

Everybody In!

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Campaign launched to include single payer in Democratic Party platform

It strains belief, but even with 81% of Democrats in support of "Medicare for All" healthcare reform, the official platform of the Democratic Party has not included explicit support for single-payer healthcare since 1972, when the Party called for establishing "a system of universal National Health Insurance which covers all Americans . . . federally-financed and federally-administered."

Healthcare-NOW along with our national allies have launched a campaign demanding that the Democratic Party Platform include explicit support for single-payer reform this year. Along with National Nurses United, RootsAction, Progressive Democrats of America, the Labor Campaign for Single Payer, and others, we put up an online petition that generated 18,000+ signatures in its first week alone and was hand-delivered to the Party's Platform Drafting Committee.

The campaign will continue all the way to the Convention floor in Philadelphia, which will convene just days before Medicare's 51st Anniversary on July 30.

You can sign or share the petition here: <http://bit.ly/1OeUEh1> HCN!

TAKE ACTION

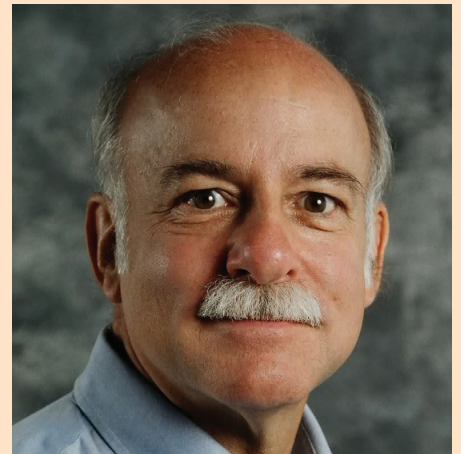
PETITION CALLING ON NATIONAL DEMOCRATIC PARTY TO INCLUDE "MEDICARE FOR ALL" IN 2016 DNC PLATFORM

<p>Sign the Petition</p> <p>First Name *</p> <input type="text"/> <p>Last Name *</p> <input type="text"/> <p>Email *</p> <input type="text"/> <p>City *</p> <input type="text"/> <p>State *</p> <input type="text"/>	<p>Goal</p> <p>18481 Supporters 18000 Needed</p> <p>Petition</p> <p>Given the fact that the US spends 2.5 times the average of other industrialized countries, yet we don't provide healthcare to everyone; and that Medical outcomes such as infant mortality and life expectancy, and equality of access, are much better in other countries; and that 58% of all Americans support Medicare for All, including 81% of Democrats, we hereby call upon the Democratic Party to adopt into the Platform of the Democratic Party the following language from the AFL-CIO resolution on healthcare adopted at their most recent convention:</p> <p><small>*While making various changes would improve the ACA, the social insurance model, single-payer system, is our goal, and we will continue to fight for it. Health</small></p>
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ColoradoCare on the Ballot: An Interview with Ivan J. Miller

Ivan J. Miller is a clinical psychologist who has a broad background working in public mental health, private practice, as an advocate, and a health care economist. Since 1994 he has dedicated himself to achieving universal health care, and has been in the leadership of ColoradoCare since 2008, when the development of this proposal began.



Ivan J. Miller, ColoradoCareYes Executive Director.

HealthCare-NOW: What is Amendment 69, ColoradoCare?

Ivan J. Miller: ColoradoCare covers Coloradans like Medicare covers seniors. Everyone pays in, and everyone is covered. ColoradoCareYES volunteers gathered 158,000 signatures to place Amend-

Over 18,000 people signed the petition calling on the DNC to support "Medicare for All" in its first week alone.

... continued page 2

Ivan J. Miller... from page 1

ment 69 on the November ballot.

It is financed with a 10% Premium Tax on payroll and non-payroll income. Like the Medicare tax, the payroll tax is split between employer and employee, with employers paying 6.67% of payroll and employees, 3.33%.

ColoradoCare operates as a cooperative business owned by the residents of Colorado – Colorado's patients, providers, and employers. It is protected as a Colorado Constitutional Amendment and governed by an elected board that is independent of the Legislature and Governor, shielding it from partisan politics.



Benefits are more comprehensive than the ACA and Medicaid. There are no deductibles, no copays for preventive or primary care, and modest copays are waived for financial hardship.

ColoradoCare will reduce Colorado's health care costs by 15% and simplify the system by eliminating \$6.2 billion of insurance-related admin-

istration and profits. It wraps around the federal programs that cannot change – Medicare, V.A., TriCare, and Indian Health Services.

HCN: Who are your opponents?

IJM: The Koch brothers are financing a door-to-door campaign. But it is Coloradans for Coloradans that is leading the

A leading single-payer activist in Colorado spreads the word via his license plate.

opposition. Coloradans for Coloradans is funded 99+% by corporations representing national Big Medicine and the insurance and pharmaceutical industries, with insurance companies being the largest donors. We have nicknamed them Corporations for Corporations. They are conducting an extensive and sophisticated misinformation campaign and gathering funds for an air war of lies later in the campaign.

The battle has boiled down to the Kochs, health care insurance giants, Big PhRMA, and Big Medicine profiteers with

Healthcare-NOW! launches book club

*By Stephanie Nakajima,
HCN*

This March, Healthcare-NOW rolled out a wild and crazy social experiment: the online Single Payer Book Club!

It was the first offering of our brand new Single Payer School, an online educational space that will provide policy and organizing trainings for activists. 35+ book clubbers from all over the country participated in weekly discussions of Gerard Boychuk's National Health Insurance in the U.S. and Canada, a historical analysis of why single-payer healthcare was won in Canada but never in the United States. You can sign up at: <https://singlepayerschool.healthcare-now.org>

Boychuk's provocative explanation got people talking. Think of the usual reasons you have heard about why the U.S. doesn't have a national health insurance plan. For us at Healthcare-NOW, we'd heard a variety of explanations, including that Americans are too individualistic and committed to free market solutions; that after World War II, employer-provided insurance simply took

root, weakening efforts towards a public plan; that the American Medical Association vilified government insurance as "communism"; etc.

Boychuk challenged these narratives and offered a compelling new take: attempts to pass national health insurance plan after WWII failed primarily because of the challenges of desegregation and the politics of race in the South.

Support for a national health plan, historically, has been high – even in the South, which today has some of the lowest levels of support. However, as it became clear that a national health plan would not be segregated – as many of the public programs of the time were, including Social Security – support in the South dropped. Ultimately, Northern Democrats were never able to overcome opposition by the Southern Dixiecrats, leaving the party's leadership to give up on a national plan and pursue Medicare instead. So closely was success on the civil rights front tied to the success of health reform, that only after the Civil Rights Act was passed did Medicare pass as well.

Compromises made to win over the opposition were sold as "protections against federal control". The favorable payment schedules to doctors and hospitals that were built into Medicare ensured that it would become financially unstable, and have since stymied efforts to expand the program.

On the Canadian side, Boychuk explores how territorial politics forced the Canadian national government to pursue a federal plan, exploring especially the tensions between the national government and the province of Quebec. Nation-building aspirations – not a commitment to egalitarian values – was what drove the push for single-payer in Canada. However, in the 30 years since the plan was adopted, healthcare has become a unifying force in Canada and crucial to national identity.

We'll be holding more book clubs in the future, which will be announced through our general email list. For those interested in National Health Insurance, all the video discussions and online forums that have been posted will remain available on the site! Register for the Single Payer School at: <https://singlepayerschool.healthcare-now.org> **HCN!**

millions posing as Coloradans vs. real Coloradans — patients, providers, and small employers who want quality health care for all with small donations.

HCN: What are the grassroots strategies that you have used to organize and how can people help?

IJM: ColoradoCare is a grassroots movement by the patients, providers, and employers of Colorado. We are social media and door-to-door based. We have strong grassroots support, but the establishment groups and individuals are frightened of retaliation and have not come forward.

Some ways people can help:

- » Go to our website, coloradocare.org, and sign up as a volunteer to make phone calls and sign up as an endorser.
- » Ask your friends and e-mail lists to support, endorse, and follow us on Facebook. Send updates to your friends. We need all of the national support we can get to combat the opposition.
- » Donations are the lifeblood of a campaign, and our opponents are gathering money from across the country. We need help from our friends nationwide. Send donations, ask your friends to donate,

and ask your organizations to use their e-mail lists to help with donations.

HCN: Has Bernie Sanders' Medicare-for-All campaign impacted your campaign?

IJM: Bernie has only helped us. He brought single payer into the national debate, and Medicare-for-All is polling extremely well. Even Bernie's critics avoided opposing Medicare-for-All and talked only about single payer. Our strongest support group is people under 40 who face decades of health care insecurity and have been inspired by Bernie.

HCN: How is Colorado's success related to the national

movement for Medicare-for-All?

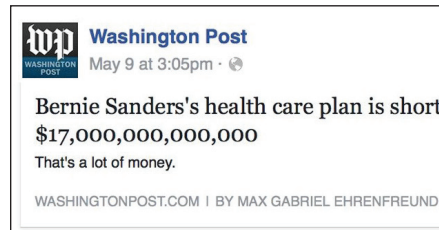
IJM: Proponents, opponents, experts, and critics agree. Washington is too controlled by lobbyists to do anything as significant as Medicare-for-All. The states must lead. What happens in Colorado in November will have a profound effect on the movement. If Colorado succeeds and shows it can be done, like we did with ending marijuana prohibition, other states will follow. Once a few states show how much better it is without the insurance industry, the people will have the momentum to win the battle with the insurance industry and Big Medicine in Washington. **HCN!**

Single payer study wars

By Ibrahima Sankare

Contradicting over 40 previous state and national single-payer research studies, the Urban Institute in May released a study claiming that Bernie Sanders' single-payer plan would actually increase healthcare costs, and raise the deficit by \$18 trillion over the next decade. This claim, which in effect portrays single-payer as impractical, is based on the same "hand-waiving" assumptions as a similar report released by economist Kenneth Thorpe in January. Both the Urban Institute and Thorpe assume that single-payer would lead to minimal savings and have little impact on rising healthcare costs, and additionally that it would lead to massive utilization increases by patients.

David Himmelstein and Steffie Woolhandler (Physicians for a National Health Program) and Gerald Friedman (University of Massachusetts – Amherst, Healthcare-NOW board member) have published critiques of the Urban Institute's report where they thoroughly expose their unsubstantiated assumptions and reiterate



The Washington Post used the Urban Institute's flawed study to imply that the Sanders' single-payer plan was financially impossible.

that single-payer leads to large administrative savings, reduce prescription drug costs by using the country's collective purchasing power, and will not cause massive utilization increases (which are far beyond what any other country that transitioned to single-payer experienced) that our current delivery system can literally not accommodate given the current supply of healthcare personnel and hospitals.

This marks a new phase in our movement: the start of what we're calling "the study wars." Previously, even the most conservative estimates of single-payer reform

showed that we can cover everyone at lower costs.

Here's how you can take action:

- » Healthcare-NOW launched an online petition asking the Urban Institute to retract their study. The petition has currently more than 1,800 signatures. Add your name now: <http://bit.ly/uipetition>
- » We are regularly updating a Single-Payer Guide to the 2016 Presidential Elections on HCN's website (<http://bit.ly/hcn2016>), which you can turn to for talking points about the study wars and more.
- » In the coming months we are planning to launch an online guide for single-payer studies, which will rate the 40+ studies on single-payer and identify "best practices" in terms of methodology and data sources. We believe this guide will influence future studies to be more accurate, and let us quickly discredit the hack jobs. Stay tuned! **HCN!**

41% of Republican-leaning residents support single payer healthcare

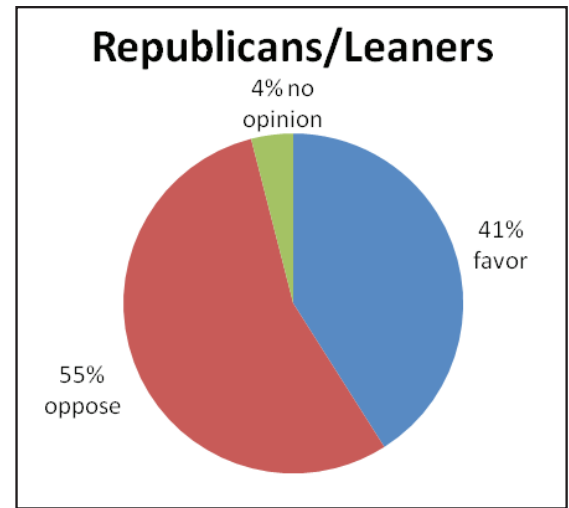
By Benjamin Day, HCN

A stunning mid-election poll by Gallup found that national support for single-payer healthcare remains strong at 58% of the population, despite a massive misinformation campaign attempting to discredit Bernie Sanders' single-payer proposal, as well as conservative attacks on Donald Trump's past support for single-payer reform.

Unlike previous polls, Gallup tracked the support of both Republicans and Republican-leaning Independents,

finding that 41% of these two groups combined favor "replacing the Affordable Care Act (ACA) with a federally funded healthcare program providing insurance for all Americans." The question did not use the phrase "Medicare for All," which generally polls better than "single-payer healthcare" or descriptions that focus on federal financing.

Check out Healthcare-NOW's complete Single-Payer Guide to the 2016 Presidential Elections for more polls, election-season analysis and resources here: <http://bit.ly/hcn2016> **HCN!**



An overwhelming majority of Democrats and Democrat-leaning Independents support replacing the ACA with a universal "federally funded healthcare program" this election season, and they are joined by a large share of Republicans and Republican-leaning Independents.

Take Action for HR676!

Representative Conyers' bill would create single-payer system, "expand and improve Medicare for all."

Rep. John Conyers is the lead sponsor of HR676, the Expanded & Improved Medicare For All Act, which currently has 62 co-sponsors. HR676 is the flagship legislation for the single-payer movement, which would establish healthcare as a right for all residents and save billions for families and employers. If you don't see your Representative listed as a co-sponsor below, make sure to call the Capitol Switchboard at (202) 224-3121 to be connected to your Representative and ask them to co-sponsor HR676!

Rep. Adams, Alma S. [D-NC-12]
 Rep. Bass, Karen [D-CA-37]
 Rep. Beatty, Joyce [D-OH-3]
 Rep. Brady, Robert A. [D-PA-1]
 Rep. Cartwright, Matt [D-PA-17]
 Rep. Chu, Judy [D-CA-27]
 Rep. Clark, Katherine M. [D-MA-5]
 Rep. Clarke, Yvette D. [D-NY-9]
 Rep. Clay, Wm. Lacy [D-MO-1]
 Rep. Cleaver, Emanuel [D-MO-5]
 Rep. Clyburn, James E. [D-SC-6]
 Rep. Cohen, Steve [D-TN-9]
 Rep. Cummings, Elijah E. [D-MD-7]
 Rep. Davis, Danny K. [D-IL-7]
 Rep. DeSaulnier, Mark [D-CA-11]
 Rep. Doyle, Michael F. [D-PA-14]
 Rep. Edwards, Donna F. [D-MD-4]
 Rep. Ellison, Keith [D-MN-5]
 Rep. Engel, Eliot L. [D-NY-16]
 Rep. Farr, Sam [D-CA-20]
 Rep. Fattah, Chaka [D-PA-2]
 Rep. Green, Al [D-TX-9]
 Rep. Grijalva, Raul M. [D-AZ-3]
 Rep. Gutierrez, Luis V. [D-IL-4]

Rep. Hastings, Alcee L. [D-FL-20]
 Rep. Honda, Michael M. [D-CA-17]
 Rep. Huffman, Jared [D-CA-2]
 Rep. Jackson Lee, Sheila [D-TX-18]
 Rep. Jeffries, Hakeem S. [D-NY-8]
 Rep. Johnson, Henry C. "Hank," Jr. [D-GA-4]
 Rep. Kaptur, Marcy [D-OH-9]
 Rep. Kelly, Robin L. [D-IL-2]
 Rep. Lawrence, Brenda L. [D-MI-14]
 Rep. Lee, Barbara [D-CA-13]
 Rep. Lewis, John [D-GA-5]
 Rep. Lieu, Ted [D-CA-33]
 Rep. Lofgren, Zoe [D-CA-19]
 Rep. Lowenthal, Alan S. [D-CA-47]
 Rep. Maloney, Carolyn B. [D-NY-12]
 Rep. McDermott, Jim [D-WA-7]
 Rep. McGovern, James P. [D-MA-2]
 Rep. McNerney, Jerry [D-CA-9]
 Rep. Moore, Gwen [D-WI-4]
 Rep. Nadler, Jerrold [D-NY-10]
 Rep. Napolitano, Grace F. [D-CA-32]

Rep. Nolan, Richard M. [D-MN-8]
 Rep. Norton, Eleanor Holmes [D-DC-At Large]
 Rep. Pingree, Chellie [D-ME-1]
 Rep. Pocan, Mark [D-WI-2]
 Rep. Rangel, Charles B. [D-NY-13]
 Rep. Roybal-Allard, Lucille [D-CA-40]
 Rep. Rush, Bobby L. [D-IL-1]
 Rep. Ryan, Tim [D-OH-13]
 Rep. Schakowsky, Janice D. [D-IL-9]
 Rep. Scott, Robert C. "Bobby" [D-VA-3]
 Rep. Serrano, Jose E. [D-NY-15]
 Rep. Takano, Mark [D-CA-41]
 Rep. Tonko, Paul [D-NY-20],
 Rep. Watson Coleman, Bonnie [D-NJ-12]
 Rep. Welch, Peter [D-VT-At Large],
 Rep. Wilson, Frederica S. [D-FL-24],
 Rep. Yarmuth, John A. [D-KY-3]