

# PNHPWW 5<sup>th</sup> Annual Public Meeting Summary



*It's Time to Add Your Voice*

## Health Care Reform? What's Next?

This was a very encouraging meeting with over 300 attendees. This is the first time we paid for 30 radio promos that ran for 5 days prior – pushing the meeting, our web site, and may have helped with turnout and certainly increased the visibility (audiality?) of Medicare for All. Thanks to Bob Wickline and Ken Fabert for putting this together.

The program was varied and all the segments elicited a spirited audience response. We had speakers, an award, video, a short sign-a-long, and a Q&A session. The agenda was packed – but very few left before the lights went down, even though we ran well past our scheduled 9:00pm closing time. Pirate TV videotaped the event and we hope to put some of the highlights on the PNHPWW web site.

PNHPWW Chair Don Mitchell welcomed everyone and gave a brief summary of our chapter's 2009 progress and events.

Our "**2010 John Geyman Health Justice Award**" was presented to Sarah (Sherry) Weinberg, longtime single payer activist. John Geyman – is a Board Member of PNHPWW, Past Pres national PNHP, Past Chair of the Family Medicine Department at the UW, and author of many key articles, blogs and books on health care reform and why we need to fight for a publicly financed health care system that includes everyone.

Sherry served her community for 27 years in the private practice of Pediatrics. She joined PNHP in the mid 90's and 10 years ago was a leader in the "Health Care 2000" initiative which fell short of the required signatures to be placed on the ballot, however, the networking around that effort led to the formation of what is now Health Care for All – Washington, of which she is a founding member and for which she edits its newsletter. She helped author the Washington Health Security Trust, our state single payer bill that was introduced in our legislature in 2008 with 23 co-sponsors and received hearings in both the House and Senate Health Committees.

Sherry can always be counted upon to critically analyze various reform proposals & put on paper a strategy on how we can move forward. Congratulations Sherry!

**The Wicklines Music & Video**— Bob, Lynda and Marcee Wickline and Karla Jo Tupper led the audience in singing the Mad as Hell Doctors anthem, “Health Care for All,” shown with an accompanying video of many Congressional (bad) actors, and the good MAH Doc’s on tour.

### **The Speakers:**

**Jim McDermott, MD**, US Congressman, 7th CD – Jim focused on where we are with Congressional legislation. He believes a bill will pass, but likely without a public option. It will be based on the Senate bill with House amendments adding more subsidies for people with low income to pay premiums for private insurance, and increased dollar amounts for Medicare and Medicaid via the reconciliation process. It will not be good on preexisting conditions – too many carve outs and too far in future – and we will have to fix it later.

He is against “starting over,” believing the most important thing is to get something started. What is passed won’t be the final product that goes into effect. As per the history of Medicare and Social Security

We have an economic system based on free enterprise – how we change this for health care is a real problem.

President Obama’s recent Health Care Summit – was designed to “take the clothes off the Republicans” who offer Americans “more skin in the game” and only catastrophic insurance. They are really only about getting nothing done, as if reform gets going “we (Repubs) are going to lose – we’ll have Barack for 8 years and the Dems forever.” Dems knew the Repubs wouldn’t come together with them, but had to go through a year of watching it.

On insurance reform – we need to repeal the McCarran-Ferguson Act that prevents regulation at the national level. Repeal passed the House but won’t pass the Senate. Can’t do this in reconciliation process.

France – has the best health care at half the price – but run through heavily regulated private insurance (like a utility). No public option. It’s possible to put together something like that here in the US.

Conclusion – “We are making the biggest social change in the last 100 years, at least.” Economics will drive our system into the ground, so that we need to have single payer or a heavily regulated private system like France.

Doesn't accept the idea of going back to square one. “That is suicide.” Advice to PNHP – “keep agitating, we need you to agitate for us.”

**The Mad as Hell Doctors Tour & Video** – – Mike Huntington and Paul Hochfeld showed a video of their 42-stop tour across the country pushing single payer/Medicare for All, ending in a DC rally addressed by Dennis Kucinich. We need to engage all factions of society & political persuasions in the cause of HC justice, – that's what the tour was all about.

About the “camel's nose in the tent” incremental argument – “the problem is the camel is grazing in the field while a pig in camel clothing slips in. They are afraid of the individual mandate, more public money going to subsidize people to buy a flawed product and an emerging stronger insurance industry. Paul - “If we need to take baby steps, that may be the only way to go, and, in all humility, I don't know, but it may take us farther away from where we want to go.”

**Donna Smith**, National Health Reform Activist, National Nurses United/California Nurses Association

“Larry and I weren't selected for “Sicko” because we were unique, but because we were not. We did what we thought was required of us – bought a home, raised six kids, bought health insurance.” Then Larry had three heart surgeries. “We scrapped by – working harder, not buying as much.” Then Donna got cancer & thought “if I die anyway, make it quick, so I don't bring down the family with me.” She had surgery, but went back to work after 4 days with an abdominal drain in place because she didn't want to lose her insurance. Complications developed requiring more surgery.

Her wages were garnished to pay medical expenses. The family had to declare bankruptcy four days before Larry's artery bypass because they were unable to buy meds, pay insurance premiums and necessary co-pays.

“Bankruptcy is a horrible situation, it's forever with you. No credit cards, shame, friends & family wondering if you will be asking for loans (again).

Thank God for the California Nurses Association that offered a job & health insurance.”

In 2007, Donna, was the first person to testify before Congress, under oath, about bankruptcy. She testified - "I trusted Congress, I did what I thought I was supposed to do – but you failed to protect me."

Though acknowledging Jim McDermott for his long-term work for health care justice and for his single payer bill, HR 1200, Donna pointed out that Congress hasn't protected Washington State during the 20 years he has been in office. 15,000 preventable deaths have occurred, simply due to lack of health insurance - 780/year, two every day; 500,000 Washington residents declared bankruptcy in last 20 years - 23,000 last year. "Crime? ---- they got sick." Donna trusts that McDermott will continue to fight for what's right.

"Here's what I look at - I don't care what you call it – the measure of any piece of legislation going forward is 1) does insurance sold to protect my health allow me to access the care I need? and 2) does it protect my wealth so that I will be able to enjoy my later years with husband and family? The current legislation might or might not – it's a crapshoot. As Quentin Young says – "there may be some small steps we can take that move us in the right direction – BUT they must be in the right direction.""

What about the Medicare for All movement? We are gaining strength. We will get there, but we need to keep fighting, pushing. What can we do?

Use all our arguments; try to bring in all sectors of society. Deal with our reps –ask tough questions, run against them. Get more nurses engaged - the most trusted profession. Nurses United has 150,000 members.

States may hold the key – tip a state or two over to single payer and it would roll across the country as per Saskatchewan and Canada. California and Pennsylvania are in the forefront.

Ask our reps to move up the time when states can experiment with their own legislation from the Senate Bill's current 2017 until 2013, or even sooner.

Create our own media via YouTube or sending pictures and stories to newspaper editors/writers.

Reach out to all segments of our society with economic, policy and moral arguments. We can't call ourselves a just nation until all are protected.

**Larry Kalb**, Candidate for Congress, Wa 2nd CD, Pres HCFA-Wa

Larry's motivation to run is that he wants to make sure all the people are represented. On the campaign trail people tell him "this is not the health care reform we expected, we expected the insurance companies to be kicked out of this system." "What we got is the biggest taxpayer giveaway in history to the people who caused this calamity in the first place. That is wrong!"

The Congressional bills imply care, but don't guarantee it. The insurance industry gets more money to buy politicians.

What do we do? We need to train organizers, a la the Wellstone program to organize to get real progressive candidates elected to Congress to stand up for us.

We don't have enough tax revenues for our infrastructures. Health care is diverting funds from all sorts of programs, especially education.

"What is true Health care reform? Look at France" where Larry lived 10 years.

"Ninety-nine percent of residents have insurance coverage that covers 100% of the medical expenses of serious illness. Very generous maternity benefits. How can the French do this at half the price we pay? Because they don't have an investor owned system as we do where the "market" determines who gets care and who doesn't."

What health care reform platform will Larry run on? - One finance system with a budget. No direct to consumer marketing. Equal access to equal care (only one tier). A law against third parties interfering in the doctor/patient relationship.

"We need to make things happen now. When we raise our voice, we get nerve to raise it even louder. Others hear us and get the nerve to add their voices. Soon it's our whole community demanding change."

### **Q&A with Speakers**

***Q. If the latest bill passes, what are the three worst provisions and how can we fix them? And, if nothing passes, how do we get Medicare for All back on the table?***

**Rep McDermott:** We need a system where pre-existing conditions is a moot point. This is the hardest thing to do in insurance reform. And it will be hard to do using the reconciliation process. With the individual mandate, we need better subsidies or people won't buy in. This can be fixed in the reconciliation process. Business has no mandate and it won't be in the final bill.

**Donna Smith:** Pres Obama reversed himself from what he said on the campaign trail and now endorses the individual mandate and taxing “Cadillac” health benefits. As health care costs continue to increase, more and more people will have increases in insurance costs that will put them in this category, as in Massachusetts.

People feel disenfranchised again. Nurses oppose the mandate to buy private insurance – the first time in history people will be forced to buy a private product. There will be a voter backlash for the Democrats. People may stay at home in the next election.

Tough road for all of us single payer advocates. But need to keep pushing, as this is a human rights battle.

**Larry Kalb:** the “public option” has four tiers and is inequitable. Those who can afford better care will get it. If the bill is affordable, why do I need “affordability credits” that go directly to the insurer? Larry would not support the legislation as written.

***Q: Is something better than nothing? Should we accept this legislation? Is any incremental step OK?***

**Jim McDermott:** Medicare has been amended every year since it passed. Social Security has had 500 changes since first written. You never start with a perfect bill. We need to pass a bill and then push for corrections. A huge number of things will have to be changed, but we need to start by passing a bill. Jim compared delaying a reform bill now with the effects of Seattle voters voting down mass transit bills over the past 50 years “because they weren’t perfect,” and the terrible traffic congestion we now have.

Doctors drive and control costs now. It would be better to have the Congress carry the responsibility to determine the level of health care spending.

**Donna Smith:** “I don’t feel good about this bill, but have the nurses said “kill the Bill? – no.” We don’t have a final bill and are waiting to see the final product. We need to keep fighting these bills on every single issue.

We need campaign finance reform.

**Larry Kalb:** “I’m against this bill because it gives nearly total domain and policy over to private insurance companies, unlike Medicare and Social Security that are public programs.

**Q: What about Pres Obama's Plan?** – A vision, not legislation.

**Q: How can we make common cause with other progressive movements such as those focusing on climate change, environmental protection, anti-war, etc?**

**Larry Kalb** – Link health care to a human right, show how waste in health care expenses affects other necessities - health care inflation chews up funds for other issue-oriented groups. Coordinate talking points.

**Donna Smith:** the Coalition for Guaranteed Health Care has lots of members such as the Cal Nurses, PNHP, Health Care-Now, PDA, AFL-CIO, NOW and others representing 20,000,000 members. The challenge is to getting everyone to move forward with one voice. The future of the AFL-CIO, with 11 million members is single payer (Res 34).

**Jim McDermott:** “An intern of mine from the Czech Republic carries a health care card good in 26 countries. We live in a country where our religion is the free enterprise system with the market as its alter, that is supposed to solve everything. Europe has an understanding that you can't do it by yourself. Some things have to be dealt with by society. What's missing here is the issue of the common good and working together. “Right now there is not enough pain for people to quit having their differences with one another.” We have to have huge problems with health care, jobs, pensions, etc., but people are saying the free enterprise system is the way to get it fixed. It will never fix health care.”

“The president immediately took single payer off the table and committed to private insurance – and this route is very hard to pull out of.”

**To end this summary with a quote from each of our main speakers that, indeed, sums up the whole meeting: –marching orders for single payer advocates:**

**Jim** - Tough road for all of us single payer advocates. But need to keep pushing, as this is a human rights battle.

**Donna** - Reach out to all segments of our society with economic, policy and moral arguments. We can't call ourselves a just nation until all are protected.

**Larry** - When we raise our voice, we get nerve to raise it even louder. Others hear us and get the nerve to add their voices. Soon it's our whole community demanding change.