

Single-Payer Advocates Must Seize This Opening

by John Nichols

Published on Monday, July 27, 2009 by [The Nation](#)

It is unsettling to listen as President Obama and House Speaker Pelosi talk up a health-care reform "plan" that has yet to take shape in any realistic form. The vagueness on the part of the president and the speaker is, of course, intentional.

Obama and Pelosi are still pushing the notion that they can get some version of their public-private stew cooked up before the year is done -- although not, it is now clear, before the president and the Congress take the extended summer vacations that will kill whatever sense of official urgency might have existed.

Neither Obama nor Pelosi is dealing in details because [that's where the devil resides](#).

Here is the truth they tend to avoid mentioning: A robust public plan, with the quality and flexibility that is required to make it appealing to all Americans, would wipe out its insurance-industry competitors in short order. Why would anyone opt for more of the profiteering, restrictions and actual denials of needed treatment -- especially for people with pre-existing conditions -- that the insurance industry uses to make money rather than provide Americans with the medical care they require? And why would any employer choose to subsidize the stock value of health-care conglomerates when it is possible to opt for the better care and controlled costs of a public plan?

Unfortunately, the creation of a robust public plan, one that can compete on the basis of quality and affordability, will require a significant federal expenditure in the form of start-up money as well as regulatory protection for the program. That's where the devil comes in.

The powerful insurance and private health-care lobbies, which fear honest competition as the vampire does the stake, are going to do everything in their power to accomplish three things:

1. Scare Americans with hypocritical talk about the hefty price-tag for getting a robust public plan off the ground.
2. Undermine the structural supports for a public plan so that it cannot compete -- effectively turning it into a sub-standard "alternative" that will appeal only to those who have no other options.
3. Fiddle with the overall "reform" so that most of the taxpayer money that is expended streams into the accounts of private firms.

In the state of confusion created the industry's lobbying and advertising campaigns, chances are that the scaremongers and the profiteers will come out ahead.

They usually do.

And their task is being made easier by in-the-pocket "Democrats" like Montana Senator Max Baucus, the Senate Finance Committee chair [who is collecting huge contributions from hospitals, insurers and medical interest groups](#) in return for doing their dirty work. If it was just Baucus, that would be a problem.

But it's not just Baucus. The monied Montanan has all too many Democratic allies -- especially among the Democratic Leadership Council-allied "New Democrats." The "New Dems" are far greedier and more troubling players than the small cadre of southern and rural Blue Dog Democrats. Of particular concern is the determination of so many of the "New Dems" to follow Baucus' lead and grab up what [Jerry Flanagan, a health-care analyst with the group Consumer Watchdog](#) describes as the "huge down payment" of campaign contributions from corporations by that want any health care "reform" warped to favor their interests.

The corporate special interests and their willing accomplices within the ranks of the Democratic party are capitalizing on the confusion about the scope and character of proposed reforms. In so doing, they are creating a circumstance where the push for real reform can and will be thwarted unless there is a major pushback from real reformers.

That pushback can and should take the form of a renewed effort to promote the right repair: a single-payer program.

There has already been some progress in this regard. The recent 25-19 vote by the House Committee on Education and Labor for an amendment [allowing states to create single-payer health care systems if they so choose](#) was an example of this.

A bigger test could come this week, as the House Energy and Commerce Committee considers [Congressman Anthony Weiner's proposal](#) to replace the convoluted public-private scheme that is outlined in the Obama/House leadership bill with the easily-understood and efficient single-payer plan contained in HR 676 that has been endorsed by 86 members of Congress.

Were the committee to endorse the Weiner amendment, single-payer would be on the table -- as it should be.

Even if the committee fails to do the right thing, a strong vote for single-payer would send an essential signal about the need for a robust public option.

The stalwart single-payer backers at [Progressive Democrats for America](#) are organizing on behalf of the Weiner amendment, urging targeted calls to members of the committee.

The website [www.democrats.com](#) is maintaining [a whip count](#), which includes phone numbers of members who are being targeted. Heading the list of those expected to cast "yes" votes for single-payer is Congresswomen Tammy Baldwin, D-Wisconsin, and Jan Schakowsky, D-Illinois, who has long been in the forefront of the real reformers in the House.

Baldwin and Schakowsky are staying steady.

And rightly so.

This is not the time to waver is our commitment to real reform.

Indeed, it is the time to press those who know the right reform to stop wavering.

[Physicians for a National Health Care Plan](#) has launched a smart -- and necessary -- new campaign to get President Obama to abandon experiments that are likely to fail in favor of the reform he supported before he became president: a single-payer plan.

"Like most of our colleagues and the majority of the general public, we believe that single-payer reform is the standard against which other health reforms should be measured. Sound single-payer proposals have been introduced in both the House of Representatives (H.R. 676, The U.S National Health Care Act) and the Senate (S. 703, The American Health Security Act of 2009)," the physicians write. "Single payer reform, as embodied in these bills, would eliminate the bewildering patchwork of private insurance plans with their exorbitant overhead and profits, as well as the costly paperwork burdens they impose on providers. These savings on bureaucracy - nearly \$400 billion annually - are sufficient to cover all of the uninsured and to provide first dollar coverage for all Americans. No other approach can provide comparable coverage at a cost our nation can afford."

That's the proper prescription. Obama and Pelosi should listen to the doctors and follow it. But that will only happen if those who favor real reform seize on this uncertain but not unforgiving moment to make the case for single-payer.

© 2009 The Nation

John Nichols is Washington correspondent for The Nation and associate editor of The Capital Times in Madison, Wisconsin. A co-founder of the media reform organization Free Press, Nichols is co-author with Robert W. McChesney of [Tragedy & Farce: How the American Media Sell Wars, Spin Elections, and Destroy Democracy](#) - from The New Press. Nichols' latest book is [The Genius of Impeachment: The Founders' Cure for Royalism](#).