The commercials we see on TV for Medicare Advantage healthcare plans feature happy, active seniors and tout low or zero-premium plans with the same coverage as traditional Medicare, plus “extra benefits” like dental and vision care, prescription drug coverage, transportation assistance, and even home-delivered meals. Unfortunately, because the priority of the insurance companies who administer these plans is always to cut costs and increase revenue, the reality of having a Medicare Advantage plan often fails to live up to the marketing, and many customers are left with high costs and much less care than promised.

We at Healthcare-NOW wanted to better understand the impact of the program on people whose actual lives depend on Medicare Advantage. We invited our members who are or were enrolled in these plans to tell us their stories, which resulted in over 100 responses encompassing a wide range of experiences and a few concerning trends.

While Medicare Advantage worked for some, the majority of our respondents had negative experiences with their Medicare Advantage plans. Despite differences in geography and social and economic status, respondents frequently returned to the same issues with their healthcare:

» Limited networks of providers who accept their coverage and limited prescription drugs covered by their plans
» High co-pays, deductibles, and fees
» Pre-authorization denials and denials of claims for care received

What’s Wrong With Healthcare in Texas?
(Hint: Structural Racism!)

Sofia Sepulveda is an activist based in San Antonio, TX, organizing for healthcare justice, environmental justice, and trans rights. She is co-chair of San Antonio’s Healthcare-NOW coalition, the co-founder of Trans Power San Antonio, and sits on the board of Healthcare-NOW!

Healthcare-NOW: How did you come to support Medicare for All, and why is it important for you?

Sofia Sepulveda: In 2014 after my father died, I became very ill. I was working at a minimum wage job whose insurance benefits were expensive, with a high deductible, and I couldn’t afford it. It turned out I had...
Our Year in Review: 2022 Organizing for Healthcare Justice!

**February:** we win THREE new co-sponsors in the House of Representatives in less than two weeks — Reps. Norcross (NJ), Brown (OH), and Cherfilus-McCormick (FL)

**April:** over 600 leading activists from across the country convene for Healthcare-NOW’s 2022 Medicare for All Strategy Conference, featuring over 20 presentations and 40 interactive workshops to grow the movement for M4A!

**May:** Bernie Sanders introduces the Medicare for All Act in the Senate with 15 original co-sponsors, who are brought on board by a mass mobilization of local Medicare For All chapters and activists

**May:** Healthcare-NOW launches the 2022 Healthcare Census campaign, training activists across the country on how to do basebuilding using a healthcare survey tool

**June:** Healthcare-NOW mobilizes our entire network in opposition to the stunning Supreme Court ruling that overturns Roe v. Wade, calling for reproductive justice

**June-November:** HCN launches the Patients Over Profits Pledge campaign with National Nurses United and People’s Action, calling on candidates at all levels to refuse dirty healthcare donations — modeled on the No Fossil Fuel Money pledge

**August:** President Biden signs into law the Inflation Reduction Act, which includes expansions of Medicare that Healthcare-NOW spent 2 years organizing for (although the expansions are a small subset of the Medicare expansions we advocated for and won in the original “Build Back Better” bill)

**September:** the Healthcare-NOW Education Fund launches our Telling Your Healthcare Story training, with the goal of developing a national network of powerful speakers and writers for Medicare for All

**November:** Healthcare-NOW releases its report on Medicare Advantage plans “Taking Advantage: Stories from the Front Lines of the Privatization of Medicare”

**All of 2022:** the Medicare for All Podcast publishes more than 20 episodes, offering deep-dive analyses of topics ranging from the ambulance industry, healthcare sharing ministries, and Amazon’s bumbling moves to break into healthcare, through universal pet insurance, Dr. Oz’s “Medicare Advantage for All” proposal, and the impact of our healthcare system on fat people.

**Patients Over Profits**

You can find the full report, “Taking Advantage: Stories from the Frontlines of the Privatization of Medicare,” with more than 20 of the stories we received, at www.healthcare-now.org!

Report... from page 1

» Delays and bureaucracy in approving coverage

In addition, patients spoke of feeling duped by aggressive telemarketers and ads making false promises, and many found that once they became sick, accessing care through Medicare Advantage became an onerous ordeal of appeals, hidden charges, and dangerous compromises to the quality of their care.

You can find the full report, “Taking Advantage: Stories from the Frontlines of the Privatization of Medicare,” with more than 20 of the stories we received, at www.healthcare-now.org!
Sofia Sepulveda ... from page 1

a multi-drug resistant staph infection. I was turned away from a hospital for being uninsured, and had to jump through a lot of hoops to see any provider. When I did, the doctor told me if I had waited 2 to 3 days more, it would have become septic and I could have died. Since then I’ve learned I am not alone in this struggle and I’m not the only one who’s had to live without insurance. Since then I have been fighting to achieve Medicare for All.

HCN: What does access to healthcare look like in Texas?

SS: Hard to access, and practically nonexistent for many, particularly in communities of Color. As one of the states that has refused to expand Medicaid, we are left out of benefits that would immensely help our communities.

We have the highest number of uninsured children and adults in the entire country. We have the least access to mental healthcare, despite Governor Abbott continuously blaming mental health for the increase in school shootings. While calling Texas a family-values state, new moms had only 2 months of postnatal care through Medicaid, and the children of parents who do not have a secure income tend to be kicked off of CHIP if their information isn’t updated twice a year. We are among the worst 10 states for maternal mortality as well.

HCN: Why is healthcare access so much worse in Texas, even compared with other Southern States that have adopted similar policies?

SS: Structural racism, plain and simple. Expanding Medicaid will largely benefit the Latine community, which is about 40% of Texans. It will also benefit the Black community, which comes in a close second in uninsured rates.

We have fewer clinics and hospitals in areas where there are black and brown communities. Many times we must rely on public transportation, which is horrendous in Texas. We saw these disparities really come to life during the pandemic. The highest concentration of COVID cases were in low-income areas and communities of color, while the easiest access to vaccines were in white and wealthier areas.

HCN: How are Texans fighting back, including yourself?

SS: Good ole fashioned Community Organizing! Knocking on doors, and having deep, real conversations with folks who were struggling even before the pandemic. In 2021 we were able to increase postnatal care under Medicaid from just 2 months to 6 months.

We have seen other folks fighting back: Sean in North Dallas helping to pass a Medicare for All resolution in Collin County; Stephanie in Houston doing the same in Harris County; and electing candidates like Greg Casar who has made M4A a key issue in his race. We are engaging locally to ensure we’re providing better access to care to low-income families while we continue creating and building that base that is imperative to have when fighting for an issue as big as Medicare for All. HCN

HCN

Healthcare-NOW
Launching
New Series of Trainings

By Gillian Mason

Great organizers aren’t born – they’re trained!

If we want to win our fight for healthcare justice, we must develop and sharpen the skills we need to talk about our issues, persuade our friends and neighbors, and bring folks together to make change. That’s why Healthcare NOW has launched a new series of online workshops designed to get us all into fighting shape for the year ahead.

Upcoming Trainings:

Telling Your Story
This session explains why storytelling is our most powerful strategy for winning Medicare for All and gives tips and tricks to help you tell your own compelling healthcare story!

» Saturday, November 19, 1:00-2:30PM ET
» Thursday, December 1, 2:00-3:30PM ET
» Saturday, December 17, 1:00-2:30PM ET

Healthcare Policy
Confused about the ins and outs of how our healthcare system works? Want to be able to better explain how Medicare for All could change lives? This session breaks it down in easy-to-understand, human terms!

» Thursday, November 17, 8-9 PM ET

Racial Equity in Healthcare
Learn how racism has shaped our for-profit healthcare system and how Medicare for All could be a significant step toward racial justice.

» Saturday, December 3, 1-2 PM ET

You can register for any of these training sessions and find out about more exciting learning opportunities on our website: www.healthcare-now.org/trainings. HCN
Take Action for Single-Payer Healthcare!


If you don’t see your Representative or either of your Senators listed as co-sponsors below, make sure to call the Capitol Switchboard at (202) 224-3121 to be connected to your Rep and Senators and ask them to co-sponsor H.R.1976 or S. 4204!

14 Current Co-Sponsors of S. 4204 (by state):
Sen. Padilla, Alex [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. Booker, Cory A. [D-NJ]
Sen. Heinrich, Martin [D-NM]
Sen. Lujan, Ben Ray [D-NM]
Sen. Merkley, Jeff [D-OR]
Sen. Whitehouse, Sheldon [D-RI]
Sen. Leahy, Patrick J. [D-VT]
Sen. Sanders, Bernard [D-VT]
Sen. Baldwin, Tammy [D-WI]

121 Current Co-Sponsors of H.R. 1976 (by last name):
Rep. Adams, Alma S. [D-NC-12]
Rep. Beyer, Donald, Sr., Jr. [D-VA-8]
Rep. Blumenauer, Earl [D-OR-3]
Rep. Bonamici, Suzanne [D-OR-1]
Rep. Cardenas, Tony [D-CA-29]
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]
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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. Doggett, Lloyd [D-TX-35]
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Rep. Escobar, Veronica [D-TX-16]
Rep. Frankel, Lois [D-FL-21]
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Rep. Harder, Josh [D-CA-10]
Rep. Hayes, Jahana [D-CT-5]
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Rep. Kalan, Kai al’i [D-HI-2]
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Rep. Lawrence, Brenda L. [D-MI-14]
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Rep. Levin, Mike [D-CA-49]
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Rep. Meng, Grace [D-NY-6]
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Rep. Schiff, Adam B. [D-CA-28]
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MEDICARE FOR ALL ACT 2021

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