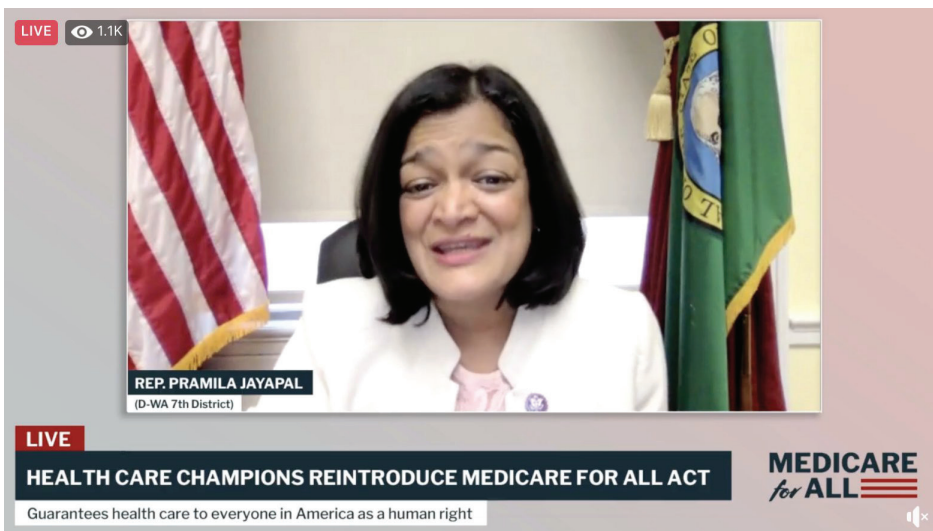


# Everybody In!

WWW.HEALTHCARE-NOW.ORG

ISSUE NO. 25 - SPRING 2021

## Record-Breaking Launch of the Medicare for All Act



By Benjamin Day, Healthcare-NOW

One year to the date that COVID-19 was confirmed in all 50 states, Representatives Pramila Jayapal and Debbie Dingell introduced the Medicare for All Act of 2021 (H.R. 1976) with a record-breaking 112 original co-sponsors - more than half of Democrats in the House. When I was first hired at Healthcare-NOW in 2013, H.R. 676 was filed with 37 original co-sponsors, and ended the session two years later with 63!

This list of co-sponsors includes 14 Committee Chairs, including for the first time ever Representative Frank Pallone - chair of the Energy & Commerce Committee, which has primary responsibility for healthcare legislation. The only Committee of Jurisdiction for the bill not chaired by a M4A supporter is Ways & Means.

This level of support was by no means a given after Joe Biden won the Democratic primary and the Presidency, running explicitly in opposition to M4A. However, the COVID-19 pandemic has made the defense of employer-sponsored healthcare increasingly indefensible.

The all-virtual press conference announcing the bill included some momentous testimony

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## Interview: New York Health Act Wins Majority in House & Senate

*In March, the Campaign for New York Health made single payer history: the bill has secured the support of a majority of co-sponsors in both chambers of the New York State legislature. Ursula Rozum and YuLing Koh Hsu, organizers with the Campaign:*

**Healthcare-NOW:** Can you give us an overview of where the campaign is now?

### Campaign for New York Health:

The movement for single payer in New York has been around since the 90s; the New York Health Act was first introduced and brought to a vote in 1992. In 2014 the Campaign for New York Health formed, and since then we've steadily increased our support in the legislature. Right now we're at 84 cosponsors in the State House and 33 in the State Senate. We passed the bill in the Assembly for 4 years straight — until Democrats got a supermajority in the Senate, at which point the bill stopped moving.

**HCN:** How did the CNYH get to this stage of majorities in both chambers?

... continued page 3

# Healthcare-NOW sets Strategic Plan for 2021-2022

Healthcare-NOW's Board has approved an exciting new Strategic Plan for 2021-22. Our vision is that Healthcare-NOW will gradually shift from having a small staff team administer all of our program work, towards having staff supervise national volunteer teams to carry out and expand our most effective programs.

Since our founding, Healthcare-NOW has had an outsized impact on the Medicare for All movement for a small

non-profit with only two staff. But a staff-driven approach will never allow us to develop the capacity, size, and grassroots power we'll need to play a major role in passing Medicare for All through Congress.

Would you like to join a volunteer team helping us realize this vision? **Email us at [info@healthcare-now.org](mailto:info@healthcare-now.org) with your skill sets! *HCN!***

## M4A Act... from page 1

from constituencies rarely at the forefront of our movement, but whose support is crucial:

For the first time ever, a hospital CEO publicly endorsed the Medicare for All legislation and spoke on its behalf: Dr. Eric Dickson, CEO of UMass Memorial hospital system, argued that M4A is crucial for hospitals to serve their patients, to achieve health equity, and to redirect the tremendous resources hospitals waste

fighting health insurance plans. "There are thousands of people who do nothing but create administrative burden for providers through pre-authorization processes, denial of claims that then force the providers to go back and re-document and re-submit complaints. This is 20-25% of the cost of healthcare."

For the first time, a leading activist of the Black Lives Matter was forefronted in the launch of the M4A bill, speaking to the intersectionality of racial justice and Medicare for All: Patrisse Cullors, co-founder

of the Black Lives Matter Global Network ([blacklivesmatter.com](http://blacklivesmatter.com)), noted the history of Medicare in desegregating hospitals, and said that "with Medicare for All we can move closer to racial justice in healthcare." She also emphasized the importance of going beyond M4A in addressing racial inequities in the delivery of healthcare.

Representative Matt Cartwright (D-PA) said he was convinced to support M4A by a group of business leaders in his district, and that as a "card-carrying capitalist" who led a law firm for 25 years, M4A is necessary for the success of businesses and entrepreneurs in the United States.

Also unusual this session: two first-year co-sponsors of the bill spoke about how they themselves had been impacted by our broken healthcare system. Representative Nikema Williams (D-GA) spoke about choosing not to receive medical care after a dangerous car accident because the visit to the ER would have been too expensive. Representative Cori Bush (D-MO) spoke about running for state Senate without health insurance, and how she is still dealing with the bills from being admitted to the hospital during that period. Over half of our Members of Congress are millionaires; that we elected Reps this cycle who are able to speak and lead from the perspective of patients is a notable shift towards true representation.

We expect that Bernie Sanders will introduce the companion Medicare for All Act in the Senate within the next two months, and of course, the bill introduction means only that our work for this session has just begun! Reference the back page of the newsletter to see if your Representative has already signed on. *HCN!*

"Our current system is subjecting our neighbors—we all have seen it, especially our communities of color—to undo harm and death.

**Implementing Medicare for All will bring endless opportunities, well-being, and improved quality of life to many of our neighbors."**

—Rep. Rashida Tlaib (D-MI)



"Our seniors are struggling to pay the high cost of prescription drugs while living on a fixed income. And people are being forced to choose between paying for their care or paying for their bills.

...The Medicare for All Act will guarantee that everyone has high-quality health care in this country."

—Rep. Nikema Williams (D-GA)



**NY Health Act...** from page 1

**CNYH:** We've focused on a coalition-building model and a story-based model. The coalition partners we've been bringing in over the years have had constituencies that were really impacted by the shortcomings of the system, and some include multi-issue organizations that fight on multiple fronts, including gentrification and police brutality.

One of the tools we've used is a story-based outreach survey. Over 2 years, activists talked to 2400 New Yorkers, asking about their healthcare experiences; including coalition partners in the survey has really helped to build the coalition over the years.

When we had hearings, we invited all those who shared their stories to come and testify, which was really powerful. Everyone is an expert on their own experience with the healthcare system, and this story-driven strategy

focuses on real people to build the grassroots demand that's necessary to pass major legislation.

on the status quo, and their arguments must be viewed through the lens that they will say anything — true or false —

We need to build a long-term, mass movement that can not only pass legislation, including financing, but will also do the hard work to make sure the Act works for the people it was built for, prioritizing health justice. Healthcare access transcends many lines of difference, and we are very inspired by the organizing model of Put People First PA! and the Nonviolent Medicaid Army that sees healthcare as an issue that allows for organizing across differences and not being dependent upon any one political party.



**HCN:** Tell us about the opposition: how has it formed, and how have you combated it? How does the enemy materialize and mobilize once you represent a viable threat? Who comprises the opposition?

**CNYH:** Predictably, the insurance industry is actively opposed to the New York Health Act. They've been running ads on social media with the usual arguments that the legislation will raise their taxes. They've even co-opted our language about healthcare as a human right. They're making billions

to maintain their control over care and ability to make profits.

**HCN:** A majority in both chambers sounds like this bill is about to pass, but for major structural changes like the NYHA, we know this isn't always the case. What are the next steps for the campaign - just passing the bill, or is that going to take a lot more organizing?

**CNYH:** In the words of the National Homeless Union, "You only get what you are organized to take." There are no shortcuts.

We also have to organize our cosponsors to be loud and vocal supporters, and excitingly, we've had an influx of progressive legislators recently. The only way the bill will move forward is if legislative leaders see that the NY Health Act is a priority for Democrats in the legislature.

Essentially we need to move all our supporters — both the grassroots and grasstops — from passive to active supporters. **HCN!**

## Transgender day of Visibility and the Fight for Medicare for All!

**By Sofia Sepulveda,  
Texas Organizing Project**

March 31st was Transgender Day of Visibility. In our fight for Medicare for all we must include our trans brothers and sisters.

We are under attack. Gov. Hutchinson from Arkansas signed into law a legislation allowing EMT to deny care to us. It is one of many laws across the country targeting trans people.

Studies have shown that transgender

care lowers suicide rates in our community, so we need to ensure that our trans community is protected and foster their participation in our movement. In the words of Emma Lazarus, none of us are free until all of us are free. **HCN!**



# Take Action for Single-Payer Healthcare!

Legislation by Rep. Pramila Jayapal would create a single-payer system, "expanded and improved Medicare for all." Sen. Bernie Sanders will be reintroducing his bill shortly — Senate cosponsors coming next issue!

If you don't see both 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 H.R. 1976!

## 114 Current Co-Sponsors of H.R. 1976 (by last name):

Rep. Adams, Alma S. [D-NC-12]  
Rep. Barragan, Nanette Diaz [D-CA-44]  
Rep. Bass, Karen [D-CA-37]  
Rep. Beyer, Donald S., Jr. [D-VA-8]  
Rep. Blumenauer, Earl [D-OR-3]  
Rep. Bonamici, Suzanne [D-OR-1]  
Rep. Bowman, Jamaal [D-NY-16]  
Rep. Boyle, Brendan F. [D-PA-2]  
Rep. Brown, Anthony G. [D-MD-4]  
Rep. Bush, Cori [D-MO-1]  
Rep. Carbajal, Salud O. [D-CA-24]  
Rep. Cardenas, Tony [D-CA-29]  
Rep. Carson, Andre [D-IN-7]  
Rep. Cartwright, Matt [D-PA-8]  
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. Cleaver, Emanuel [D-MO-5]  
Rep. Cohen, Steve [D-TN-9]  
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. Deutch, Theodore E. [D-FL-22]  
Rep. Dingell, Debbie [D-MI-12]  
Rep. Doggett, Lloyd [D-TX-35]  
Rep. Doyle, Michael F. [D-PA-18]  
Rep. Escobar, Veronica [D-TX-16]  
Rep. Espallat, Adriano [D-NY-13]  
Rep. Frankel, Lois [D-FL-21]  
Rep. Gallego, Ruben [D-AZ-7]  
Rep. Garcia, Jesus G. "Chuy" [D-IL-4]  
Rep. Gomez, Jimmy [D-CA-34]  
Rep. Green, Al [D-TX-9]  
Rep. Grijalva, Raul M. [D-AZ-3]  
Rep. Harder, Josh [D-CA-10]

Rep. Hastings, Alcee L. [D-FL-20]  
Rep. Hayes, Jahana [D-CT-5]  
Rep. Higgins, Brian [D-NY-26]  
Rep. Huffman, Jared [D-CA-2]  
Rep. Jackson Lee, Sheila [D-TX-18]  
Rep. Jacobs, Sara [D-CA-53]  
Rep. Jeffries, Hakeem S. [D-NY-8]  
Rep. Johnson, Henry C. "Hank," Jr. [D-GA-4]  
Rep. Jones, Mondaire [D-NY-17]  
Rep. Kahele, Kaiali'i [D-HI-2]  
Rep. Keating, William R. [D-MA-9]  
Rep. Kelly, Robin L. [D-IL-2]  
Rep. Khanna, Ro [D-CA-17]  
Rep. Kildee, Daniel T. [D-MI-5]  
Rep. Kirkpatrick, Ann [D-AZ-2]  
Rep. Langevin, James R. [D-RI-2]  
Rep. Lawrence, Brenda L. [D-MI-14]  
Rep. Lee, Barbara [D-CA-13]  
Rep. Leger Fernandez, Teresa [D-NM-3]  
Rep. Levin, Andy [D-MI-9]  
Rep. Levin, Mike [D-CA-49]  
Rep. Lieu, Ted [D-CA-33]  
Rep. Lowenthal, Alan S. [D-CA-47]  
Rep. Maloney, Carolyn B. [D-NY-12]  
Rep. McGovern, James P. [D-MA-2]  
Rep. McNerney, Jerry [D-CA-9]  
Rep. Meeks, Gregory W. [D-NY-5]  
Rep. Meng, Grace [D-NY-6]  
Rep. Mfume, Kweisi [D-MD-7]  
Rep. Nadler, Jerrold [D-NY-10]  
Rep. Napolitano, Grace F. [D-CA-32]  
Rep. Neguse, Joe [D-CO-2]  
Rep. Newman, Marie [D-IL-3]  
Rep. Norton, Eleanor Holmes [D-DC-At Large]  
Rep. Ocasio-Cortez, Alexandria [D-NY-14]  
Rep. Omar, Ilhan [D-MN-5]  
Rep. Pallone, Frank, Jr. [D-NJ-6]  
Rep. Panetta, Jimmy [D-CA-20]  
Rep. Payne, Donald M., Jr. [D-NJ-10]  
Rep. Perlmutter, Ed [D-CO-7]  
Rep. Pingree, Chellie [D-ME-1]  
Rep. Pocan, Mark [D-WI-2]  
Rep. Porter, Katie [D-CA-45]  
Rep. Pressley, Ayanna [D-MA-7]  
Rep. Price, David E. [D-NC-4]  
Rep. Quigley, Mike [D-IL-5]  
Rep. Raskin, Jamie [D-MD-8]  
Rep. Roybal-Allard, Lucille [D-CA-40]  
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. Smith, Adam [D-WA-9]  
Rep. Speier, Jackie [D-CA-14]  
Rep. Swalwell, Eric [D-CA-15]  
Rep. Takano, Mark [D-CA-41]

## MEDICARE FOR ALL ACT 2021



CALL NOW: 202-224-3121

Rep. Thompson, Bennie G. [D-MS-2]  
Rep. Thompson, Mike [D-CA-5]  
Rep. Titus, Dina [D-NV-1]  
Rep. Tlaib, Rashida [D-MI-13]  
Rep. Tonko, Paul [D-NY-20]  
Rep. Torres, Ritchie [D-NY-15]  
Rep. Trahan, Lori [D-MA-3]  
Rep. Vargas, Juan [D-CA-51]  
Rep. Veasey, Marc A. [D-TX-33]

Rep. Velazquez, Nydia M. [D-NY-7]  
Rep. Waters, Maxine [D-CA-43]  
Rep. Watson Coleman, Bonnie [D-NJ-12]  
Rep. Welch, Peter [D-VT-At Large]  
Rep. Wild, Susan [D-PA-7]  
Rep. Williams, Nikema [D-GA-5]  
Rep. Wilson, Frederica S. [D-FL-24]  
Rep. Yarmuth, John A. [D-KY-3]

## The Road to 218+51

Healthcare-NOW took a deep dive on the demographics of the districts we've won - and those that remain - and discovered that the unprecedented support for Medicare for All we've seen over the past several years has come disproportionately from densely urban districts, solidly Democratic districts, communities of color, and lower-income districts. For the remainder, our movement will need to organize and win in suburban, ex-urban, and rural districts, as well as swing districts and whiter and wealthier communities.

Check out our full video analysis: <http://bit.ly/roadto218>

## Next 118 Co-Sponsors

