SHOULDN'T WE TRY SOMETHING THAT ISN'T AS DISRUPTIVE TO OUR CURRENT SYSTEM FIRST, LIKE A MEDICARE BUY-IN OR PUBLIC OPTION?

Medicare buy-ins and public option plans perpetuate current inequities in our system of health care. Band-aid measures on top of the existing commercial insurance systems will do nothing to remove the profit motive from health care. Commercial health insurance will continue to cost patients and taxpayers hundreds of billions of dollars. Even worse, the public option and Medicare buy-in still place limits on coverage and eligibility, restrict the choice of providers, and impose costly premiums and out-of-pocket costs in the form of deductibles and copays. They retain administrative complexity and won't produce the financial savings that we can capture with Medicare for All. Proposing incremental measures actually shores up the market-driven insurance system because private insurance plans could more easily maximize revenue by cherry-picking coverage of only the healthiest people and leaving the public option plans to care for all the sickest and most expensive cases. Sticking with the existing commercial insurance system also does nothing to rein in our skyrocketing costs because every part of the current system is incentivized to maximize revenue. Medicare for All is the only viable solution.

WILL THE GOVERNMENT DO A BETTER JOB THAN PRIVATE INSURANCE?

Yes. Currently, unaccountable insurance companies call the shots on your health care. Because private insurance companies are market-driven corporations, they have an incentive to deny you the care you need. Insurers tell us which procedures are approved or what’s considered unnecessary medical care. Those decisions should not be made by an insurance company, they should be made by your physician or health care provider. Medicare for All puts health care decisions into the hands of you and your doctor instead of insurance companies. Every poll shows Medicare is far more popular than the private insurance system. Many critical societal services, such as seniors’ and veterans’ health care, education, fire and police departments, and infrastructure like roads and sewers, are best funded, controlled, and operated by a public body that we already all support: the government.

WHY SHOULD I GIVE UP A PRIVATE INSURANCE PLAN IF I LIKE IT?

Even the best private insurance plans in this country do not cover the comprehensive list of services without any out-of-pocket costs that Medicare for All does. Under Medicare for All, everyone would have comprehensive benefits and full choice of provider without having to pay perpetually increasing premiums, copays, or deductibles. You would no longer have to deal with changes to your health insurance plan that happen now in the private insurance system when employers renegotiate plans every year. And you would no longer be at the mercy of commercial insurers that suddenly change which doctors or hospitals are in their network.

WILL PEOPLE BE ABLE TO CHOOSE THE DOCTOR, HOSPITAL, OR SPECIALIST THEY WANT?

Of course! Medicare for All does not change your current relationships with your medical providers. In fact, Medicare for All expands choice because you can see any doctor, go to any clinic, and be admitted at any hospital. Medicare for All is completely portable and not tied to any job, any doctors group, or any network. Medicare for All only reforms how health care dollars are collected and paid out to providers; it doesn’t tell you which providers to visit.
I HEAR THAT MEDICARE FOR ALL SYSTEMS LIKE CANADA AREN’T AS GOOD AS OURS. WILL MY CARE GET WORSE UNDER MEDICARE FOR ALL?

No, your care will improve under Medicare for All. Everyone would be entitled to a single, high standard of care. Furthermore, countless research studies and statistics show that the Canadian health care system is far superior to the health care system in the United States. In September 2017, the Canadian health care system was ranked as the 12th best health care system by the United Nations, while the United States was ranked number 24. We also ranked last among high-income nations for our health care system. And on basic health indicators such as average life expectancy and infant mortality, the United States also ranks way behind Canada. While Canadians may have complaints about their system (everybody does), they remain fiercely proud, protective, and satisfied with their Medicare system which has been in place since 1966. As for wait times, studies show that wait times in Canada for clinically urgent and prioritized medical care are actually shorter than in the United States. And unlike the guaranteed health care system in Canada, tens of millions of people in the United States can’t even access medical care because they have no health insurance or can’t afford to use their insurance because of the high out-of-pocket costs. They may wait years or decades before getting that mammogram and, by then, it was too late.

CAN THE COUNTRY AFFORD MEDICARE FOR ALL?

Yes! In fact, Medicare for All will save us money. What we can’t afford is our current wasteful, unsustainable health system where upwards of 20 percent of every health care dollar gets diverted to insurer and Big Pharma profits, marketing and advertising, million-dollar CEO salaries, and billing, instead of being used for patient care. The United States currently spends more money on health care per capita than any other country, despite the fact that tens of millions of Americans don’t get the healthcare they need, and our health outcomes are worse than many other industrialized countries. Medicare for All would save trillions of dollars by reducing administrative costs, reducing the outrageously high prices of prescription drugs, and stopping corporations from profiting off patient’s health. In fact, studies have shown that Medicare for All would save the country up to $5.1 trillion over 10 years. Even conservative think tanks like the Mercatus Institute have shown that the program would cut overall health spending by up to $2 trillion over 10 years. Medicare for All will provide more health care, while costing less money.

WILL MY FAMILY PAY MORE MONEY FOR HEALTH CARE UNDER MEDICARE FOR ALL?

Simply put, no. Studies show that the average family will pay less than they currently do for health care once you add up all the “private taxes” that we now pay out of pocket for commercial insurance: our monthly premium contributions, annual deductibles, copays, and all the surprise fees for lab tests, scans, out-of-network treatments, and other random bills. The average family of four with employer-sponsored insurance in 2018 spent $28,000 on health care, according to the Milliman Medical Index. And don’t forget to factor in everything people now pay out of pocket for dental and vision, which are not covered by most medical insurance plans. The Medicare for All Act of 2019 would cover the costs of all healthcare services, including vision, dental, long-term care, and prescription drugs, and patients wouldn’t have to pay any out of pocket costs.

ISN’T MEDICARE FOR ALL A POLITICAL PIPE DREAM?

That’s the same thing many people said about passing the Civil Rights Act, banning child labor, or extending the vote to women. Health care is a basic human need and we cannot accept this kind of defeatist thinking. Now is the best time in recent history to pass Medicare for All. Polls show that 70 percent of people in America support Medicare for All, and an unprecedented number of lawmakers who publicly support Medicare for All are now in elected office. By organizing together, we will have the political will to pass Medicare for All. This is how all major social change movements throughout history have succeeded!