Guaranteed Healthcare for All

CARA Convention 2021
HEALTHCARE IN THE U.S. IS BROKEN
LACK OF HEALTHCARE KILLS

➔ 28.9 million US residents are uninsured, and 60 million more are underinsured;

➔ 461,000 US residents died in 2018 due to lack of national healthcare insurance;

➔ 13% of US residents adults (~34 million people) know at least one friend or family member who died in the past 5 years after not getting needed medical treatment because they couldn’t pay for it;

➔ About 1/5 US resident adults report not being able to pay for medicine in the past 12 months.
California Uninsured Rates in 2018:

➔ 11.5 percent of African Americans were uninsured compared with 7.5 percent of non-Hispanic whites.

➔ 19.0 percent of Hispanics were uninsured compared with 7.5 percent of non-Hispanic whites.

➔ 21.8 percent of American Indians and Alaska Natives were uninsured compared with 7.5 percent of non-Hispanic whites.
The U.S. is the only country without guaranteed healthcare!

➔ The U.S. ranks #27 in life expectancy*

➔ The U.S. ranks #46 maternal mortality rate (how many women die during pregnancy or during the 6 weeks after)**

➔ The U.S. ranks #45 For the under-five mortality rate (the probability of dying by age 5 per 1000 live births)*

*2017 data
**2015 data
EVEN EMPLOYER BASED INSURANCE CAN'T SAVE YOU...

<table>
<thead>
<tr>
<th>Problem Description</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes to any affordability problem</td>
<td>40%</td>
</tr>
<tr>
<td>Problems paying/inability to pay medical bills</td>
<td>27%</td>
</tr>
<tr>
<td>Difficulty affording... medical bills before meeting deductible</td>
<td>25%</td>
</tr>
<tr>
<td>...unexpected medical bills</td>
<td>20%</td>
</tr>
<tr>
<td>...co-pays for prescription drugs</td>
<td>14%</td>
</tr>
<tr>
<td>...co-pays for doctor visits</td>
<td>13%</td>
</tr>
<tr>
<td>...monthly/health insurance premiums</td>
<td>9%</td>
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</tbody>
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THE COVID-19 PANDEMIC
Despite the high cost of our healthcare system, it has failed to meet the challenge of the COVID-19 pandemic.

This failure has had a disproportionate toll on communities of color who have been infected and killed by COVID-19 at higher rates.
MEDICARE FOR ALL
FAIR HEALTHCARE TERMINOLOGY:
WHAT IT IS...AND ISN’T

- Universal Coverage
- Guaranteed Healthcare
- Medicare for ALL (M4A)
- Single Payer Healthcare
- Socialized Medicine

LET’S TALK ABOUT IT...
A VISION FOR THE FUTURE: M4A

- **Equality**
  We demand a single standard of care for all

- **Justice**
  We have a right to health

- **Democracy**
  We exert popular control over our healthcare system
PRINCIPLES OF A FAIR HEALTHCARE SYSTEM

- Guaranteed healthcare for all: Everybody in, nobody out
- Comprehensive coverage for life
- High quality
- Costs less
- Equity
- Freedom for all: Mobility and career flexibility
- Protection for healthcare industry workers
GUARANTEED HEALTHCARE FOR ALL: EVERYBODY IS IN, NOBODY IS OUT

- All residents are covered *regardless* of immigration status;
- Care you need, when and where you need it;
- Eliminates barriers to care including premiums and other out-of-pocket costs.
COMPREHENSIVE COVERAGE FOR LIFE: IT’S INCLUDED!

➔ Cradle-to-grave
➔ Primary and specialty care and inpatient services
➔ Dental
➔ Vision
➔ Audiology (hearing aids)

➔ Reproductive health
➔ Expanded services for individuals with disabilities
➔ Long-term care, incl. home-based care
➔ Substance abuse disorder services
➔ Mental health coverage
COMPREHENSIVE COVERAGE: GUARANTEED MENTAL HEALTHCARE

- Receive care when, how and with who you want!
- No need to hassle with insurance coverage.
- NO OUT-OF-POCKET COSTS.
COSTS LESS: IMPROVED MEDICARE FOR ALL IS CHEAPER THAN OUR CURRENT SYSTEM

Medicare for All has much lower administrative costs and takes out the profiteering.

We all pay less and get more care!

Source: Runaway Inequality and the Crisis of Healthcare Workbook by DJDI
The way we bargain for healthcare benefits is unsustainable.

More and more of our bargaining power goes just to keeping our healthcare benefits.

Healthcare insurance costs keep going up: employers keep shifting more costs onto us.

Relying on our employers for healthcare also weakens our ability to strike—or even to threaten to strike.

If our employers weren’t spending money on healthcare, that money would be on the bargaining table for wages, pensions, staffing and other improvements we want.
SUPPORT FOR M4A
THE GENERAL PUBLIC SUPPORTS M4A

• Fox News Poll: 72% of voters favor a “government run healthcare plan”

• Not ONE Democratic Congressional Candidate that supports ‘Medicare for All’ lost their election

• Americans believe in basic public goods!
WHAT'S THE HOLD UP?

M4A NOW!
Single Payer Policy and Legislative Efforts in California

• 1994: Prop 186 Failed (73% NO; 27% YES)
• 2003: SB 921 (Kuehl) Didn’t Pass in Assembly
• 2005, 2007: SB 840 (Kuel) Vetoed by Gov. Schwarzenegger
• 2009, 2011: SB 810 (Leno) Vetoed by Gov. Schwarzenegger
• 2017: SB 562 (Lara, Atkins) Didn't Pass in Assembly
• 2021: AB 1400 (Kalra, Lee, Santiago) Currently a two-year bill, in Assembly Rules waiting to be assigned to a committee
Democratic Party majorities in Congress and the Biden/Harris Administration put healthcare reform on table;

CA’s Attorney General Xavier Becerra’s confirmation to lead Health and Human Services (HHS) puts proponent of Medicare for all in charge of approving state universal healthcare programs;

Negotiating a Federal Waiver with HHS to obtain money and program approval will enable California to guarantee healthcare to its residents in a universal care system;

Healthy California Now coalition is broadening support for single-payer organizing to include labor unions and community organizations;

City Councils, Labor Councils, and Democratic County Committees have passed resolutions in support of Medicare for All-type reform in California.
We must hold Governor Newsom to his promise to do single-payer reform in California.

Governor leadership changes the issue from “whether” to do single-payer to “how” to do it.

Specifically, his administration needs to enter into negotiations with the federal Health and Human Services (HHS) Department to obtain federal resources and support for a universal healthcare system in California.
FEDERAL SUPPORT REQUIRES A “WAIVER” TO SET UP Medicare for All IN CA
WHAT WE CAN DO!

- Pass a resolution
- Call on the Governor to deliver state Single Payer
- Talk to your local or statewide representative
- Talk to your family, neighbors and co-workers about M4A
- Write a pro-M4A letter to the editor
- Promote M4A on social media and to organization members
Q and A
JOIN THE MOVEMENT!

www.HealthyCA.org