



Arguments and Counterarguments about Health Care Reform

FACILITATOR'S GUIDE

This issue forum is designed to last 60 minutes. You should try to provide a five-minute introduction and a 10-minute wrap-up, leaving 45 minutes for solid discussion. Have fun!!

ARGUMENTS BY THOSE WHO ARE OPPOSED TO THE IDEA OF HEALTH CARE FOR ALL

The uninsured in this country are just irresponsible. It's their own fault that they don't have insurance.

- Eight out of 10 of the uninsured are members of working families. They play by the rules and work hard, yet they cannot get insurance from their employer, or they can't afford it if it is offered.
- The high costs of health care are attributable to unnecessary administrative costs, overuse of technology, and a strong profit motive in the private health insurance industry that prices many working families out of the health insurance market.

The uninsured should take more individual responsibility to get insurance.

- Only a very small percentage of the uninsured can afford insurance but choose not to obtain it.
- The vast majority of the uninsured, however, cannot afford insurance. It is reasonable to argue that members of society should take individual responsibility if affordable insurance is readily available. Since this is not the case for the majority of the uninsured, individual mandates and individual responsibility are not the solution to the crisis of the uninsured.

A single payer health care system (or a robust public option) would essentially be a government handout to the uninsured.

- A single payer system would result in a number of moral, economic, and cultural benefits. It is not a welfare policy for the uninsured; rather, it is a policy whose benefits would accrue to all Americans. For example, single payer would save money, improve health, and create a society with more equal opportunity. These are things all Americans can enjoy.
- There are many services that are provided by the government that can be seen as “handouts.” The recent bailout of the financial and automotive industries serves as a prime example of corporate welfare.
- Education is provided by the government to benefit society. Similarly, health care should be financed by the government based on a similar rationale.

Why should I pay for someone else’s poor health choices? I don’t want to pay for some crackhead’s addiction.

- Even if you’re healthy and have private health insurance through your employer, your health care costs are currently subsidized by the federal government through tax exemptions. This is a net loss of hundreds of billions of taxpayer dollars to the federal government, a loss that is financed by all Americans.
- Single payer would promote healthier lifestyle choices by providing all Americans access to preventive care.
- Some people are unhealthy because they don’t take care of their health, but many people are unhealthy because of factors beyond their control, such as genetic predispositions. The strong interaction between environment and genetics makes it extremely difficult to determine whether poor health can truly be entirely attributable to an individual’s behavior.

ARGUMENTS THAT THE UNINSURED ARE ALREADY TAKEN CARE OF IN THIS COUNTRY.

“I mean, people have access to health care in America. After all, you just go to an emergency room.” – Pres. George W. Bush

The uninsured get free health care.

- There is a common myth. In fact, among families with at least one uninsured member, less than one-quarter report getting free or discounted care in any given year.

- There is indeed a safety net for a minority of the uninsured, including government-sponsored clinics and hospitals, as well as care provided by private physicians. However, financial pressures due to managed care are reducing the ability of private physicians to provide charity care.
- The uninsured are much less likely than the insured to have a usual source of care. This results in inappropriate ER utilization and ultimately drives up costs for the insured.

ARGUMENTS RELATED TO HOW HEALTH CARE SHOULD BE VIEWED

Health care is not a right.

- Even if health care is not a right, single payer might still be the wisest public policy because of its moral, economic, and cultural benefits.
- Education is not defined in our constitution as a right, yet the vast majority of Americans support the idea that everyone should have access to public education. Health care should be no different.

No one should get free health care.

- There is no such thing as free health care anywhere in the world. Every system has some sort of cost sharing mechanism or fails to cover some services, such as dental care. Moreover, every health care system is financed by taxes to some degree, so nothing is really “free.”
- If the purpose of a health care system is to maximize health, then it makes sense to align financial incentives such that people will utilize the most effective, low-cost interventions. For instance, primary care visits are less costly than ER care or being hospitalized for preventable conditions. Making primary care visits free or extremely low cost removes a major barrier to seeking out such care and therefore saves money. In this sense, the health care system should be designed to ensure that cost-effective primary care services are free or available at low cost, while making less effective interventions more costly.

Health care should be treated like an individual commodity - it should only be available to those who can afford it.

- Health care is a basic human need. You can live without individual commodities (like an iPod or cell phone), but a lot of people can't live without health care in their everyday lives, and no one can live without health care when they are seriously ill.

- Health care costs are unpredictable – you never know when you are going to get sick.

ARGUMENTS RELATED TO AMERICA

Single payer is fundamentally anti-American because America is a capitalist and individualist society.

- It is anti-American to perpetuate a system that hurts innocent, hard working citizens and that puts America at a tremendous economic disadvantage relative to other countries.
- Americans strive for financial security. In the current system there is increasingly less protection against skyrocketing cost. It is estimated that more than 78% of all bankruptcies are related to medical bills. Our current system is un-American by depriving people of financial security.
- A healthy America is a wealthy America. Single payer will boost our economy and help us remain strong.

We have the best health care system in the world, why change it?

- There is no way to objectively measure which health care system is the best in the world. The United States, however, does not measure well against comparable countries with regard to many health indicators. For example, our life expectancy lags behind that of many countries and our infant mortality rate is higher than that of many countries. The World Health Organization ranks our health care system 37th on overall performance, and 24th on health level attainment. All of these mediocre performance measures are unacceptable, especially given that we spend more than any other nation in the world per capita on health care.
- It is true that America offers some of the best care in the world -- but only for the select few who can afford it.

ARGUMENTS RELATED TO THE GOVERNMENT VERSUS THE FREE MARKET

The government can't do anything right and definitely shouldn't be involved in our health care system.

- Medicare is a government-administered program that, despite its problems, including underfunding, is still one of the most efficient and popular social programs in the country. Other effective government programs include the NIH, CDC, and social security.

I don't want government-run health care.

- There is nothing about single payer or a robust public option that implies that the government “runs” health care. The idea is to give a basic guarantee of access to health care to all Americans – clinical decisions are completely left up to the provider. In such a system, health care would be publicly financed but privately delivered.
- Medicare is a government-run insurance program, but the government does not deliver services, rather the delivery of Medicare services occurs through private providers and hospitals.

I don't like the idea of big government and single payer would be just that.

- The hidden assumption in this argument is that single payer would somehow require a massive outlay of federal spending. Physicians for a National Health Program recently released a study projecting that single payer health care reform would save the federal government at least \$ 3.5 trillion over ten years.

The free market is the best solution to the lack of insurance.

- The health care market is fundamentally imperfect.
 - There is significant asymmetry of information between providers and consumers.
 - A functional free market requires a large number of buyers and sellers. Because of the consolidations of hospitals and insurance companies, there are actually few buyers and sellers of health care in any given area. In more than 90% of measured areas in the United States, competition is restricted to less than three private insurers.
- An unfettered free market would price many people out of insurance. In order to provide access to life saving medical care to all Americans, there is a need for significant governmental regulation of the health insurance industry.

I don't want single payer because it is socialized medicine.

- Single payer itself is not socialized medicine, which refers to medicine that is both financed and delivered by the federal government (where the government owns and operates the entire system).
- In the U.S., any politically viable single payer solution would not be socialized medicine as health care delivery would remain private.

ARGUMENTS BY THOSE WHO MIGHT SUPPORT SINGLE PAYER BUT ARE CONCERNED ABOUT THE IMPLEMENTATION

We can't afford single payer.

- We can't afford to not have single payer. The Institute of Medicine estimates that at least \$500 billion is lost annually due to the diminished productivity of our uninsured population, who are less healthy and therefore less able to be productive members of society. Other economic costs include a loss of global competitiveness, unnecessary use of the expensive ER, strain on small businesses, and paying for preventable costly diseases due to lack of health care access.

People will abuse the free health care in a single payer system.

- There is always a balance that must be struck between overutilization and underutilization. Almost every health care system in the world has some degree of cost-sharing (co-pays, deductibles, etc) to prevent overutilization, and the U.S. would be no different under a single-payer system. The key is to make the cost sharing equitable and to set the level of cost-sharing in a way that discourages inappropriate care without discouraging appropriate care.
- Even if health care were "free" in a financial sense, there are other costs associated with using health care. For example, it takes a long time to visit a doctor's office and medical care is often uncomfortable. Common sense dictates that people wouldn't be lining up for coronary artery bypass grafts even if they were free.

Single payer would create waiting lists.

- There is already an infinite waiting list for people who are uninsured in America.
- Waiting lists in other countries are frequently deployed as a scare tactic. Few, if any, single payer systems have extensive waiting lists for medically necessary procedures.

Single payer or a robust public option would result in rationing of care.

- A single payer system would result in much more equitable and efficient distribution of scarce health care resources.

How can we possibly transition from our current system to single payer?

- Through the establishment of a robust public option. Such a phased approach would provide appropriate time and resources for retraining of health insurance industry employees.
- The payment and provider structures already exist within the Medicare program to permit a smooth and seamless transition to a single payer health care system in this country.

Single payer is not a good idea because we would have to pay for the health care of immigrants.

- Immigrants are humans. Health care is a basic human right.

Single payer will restrict provider choice.

- A single payer system would promote increased patient autonomy and choice of providers by removing all “network” restrictions. Currently, many private insurers severely limit patients’ ability to choose their health care provider.

Quality of care will suffer under single payer.

- Single payer provides the most effective financial incentivization structure for increasing the quality and efficiency of care through large-scale adoption of Quality Improvement initiatives such as surgical checklists.

Research will slow down.

- The vast majority of biomedical research is currently publicly funded (by the NIH).

Technology will decrease under single payer.

- Inappropriate use of technology will decrease under single payer because there will be incentives to discourage the use of procedures that have little or no proven clinical benefit.
- Based on government sponsored cost-effectiveness research, the appropriate use of technology will increase in a single payer system for all individuals.

Doctors will never buy into single payer because it will interfere with their autonomy.

- More than 60% of physicians currently support a single payer system. Private insurance companies currently restrict physicians’ ability to practice medicine.

Doctors will never buy into single payer because it will decrease their salaries.

- There is inherent aspect of a single payer system or a robust public option that will decrease physicians’ salaries.