello—The System! While our doctors and other providers have top-level skills and knowledge, they operate within a fundamentally flawed corporate structure that measures success not in care delivered to the many, but in profits extracted for the few: the investor elites.

Back to basics

What do we want our healthcare system to do? Care for our health! Yours, mine, our families', our country's. But don't look for such straightforward logic or ethics in the labyrinthian industrial complex that now controls the "care" we get ... or are denied. The structure itself must be changed if care and the Common Good are ever to be prized over profit.

The proof of that is made clear by the Affordable Care Act, the admirable attempt passed almost a decade ago to mitigate the effects of unrestrained corporate greed. Dubbed Obamacare, the ACA dramatically decreased the number of uninsured Americans. And yet—because its Democratic authors caved to corporate demands that the profiteering structure be kept intact—Obamacare cannot deliver the universal coverage and range that other (often less wealthy) countries provide.

Don't despair, for a warm glow of hope beckons from the very midst of today's cold, often-nightmarish system. Millions of Americans are doing much, much better through an alternative structure that already delivers superior care for much less: MEDICARE.

This government program pays the healthcare bills of 44 million Americans—those over 65 plus 9 million younger people with disabilities. For more than half a century, Medicare has comforted and benefited so many patients and families that it's now treasured and integral to our people's sense of the Common Good. Yes, the program needs more controls to prevent hospitals, drug makers, and others from overcharging taxpayers and doing unnecessary treatments, but such fixes are included in various bills to extend the successful program to all Americans: Medicare for All.

"What!?!," screech horrified insurance barons and their Koch-headed political acolytes, panicking at the growing popular support for expanding Medicare to everyone. Nothing is as scary to moneyed elites as a powerful populist idea whose time has come. So they've rolled out their Big Lie-Chicken Little-Flimflam Machine, blasting out a fusillade of myths to kill the idea that healthcare is a basic human right that ought to—and can—be available to all. Let's examine four of their biggest whoppers, about Medicare for All (M4A):

MYTH 1

It's totally unaffordable! Trying to cover 330 million people will blow America's healthcare costs through the stratosphere.

Wrong. As shown by other countries, a universal, single-payer system eliminates insurance middlemen, dramatically cuts administrative waste, reins in price gouging, and focuses care on the less-costly approach of improving long-term health. Thus, while M4A would cover every American—from birth to death—it would actually reduce what we pay for the inefficient, insufficient, incomplete coverage provided by today's industrial health complex. Check the numbers:

US health expenditures jumped 16.5% between 2009 and 2016 for corporate-insured patients, while the cost dropped 2% for Medicare patients—despite their having more complicated, chronic, and more expensive problems.

The for-profit system eats up 12% of its budget just on billing and paper shuffling, compared to Medicare's 2%.

Even a 2019 Koch-funded analysis concluded that M4A would cut US

How about Lawmaker-Care for the Rest of Us?

Why, you might ask, does Congress hem and haw about restructuring a profiteering corporate healthcare system that is fundamentally corrupt, exorbitantly overpriced, and disastrously unable to meet our people's health needs? Even though a majority all across the political spectrum has been telling lawmakers in polls, emails, and town hall meetings that fixing America's broken care system is an urgent priority, lawmakers do nothing ... and the problems grow more severe.

One reason is obvious: Corporate powers pour dumpster-loads of cash into incumbents' re-election campaigns and deploy armies of lobbyists to keep them hitched to the status quo. But I also suspect that a less obvious, very personal reason is behind Washington's Big Yawn over the people's plea for reform: Most lawmakers simply don't feel the issue. After all, they and their families have long enjoyed a double dose of the top-quality, socialist care that they so furiously deny to others.

First, they are given big taxpayer subsidies for their insurance plans (you and I pay about 72% of the price of their insurance). So, while right-wing GOPers in Congress decry tax-paid health coverage as a budget-busting, character-weakening horror from socialist hell, they're personally wolfing it down like Halloween candy.

Second, deep inside the US Capitol building, there's a secretive medical center called the Office of the Attending Physician that provides—shhhhh—a full-blown system of healthcare socialism for lawmakers! They just walk in and, on the spot, a host of doctors, nurses, technicians, pharmacists, and other professionals rush to care for them. No appointment, no waiting, no insurance card, and no bill. They get, as a former OAP staffer put it, "The best healthcare on the planet."

In short, members are immunized from the financial pain, fear of denial, and emotional stress inflicted on millions of us commoners by the bureaucratic, greed-driven corporate system. Thus, they feel no visceral urgency to restructure a system that is working splendidly—for them.

To get decent care for everyone, we might start by taking away the pampered care that lawmakers have quietly awarded to themselves.

health spending by \$2 trillion over 10 years. Less ideologically biased studies estimate even higher savings from M4A administrative efficiencies.

MYTH 2

The deficit! Paying for everyone's care will explode government spending and create a crushing deficit.

Wrong. First, taxpayers already foot the bill for nearly two thirds of America's healthcare spending (including Medicare; Medicaid; the subsidies corporations get for their health plans; plus coverage for congressmembers, veterans, and a few other groups). Second, Med-for-All's big savings (as shown above) mean overall expenditures would drop while the quality and quantity of coverage rises. And third, any additional funding needed for full, universal coverage could come from progressive tax mechanisms (e.g. a transaction tax on Wall Street speculation) that don't cost middle-income families a penny.

MYTH 3

Interminable waits! Everybody with a sniffle will pack doctors' offices, meaning week-long waits for appointments and hours-long delays in waiting rooms.

Wrong. This hoary myth about increased wait times under universal care systems has been repeated—and repudiated—so many times it's widely recognized as a cynical, propagandistic lie. Once again, the truth is seen by America's Medicare patients, who are regularly able to get more timely appointments than privately insured people. In fact, delays in the corporate system are growing worse, because so much of doctor and staff time is consumed by insurance company red tape (plus private insurers are increasingly limiting policyholders' choice of doctors). Also, among advanced countries, our corporate-run system produces by far the highest percentage of people who skip treatment because they can't afford it—making some wait times ... eternal.

MYTH 4

The workers! By removing the insurance industry from our national healthcare bills, M4A will abandon hundreds of thousands of employees.

Wrong. Every major M4A bill in Congress includes several transitional years, with substantial funding for training, placement, and other assistance for those whose jobs will not be part of the restructured system. Besides, some new administrative and fraud-protection jobs will be created in the single-payer program, and universal provision of dental, mental health, and other health services will create new jobs as well.

Yes, but...

Yes, Medicare for All is needed. Yes, it makes all sorts of financial and health sense. Yes, it is the right thing to do ... BUT ... how're ya gonna pass it?

It's true that the corporate opponents of M4A are formidable and on the move. The private system is hugely profitable, so its corporate owners are spooked by the recent surge in public and congressional support for expanding Medicare to everyone. (A recent poll found M4A is favored by 7 in 10 Americans, including 85% of Democrats, 66% of independents, and even 52% of Republicans.)

Healthcare giants already spend more than half-a-billion bucks a year on lobbying (the most of any industry), but that spending is now mushrooming as they rush to maintain—by hook or crook—the status quo ethic of profits over care. Also, to nuclearize its arsenal of lies, the industry has funded two new, closely linked political front groups this year: Partnership for America's Health Care Future, which immodestly proclaims itself "America's health care leaders," without mentioning that it's actually a who's who of corporate profiteers; and Coalition Against Socialized Medicine, a collection of the usual front groups funded by the Kochs and other über-rich hustlers of anti-government nonsense. As Lyndon Johnson used to say, they can't make chicken salad out of chicken shit, but since that's all they've got to work with, they've resorted to two cockamamie contentions:

- **First**, they're attempting to terrify voters with the worn-out shibboleth that Med4All is—eeeeek!—"socialism," even reprising the silly, 1950s red-scare tactic of linking government-paid healthcare to Soviet Commies. Really? Guess what? Medicare already provides socialized medicine to millions—who love it and want more! This old bugaboo is simply buggy, and most voters (especially younger ones) aren't fazed.
- **Second**, they're blitzing our screens with ads, talking heads, and politicians 'splaining what a great job

today's profiteering healthcare corporations are doing for us. Again, really? People will gag, guffaw, or both at this ludicrous lie, since almost all of us personally have had awful encounters with parasitic insurance conglomerates, rip-off drug makers, and other cogs in the heartless corporate system.

Despite industry efforts, We the People can finally see the way to a genuinely caring, national Medicare-for-All system because:

- **The present, for-profit system is irreparably broken**, plaguing millions with its steadily growing flaws of exclusiveness, abusiveness, and costliness.
- **A growing majority of Americans** see that we're being robbed of our money, health, and rights, and they're demanding that politicians reject the entrenched interests and produce real change. (At least 48 of our newly elected congressmembers ran on pledges to support M4A or similar health justice programs.)
- **The narcissistic healthcare establishment** has offered nothing but more of the same ol' corporate same ol', counting on the public's "fear" of socialized medicine to defeat significant reform.
- **A new wave of energetic grassroots organizing** to pass M4A is sweeping the country, building a counterforce to the money that elites are spending to protect the status quo. (See "Do Something," right.)

Most significantly, the power of the establishment's money and lies wilts in the face of the moral imperative that is at the heart of M4A: Everyone deserves, as a human right, affordable access to quality healthcare.

DO SOMETHING

The good folks at **Public Citizen** (where Hightower serves on the board of directors) recently released a terrific report: *The Case for Medicare-for-All*. (It's great background reading for the candidate debates!) Find it at: citizen.org.

Make sure your healthcare providers know about the movement for universal health coverage. Many nurses and doctors feel tortured by a system that prizes profits over patients—and they're working to heal the body politic. The 20,000 members of **Physicians for a National Health Program** (pnhp.org) advocate for a universal, comprehensive, single-payer national health program. Our largest union of registered nurses, **National Nurses United** (nationalnursesunited.org), with more than 150,000 members, has been at the forefront of the Medicare-for-All movement.

So ... get involved in your state! Public Citizen and a large coalition of groups we admire are pushing local and state resolutions in support of Medicare for All.

Medicare4allresolutions.org has fact sheets and tools for activists.



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