Sixteen Senators Join Bernie Sanders’ Medicare-for-All Act

By Ibrahima Sankare

Just as John Conyers’ Expanded and Improved Medicare for All Act was surging to a record-high 117 co-sponsors, Bernie Sanders introduced the Medicare-for-All Act of 2017 to the Senate with 16 co-sponsors in September. Two sessions ago when Sanders introduced a previous iteration of the bill, he received no support from his colleagues - zero cosponsors. Fast forward a few years, after a national uprising of activists pressuring legislators to support single-payer healthcare throughout 2017 as a GOP Congress attempted to dismantle Medicaid and the Affordable Care Act, and more than one-third of Senate Democrats have now joined Bernie - many expressing support for Medicare for All for the first time. Importantly, supporters of Sanders’ single-payer bill include many of the Democratic Party hopefuls for the 2020 presidential elections - including Senators Elizabeth Warren, Kamala Harris, and Cory Booker - potentially setting the stage for a slate of candidates running on the issue in 3 years.

What is in the Medicare-for-All Act of 2017?

Sanders’ Medicare-for-All Act would provide all residents of the United States access to a full range of health benefits including inpatient and outpatient hospital care, prescription drugs, mental health, substance abuse treatment, and maternity care with virtually no out-of-pocket spending as well as dental, vision and hearing aid coverage. Sanders’ plan will do away with private health insurance, give the federal government the power to negotiate prices, and establish a national

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healthcare budget bringing the United States up to par with most industrialized nations.

Sanders’ plan differs from Conyers’ HR676 in that it does not include coverage of long-term care, and it does not ban reimbursement to for-profit hospitals. The Sanders proposal also shields the single-payer fund from the Hyde Amendment, which means that unlike HR676 it would cover the full range of reproductive health benefits.

How would the Medicare-for-All Act be implemented?

Sanders’ plan will be phased in over a four-year transition period. In year 1 all children up to age 18 would be covered, Medicare deductibles would be removed, and dental, vision, and hearing benefits will be added to Medicare's benefits. The two-year wait period for people with disabilities to gain Medicare coverage would also be eliminated. Lastly, the plan would temporarily create a public option in every state and phase in a Medicare buy-in plan, temporarily create a public option in every state and phase in a Medicare buy-in plan, also be eliminated. Lastly, the plan would abilities to gain Medicare coverage would two-year wait period for people with dis-

leave millions of Americans without access to health insurance.

How would the Medicare-for-All Act be financed?

The Sanders bill, like Conyers’ HR676, does not currently include a detailed financing plan. The same researchers at the Political Economy Research Institute, led by economist Robert Pollin, who earlier in the year published the “Economic Analysis of the Healthy California Single-Payer Health Care Proposal (SB-562),” are preparing a similar analysis of Sanders’ Medicare-for-All Act. When published, the study will provide financing options for the bill.

Support for Single Payer is Growing Among the Public

A new Kaiser Health Foundation poll found that a majority of Americans, 53 percent, favor single-payer healthcare, including 63 percent of Democrats and 55 percent of independents. That is up from 50% last year and from 40% between 1998 and 2000 using the same wording and methodology. Other public opinion polls have found even higher levels of support. These numbers reflect a change in attitude from Americans, as they are progressively embracing healthcare as human right and demanding a just healthcare system that will not leave on the sidelines millions of uninsured and underinsured.

Even though Sanders’ bill has very dim chances of passing a Republican-controlled Senate that is more focused on dismantling existing healthcare programs, our movement now has the momentum to build the broad and sustained support that will be necessary to pass single payer healthcare in future legislatures. HCN!

Everybody IN-stitute Arrives in Minnesota

Several years ago Healthcare-NOW began partnering with local organizations to host “Everybody IN-stitutes,” which are one-day trainings focused on developing skills and strategies for single-payer organizing, messaging, outreach, public education, media, and legislative advocacy. On September 10, we teamed up with the Minnesota Nurses Association to host an Everybody IN-stitute in St. Paul! The keynote speaker was Jason Rathe, a small business owner who spoke about the challenges of providing healthcare to employees in a seasonal industry (landscape design). Workshops focused on healthcare policy, women and health equity, the role of pharma, and the growing importance of economic studies for single-payer reform.

You can find handouts, presentation slides, and participant notes for every speaker and workshop of the Everybody IN-stitute here: http://bit.ly/mn everybodyin

Single Payer Leadership Meeting in Las Vegas

Healthcare-NOW hosted its first Single Payer Leadership Meeting in Las Vegas the weekend of September 30th, which was attended by over 125 activists from 25 states. The goal of the Leadership Meeting was to transition our movement to its next phase, after a wild 2017 of resistance to GOP “repeal and replace efforts” and a surge in support for single-payer healthcare across the country.

Hosted by our new chapter, Nevada for Healthcare-NOW, and joined by the first co-sponsor of HR676 in Nevada, Representative Dianne Titus, there were some standout moments and takeaways from Las Vegas:

» **Dr. Paul Song of the Healthy California campaign** gave a powerful keynote, providing an overview of both the politics and policies guiding our movement;

» **Amy Vilela, co-founder of Nevada for Healthcare-NOW**, told her story of losing her daughter to the healthcare system, and why she is now running for Congress to win Medicare for All;

» **Michael Lighty of National Nurses United** spoke on the resistance to single-payer healthcare coming not just from the insurance industry, but from some Democrats, and what to do about it;

» A plenary panel and small-group discussion focused on what medium-term campaigns we can pursue in 2018, when healthcare may not be on the top of the Congressional agenda; and

» More interesting speakers and plenary discussions!


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**Dr. Paul Song**… from page 1

**HCN:** How do you explain the surge in support for John Conyers’ H.R. 676 House bill and Bernie Sanders’ Medicare-for-All Act of 2017?

**PS:** People throughout the US are finally waking up to the nightmare that is our current healthcare system. When you look at the 29+ million who are uninsured, the 45 million who reported being unable to afford filling a prescription in 2017, the hundreds of thousands with insurance who go bankrupt due to an illness each year, and the millions who delay seeking care because they cannot afford their co-pays or deductibles, this is a tremendous amount of people who feel the effects of our broken immoral system on a daily basis. I believe that Senator Sanders’ recent presidential campaign elevated Medicare-for-All into the public consciousness and more and more people who are harmed each day from a lack of healthcare security are taking a closer look and asking why do we not have this?

**HCN:** Do you feel optimistic about the ability of the single payer movement over time to pass both Medicare for All bills nationally?

**PS:** As someone who has been advocating for Medicare-for-all for a long time, I can recall many moments where I felt ostracized and all alone. But, like marriage equality, there is a real sea change going on. For the first time ever, I see a rapidly growing sustained movement that transcends races, ages, religions, and socioeconomic classes demanding healthcare justice. I believe it has become the next major civil rights issue and something politicians can no longer ignore. Public opinion has moved so quickly that more and more elected officials are willing to go on record by actually co-sponsoring legislation. I think this is huge and gives me optimism that we are finally moving towards making healthcare a human right. **HCN!**

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**Dr. Paul Song (left), a radiation oncologist and co-chair of the Campaign for a Healthy California, at a rally for Medicare’s 50th Anniversary.**

If you don’t see both your Senators or your Representative listed as co-sponsors below, make sure to call the Capitol Switchboard at (202) 224-3121 to be connected to your legislators and ask them to co-sponsor S. 1804 and H.R.676!

### 16 Current Co-Sponsors of S. 1804 (by state):

- Sen. Harris, Kamala D. [D-CA]
- Sen. Blumenthal, Richard [D-CT]
- Sen. Hirono, Mazie K. [D-HI]
- Sen. Schatz, Brian [D-HI]
- Sen. Markey, Edward J. [D-MA]
- Sen. Warren, Elizabeth [D-MA]
- Sen. Franken, Al [D-MN]
- Sen. Shaheen, Jeanne [D-NH]
- Sen. Booker, Cory A. [D-NJ]
- Sen. Heinrich, Martin [D-NM]
- Sen. Udall, Tom [D-NM]
- Sen. Gillibrand, Kirsten E. [D-NY]
- Sen. Merkley, Jeff [D-OR]
- Sen. Whitehouse, Sheldon [D-RI]
- Sen. Leahy, Patrick J. [D-VT]
- Sen. Merkley, Jeff [D-OR]
- Sen. Nelson, Tom [D-WI]

### 120 Current Co-Sponsors of H.R. 676 (by last name):

- Rep. Adams, Alma S. [D-NC-12]
- Rep. Beatty, Joyce [D-OH-3]
- Rep. Beyer, Donald S., Jr. [D-VA-8]
- Rep. Bishop Sanford D., Jr. [D-GA-2]
- Rep. Blumenauer, Earl [D-OR-3]
- Rep. Bonamici, Suzanne [D-OR-1]
- Rep. Brady, Robert A. [D-PA-1]
- Rep. Capuano, Michael E. [D-MA-7]
- Rep. Carson, Andre [D-IN-9]
- Rep. Cartwright, Matt [D-PA-17]
- Rep. Castor, Kathy [D-FL-14]
- Rep. Chu, Judy [D-CA-27]
- Rep. Cicilline, David N. [D-RI-1]
- Rep. Clark, Katherine M. [D-MA-5]
- Rep. Clarke, Yvette D. [D-NY-9]
- Rep. Crowley, Joseph [D-NY-14]
- Rep. Davis, Danny K. [D-IL-7]
- Rep. DeFazio, Peter A. [D-OR-4]
- Rep. DeGette, Diana [D-CO-1]
- Rep. DeSaulnier, Mark [D-CA-11]
- Rep. Dingell, Debbie [D-MI-12]
- Rep. Doyle, Michael F. [D-PA-14]
- Rep. Eshoo, Anna G. [D-CA-18]
- Rep. Evans, Dwight [D-PA-2]
- Rep. Fudge, Marcia L. [D-OH-11]
- Rep. Gabbard, Tulsi [D-HI-2]
- Rep. Garamendi, John [D-CA-3]
- Rep. Gomez, Jimmy [D-CA-34]
- Rep. Green, Al [D-TX-9]
- Rep. Green, Gene [D-TX-29]
- Rep. Grijalva, Raúl M. [D-AZ-3]
- Rep. Gutierrez, Luis V. [D-IL-4]
- Rep. Higgins, Brian [D-NY-26]
- Rep. Huffman, Jared [D-CA-2]
- Rep. Kaptur, Marcy [D-OH-9]
- Rep. Khanna, Ro [D-CA-17]
- Rep. Lawrence, Brenda L. [D-MI-14]
- Rep. Lawson, Al Jr. [D-FL-5]
- Rep. Lewis, John [D-GA-5]
- Rep. Lieu, Ted [D-CA-33]
- Rep. Loeb, David [D-IA-2]
- Rep. Lofgren, Zoe [D-CA-19]
- Rep. Lowenthal, Alan S. [D-CA-47]
- Rep. Lowey, Nita M. [D-NY-17]
- Rep. Maloney, Carolyn B. [D-NY-12]
- Rep. Matsui, Doris O. [D-CA-6]
- Rep. McNerney, Jerry [D-CA-9]
- Rep. Meng, Grace [D-NY-6]
- Rep. Nadler, Jerrold [D-NY-10]
- Rep. Norton, Eleanor Holmes [D-DC-At Large]
- Rep. Payne, Donald M., Jr. [D-NJ-10]
- Rep. Pocan, Mark [D-WI-2]
- Rep. Polis, Jared [D-CO-2]
- Rep. Raskin, Jamie [D-MD-8]
- Rep. Rush, Bobby L. [D-IL-1]
- Rep. Sablan, Gregorio Kilili Camacho [D-MP-At Large]
- Rep. Sanchez, Linda T. [D-CA-38]
- Rep. Sarbanes, John P. [D-MD-3]
- Rep. Schakowsky, Janice D. [D-IL-9]
- Rep. Schiff, Adam B. [D-CA-28]
- Rep. Scott, Robert C. “Bobby” [D-VA-3]
- Rep. Sherman, Brad [D-CA-30]
- Rep. Sires, Albio [D-NJ-8]
- Rep. Slaughter, Louise McIntosh [D-NY-25]
- Rep. Smith, Adam [D-WA-9]
- Rep. Soto, Darren [D-FL-9]
- Rep. Speier, Jackie [D-CA-14]
- Rep. Takano, Mark [D-CA-41]
- Rep. Thompson, Bennie G. [D-MS-2]
- Rep. Thompson, Mike [D-CA-5]
- Rep. Titus, Diana [D-NV-1]
- Rep. Tonko, Paul [D-NY-20]
- Rep. Veasey, Marc A. [D-TX-33]
- Rep. Vela, Filemon [D-CA-34]
- Rep. Visclosky, Peter J. [D-IN-1]
- Rep. Waters, Maxine [D-CA-43]
- Rep. Watson Coleman, Bonnie [D-NJ-12]
- Rep. Welch, Peter [D-VT-At Large]