# *Everybody In!*

# Medicare for All Defining the 2020 Presidential Primaries

*by Ibrahima Sankare and Benjamin Day*

Through two televised debates featuring twenty Democratic Presidential primary candidates, **Medicare for All has become the defining issue of the 2020 elections.** This is a result of a rising movement for single-payer healthcare, and the intense pressure placed on legislators and candidates by local activists and victims of the healthcare system across the country.

However, as the movement for Medicare for All has advanced, and the number of co-sponsors on Capitol Hill has increased, **the healthcare industry has mobilized a better-funded, and more stra-**



**tegic opposition campaign.**

The first sign of intensified industry opposition were the questions asked by the debate moderators themselves, which were framed using messaging developed by the healthcare industry (see our interview with Ben Palmquist on page 2). In the first debate hosted by NBC, Lester Holt asked "who here would abolish their

private health insurance in favor of a government-run plan?," while in the second CNN debate, Jake Tapper referred to Medicare for All as the plan that "would eventually take private health insurance away from more than 150 million Americans in exchange for government-sponsored health care for everyone."

The framing of both questions was **scare-mongering targeted at those with private insurance, implying they would "lose" their insurance, have it "taken away" or "abolished."** In truth, everyone with private insurance would keep all of their benefits and access to their providers, while gaining additional benefits,

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*http://bit.ly/Med4All2019*

## Racial Equity and Medicare for All

Our latest video — available on YouTube and Facebook — explores a widely-misunderstood topic: why the United States doesn't have a universal healthcare plan.

The defense of racially segregated healthcare in the South made the passage of such a plan impossible during the mid-century. Medicare and Medicaid were passed in place of a national health plan, speeding up the desegregation of hospitals - but both of these programs accommodated structural racism in ways that may surprise you. **Today, we are still living with the profound consequences of those decisions, including the absence of a national healthcare plan.**

See the video here: **http://bit.ly/VidOnPOR** *HCN!*

## 2019 Leadership Development Graduates Leading the Charge

This July, Medicare for All activists from San Antonio, Michigan, and Boston graduated from our third annual Leadership Development program! The Healthcare-NOW Education Fund runs this intensive three-month training once per year, which covers telling your healthcare story, single-payer policy, and a range of organizing skills.

**Two of our groups of activists achieved incredible organizing victories while enrolled in our training this year:** our San Antonio activists ran a massive public pressure campaign to win Rep. Lloyd Doggett's support of the Medicare for All bill for the first time, and our Michigan activists likewise got Rep. Dan Kildee to co-sponsor for the first time.

Most of our trainings are available for free at the Single Payer School: **singlepayerschool.healthcare-now.org** *HCN!*

# How Health Insurers Have Reframed Medicare-for-All in Mainstream Media

*An interview with Ben Palmquist, manager of the National Social and Economic Rights Initiative (NESRI)'s grassroots campaigns for universal, publicly financed healthcare.*

**Healthcare-NOW:** You published a report called "Parroting the Right" about media coverage of Medicare for All. What were your findings?

**Ben Palmquist :** "Parroting the Right" is about how the health insurance industry has biased the entire national discourse on health care over the last 30 years, succeeding in getting the mainstream media and public-opinion polls to adopt pro-corporate, anti-government language.

In the early 1990s, the insurance industry sunk millions of dollars into polling, focus groups, and political strategists to find a way to block single-payer and Clinton's health plan. They crafted a messaging strategy that weaponized anti-government resentment while obscuring their own unpopular role in the health care system, contrasting "private insurance" not with "public insurance," but with "government" or "government-run" health care.

This was effective for two reasons. First, by invoking government control while obscuring their own role, health insurance companies skewed public understanding of how public and private insurance work and stoked fears that government would get between people and their doctors. Second, they tapped into the much larger assault on government that emerged in the 1960s as a backlash to the social-movement victories that expanded the role of the federal government to enforce civil rights and create public programs like Medicare, Medicaid, and environmental and consumer-safety protections.

The industry's biggest victory was mainstreaming their new language.

They worked with corporate and right-wing allies to hammer away at their messaging. Public-opinion polls slowly adopted their framing, and the media's 2007 coverage of the film Sicko and SCHIP reform was a real turning point.

BEFORE THE 1990S, THE TERM "GOVERNMENT-RUN HEALTH CARE" WAS RARELY USED.

eliminating copayments and deductibles. Importantly, none of us would risk losing access to healthcare if we lost our job due to an illness.

The questions are similar to the talking points of **Joe Biden, the only leading Democratic candidate who is outright opposing Medicare for All** on the campaign trail. At a recent event, he asked people "How many of you like your employer based healthcare? … Now if I come along and say you're finished, you can't have it anymore, well that's what Medicare for All does. You cannot have it. Period."

Although the question was biased, only four candidates answered "yes" that they would "abolish private health insurance in favor of a government-run plan": Bernie Sanders, Elizabeth Warren, Bill De Blasio, and Kamala Harris. Harris later walked back her support, and announced her own Medicare for All proposal that would allow enrollees to choose a private health insurer, much like Medicare Advantage plans under Medicare currently.

**This roll-call left several candidates who have previously supported Medicare for All unaccounted for:** Rep. Tulsi Gabbard, Senator Cory Booker and Senator Kirsten Gillibrand are all co-sponsors of Medicare for All legislation in Congress, but have balked when asked about the elimination of private health insurance.

The healthcare industry's attempts to stop the momentum for Medicare for All were evident not just during the debates, but *in betwee*n the debates as well. The "Partnership for America's Healthcare Future," a coalition of pharmaceutical companies, health insurers, hospitals, and others formed to oppose Medicare for All, **aired a series of ads during the debates in certain states attacking single-payer healthcare.** "We don't want to be forced into a one-size-fits-all government insurance system" says an office worker in the ad. The Partnership was joined by **One Nation, a right-wing advocacy group with close ties to Sen. Mitch McConnell, which also launched a $4 million ad campaign** attacking Medicare for All the week before the first debates.
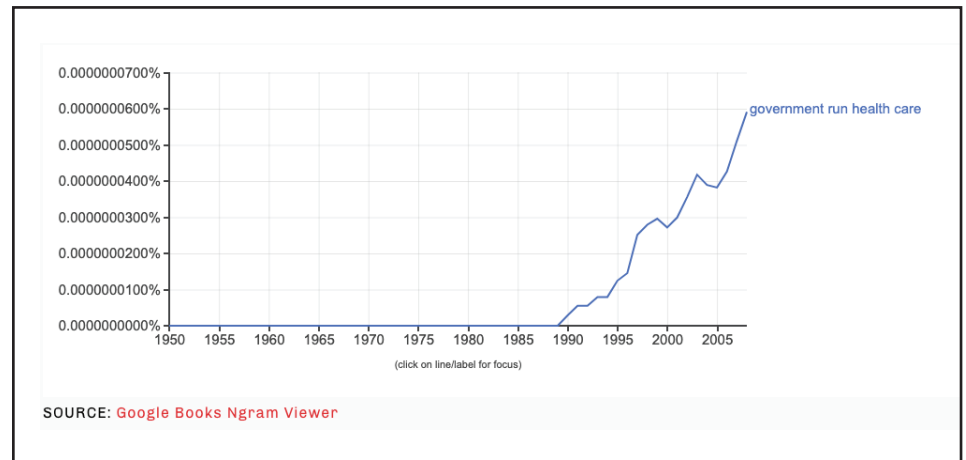
We've entered an exciting, but challenging phase of the movement to make healthcare a right. Medicare for All is now taken seriously as a threat by both the Right and corporate interests. It is the only healthcare reform proposal with massive popular support that all candidates feel they must respond to. Our job now is to scale up our organizing, outreach, and public education work to overcome our new opposition. Onward! *HCN!*

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Since then, mainstream and even progressive media have nearly ubiquitously framed health policy as a choice between government and private health insurance.

**HCN:** Why did you decide to write this report?

**BP:** I've been frustrated that the mainstream media and public-opinion polls present themselves as neutral arbiters when in fact they play an enormous role in shaping our politics. I don't think it's intentional, but they so often adopt loaded political language and ideological assumptions without any self-awareness or questioning. They tell us what's possible and not possible as if they're describing essential truths about the world, when they're actually political actors who are narrowing our political horizons and discrediting demands for Medicare for All and other transformative solutions at every turn.

I also see the fight over Medicare for All as a proxy fight for a larger struggle over who we are as a country. I think that as progressives we need to do a better job of acknowledging why people are legitimately skeptical of government but also articulating why government is nevertheless an essential tool for meeting our common needs.



SOURCE: Google Books Ngram Viewer

**HCN:** What do you hope to accomplish?

**BP:** First, we want to alert everyone to this biased rhetoric and where it came from. Second, we want to provide folks with a tool and strategic intervention point that we can use to push back on the elite bias against Medicare for All. And third, we want to specifically pressure media and polling organizations to drop the insurance industry's language and instead adopt fair and balanced framing of health policy.

**HCN:** How can activists plug into the campaign?

**BP:** We can all keep learning to be critical news readers and listeners, reading between the lines to pull back the underlying agenda. When people see a bias or misinformation, they can email or tweet at the journalist or publication to let them know. Most journalists don't realize the symbolism and impact of the words they're using, so it's helpful to share a friendly tip and point them to our report at parrotingtheright.org, which includes recommendations for journalists, editors, and pollsters. The more often they hear from different folks, the more likely they are to change what they're saying. *HCN!*

Read the report at **http://bit.ly/PTR-2019**

# Take Action for Single-Payer Healthcare!

*Legislation by Rep. Pramila Jayapal and Sen. Bernie Sanders would create single-payer systems, "expanded and improved Medicare for all"*

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. 1129 and H.R.1384!

## 14 Current Co-Sponsors of S. 1129 (by state):

Sen. Harris, Kamala D. [D-CA]
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Sen. Hirono, Mazie K. [D-HI]
Sen. Schatz, Brian [D-HI]
Sen. Markey, Edward J. [D-MA]
Sen. Warren, Elizabeth [D-MA]
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. Baldwin, Tammy [D-WI]

## 117 Current Co-Sponsors of H.R. 1384 (by last name):

Rep. Adams, Alma S. [D-NC-12]
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