

# Missourians for Single Payer Health Care

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### MESSAGE FROM YOUR PRESIDENT

#### Julia E. Lamborn Gettinger

#### Hardball Time: An Editorial

When you come right down to it, the Weiner gambit to substitute a single-payer bill for the Massachusetts plan writ large was always a symbolic gesture, but one much of the health reform movement clung to as a test of our strength at the grassroots level. We've worked hard for years now to pressure our representatives in congress to stand up for HR676, the Conyers-Kucinich Medicare-for-all bill. And we've not been afraid to play hardball with them. Some suggest that the corrupting influence of the health insurance industry and other pigs at the trough is at play here, and of course they're right. But there's an additional factor, the lack of backbone factor. There's a reluctance to step out of line and be identified as a die-hard opponent of greedy corporations, the real death panels. The Republican Party and the tea baggers will target you next year and make your life a living hell. So everyone plays hardball except the Democratic Party majority. The screaming tea baggers have set the agenda, and we haven't consolidated our power enough to move in a different direction.

The Kucinich Amendment to grant states the waivers necessary to succeed at creating a breakthrough for real healthcare reform was our best hope to make a

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# Dr. Pam Gronemeyer to give prognosis for Single Payer in future health care debate – in wake of Congressional bills



Dr. Pamella Gronemeyer, a pathologist and progressive political activist who lives in Glen Carbon, IL will talk on "The Future of Single Payer in the Health Care Debate" at 6:30 p.m., Thursday, Feb. 18, in the Hanke Room of the Ethical

Society of St. Louis, sponsored by Missourians for Single Payer.

The U.S. Congress's health care reform bills have run aground after a full year of debate. Congress had rejected any discussion of single payer, insisting on an insurance-only debate. Dr. Gronemeyer, who called the reform bills a sham, is a member of Physicians for a National Health Program.

"In 2005 I realized that my country needed more than just a vote from me," she says. "We need health care for all!" She began a grassroots group, The Downstate Democrats for Change, which formed a coalition of labor and progressive citizens. She served as precinct committee person, and personally lobbied in Washington, D.C. and Springfield, IL. She's now seeking election to the Democratic Central Committee in Illinois.

She also works fulltime, running her own business, SEMC Pathology, which serves patients, hospitals and county governments from its regional office in Highland, IL. Dr. Gronemeyer comes by her grassroots volunteerism honestly. Her father was a tool and diemaker and longtime trade unionist, and her mother was a retail clerk at the old Famous Barr store in South St. Louis.

In 1973, she earned her undergraduate degree in biology from Washington University, then her M.D.

degree from Tufts University School of Medicine in Boston. Her pathology residencies were served at Harvard Medical School's hospital system and at Jewish Hospital and Cardinal Glennon Children's Hospital in St. Louis.

Her husband, Stephen Krieh, is an attorney; they have a daughter, Rebecca, 21.



#### State Single Payer Bills Filed

The Missouri Universal Health Assurance Act, our state single payer bill has been introduced in the MO Senate and House. The Senate Bill, **SB 722** is sponsored by **Senator Joan Bray** (University City). SB 722 is assigned to the Senate Small Business, Insurance, and Industry Hearing Committee.

The House Bill, **HB 1641** is sponsored by **Representative Michael Brown** (Kansas City), and cosponsored by **Reps. Jamilah Nasheed, Chris Carter**, **Tishaura Jones** (St. Louis), **Steve Webb** (Florissant) and **Stacey Newman** (Clayton). Please thank these courageous progressives and support them, especially if you reside in their district!

The bills may be read at <a href="www.moga.mo.gov">www.moga.mo.gov</a>. This website enables you to follow the progress of the bills. Keep vigilant for the bill hearings. Your testimony is essential to pass the bill out of committee for debate in the General Assembly. Your personal testimony is best if you are able to travel to Jefferson City. Testimony is limited to three minutes. Your written testimony can be emailed or faxed to the sponsor of the bill for distribution to the hearing committee.

#### Time to Start from Scratch

We've heard President Obama assert during his campaign that if he were starting from scratch he would implement a single-payer plan. He recently stated: "I want to cover everybody. Now, the truth is unless you have what's called a single-payer system in which everyone's automatically covered, you're probably not going to reach every single individual." In addition, President Obama knows that we have to get the spiraling healthcare costs under control.

The current bills before the House and Senate can neither cover everyone nor make healthcare affordable. Only Improved Medicare for All, a national single payer plan such as HR 676, can do the job.

If we don't make serious change to our healthcare financing and delivery, the United States will continue to pay more than any other country in the world and get less. Send the message to President Obama: "It's time to start from scratch. The people want real change – Improved Medicare for Everyone. Single-payer universal healthcare is the only way to get our health, our jobs, and our economy back on track."

(January 27, 2010 by Healthcare-NOW!)

#### MoSP Honored at Awards Banquet

On January 18, 2010 MoSP was honored by the Coalition of Black Trade Unions. At the 32<sup>nd</sup> Annual Dr. Martin Luther King, Jr Human Rights Awards Banquet, MoSP was one of three groups presented with the Dr. Martin Luther King, Jr. Human Rights Award. The Coalition of Black Trade Unions supports HR676 and honored MoSP for our work to secure health care for all. Julia Lamborn, President accepted the award for MoSP. Stefany Brot, Esther Clark, and Mimi Signor were in attendance to help with the celebration. Over 300 people were in attendance for this awards presentation. Two standing ovations were received for our work. Sometimes we think no one notices or no one cares, but then something happens to refresh us. We thank the CBTU for the award and thank all MoSP members and friends, without whom we could not survive.

Julia Lamborn Gettinger

#### Memory of Melanie Shouse

Melanie Shouse had a sharp intellect and quick wit that could make me laugh out loud. Melanie used these attributes to crusade for justice. Melanie was a member of MOSP and The Progressive Democrats of St. Louis. She participated with MOSP in the press conference announcing University City's Resolution in support of HR 676 in 2006. She worked with citizens of Overland to unseat a Mayor who had illegally posed as a registered nurse. After traveling by Metro bus to and from her tiring chemotherapy treatments, she would hoist a sign or banner to picket for honesty in government. Her work for common good refreshed her. Days before her death on January 30, she found strength to encourage by telephone a progressive candidate facing a challenging race.



## Dr. David Gill to Deliver Health Care Sunday Address



In 21 years as an emergency room physician, Dr. David M. Gill of Bloomington, IL saw too many patients face shortened life spans because they couldn't afford insurance. To change this shameful face of American medicine, he's running for United States Congress in central Illinois' 15th District.

As the Annual Health Care Lecturer on Sunday, April 25, Dr. Gill will tell why he's taken this big step — and why Congress should enact a bill to expand Medicare for all Americans. He will speak at 11 a.m. in the auditorium of the Ethical Society of St. Louis, 9001 Clayton Rd., sponsored by Missourians for Single Payer Health Care.

"As a physician who has long served in the last line of defense for patients jeopardized by our failed system, we must stop permitting large insurance and pharmaceutical companies to run roughshod over all other American businesses and citizens," Dr. Gill has said. "When we finally put in place a program which extends Medicare services to all American citizens, regardless of age, the boon to our economy will be like none ever seen before."

Once a member of the board of directors of the Clinton, IL hospital, Dr. Gill belongs to Physicians for a National Health Program. He worked as a dishwasher at age 13, after his father died. He worked his way through the University of Illinois in Urbana to earn both his undergraduate and M.D. degrees. He's running for Congress with the help of hundreds of volunteers and numerous small campaign donations. He and his wife Elaine have a family of six children.



# Exercise Democracy: Adopt a Candidate Now

Now is not the time to be cynical about Democracy and give up on ours. It is the time for necessary grassroots political action. You must not sit out the next election. Democracy only works if you participate. First, be informed. Then, be involved.

If your district has a race, meet the candidates. Ask your candidates if they will work for universal, single payer health care. Ask if they will sponsor legislation to accomplish this. It takes courage to take a moral stand against the rich lobbies. Courageous candidates need and deserve your help.

Elections can be won with the help of an army of dedicated volunteers. It takes hours of work, such as door knocking, talking with fellow constituents, hosting coffees, or stuffing and mailing campaign literature. Exercise Democracy and your legs at the same time. Your help can make the world of difference. Adopt a progressive candidate. We've got a lot of work to do!

#### There is still time for real reform, listen to the American people

#### An Open Letter to President Obama on Health Care Reform, by Margaret Flowers, MD

Dear President Obama,

I was overjoyed to hear you say in your State of the Union address last night: "But if anyone from either party has a better approach that will bring down premiums, bring down the deficit, cover the uninsured, strengthen Medicare for seniors, and stop insurance company abuses, let me know."

My colleagues, fellow health advocates and I have been trying to meet with you for over a year now because we have an approach which will meet all of your goals and more.

I am a pediatrician who, like many of my primary care colleagues, left practice because it is nearly impossible to deliver high quality health care in this environment. I have been volunteering for Physicians for a National Health Program ever since. For over a year now, I have been working with the Leadership Conference for Guaranteed Health Care/ National Single Payer Alliance. This alliance represents over 20 million people nationwide from doctors to nurses to labor, faith and community groups who advocate on behalf of the majority of Americans, including doctors, who favor a national Medicare-for-All health system.

I felt very optimistic when Congress took up health care reform last January because I remember when you spoke to the Illinois AFL-CIO in June, 2003 and said: "I happen to be a proponent of a single-payer universal health care program." [applause] "I see no reason why the United States of America, the wealthiest country in the history of the world, spending 14 percent of its Gross National Product on health care cannot provide basic health insurance to everybody. And that's what Jim is talking about when he says everybody in, nobody out. A single-payer health care plan, a universal

health care plan. And that's what I'd like to see. But as all of you know, we may not get there immediately. Because first we have to take back the White House, we have to take back the Senate, and we have to take back the House."

And that is why I was so surprised when the voices of those who support a national single-payer plan/ Medicare for All were excluded in place of the voices of the very health insurance and pharmaceutical industries which profit off the current health care situation.

There was an opportunity this past year to create universal and financially sustainable health care reform rather than expensive health insurance reform. As you well know, the United States spends the most per capita onhealth care in the world yet leaves millions of people out and receives poor return on those health care dollars in terms of health outcomes and efficiency. This poor value for our health care dollar is due to the waste of having so many insurance companies. At least a third of our health care dollars go towards activities that have nothing to do with health care such as marketing, administration and high executive salaries and bonuses. This represents over \$400 billion per year which could be used to pay for health care for all of those Americans who are suffering and dying from preventable causes.

The good news is that it doesn't have to be this way. You said that you wanted to "keep what works" and that would be Medicare. Medicare is an American legacy of which we can feel proud. It has guaranteed health security to all who have it. Medicare has lifted senior citizens out of poverty. Health disparities,

which are rising in this nation, begin to disappear as soon as patients reach 65 years of age. And patients and doctors prefer Medicare to private insurance. Why, our Medicare has even been used as a model by other nations which have developed and implemented universal health systems.

Mr. President, we wanted to meet with you because we have the solution to health care reform. The United States has enough money already and we have the resources, including esteemed experts in public health, health policy and health financing. Our very own Dr. William Hsiao at Harvard has designed health systems in five other countries.

I am asking you to meet with me because the solution is simple. Remove all of the industries who profit off of the American health care catastrophe from the table. Replace them with those who are knowledgeable in designing health systems and who are without ties to the for-profit medical industries. And then allow them to design an improved Medicarefor-All national health system. We can implement it within a year of designing such a system.

What are the benefits of doing this?

- \* It will save tens of thousands (perhaps hundreds of thousands) of American lives each year, not to mention the prevention of unnecessary suffering.
- \* It will relieve families of medical debt, which is the number one cause of bankruptcy and foreclosure despite the fact that most of those who experienced bankruptcy had health insurance.
- \* It will relieve businesses of the growing burden of skyrocketing health insurance premiums so that they can invest in innovation, hiring, increased wages and other benefits and so they can compete in the global market.

- \* It will control health care costs in a rational way through global budgeting and negotiation for fair prices for pharmaceuticals and services.
- \* It will allow patients the freedom to choose wherever they want to go for health care and will allow patients and their caregivers to determine which care is best without denials by insurance administrators.
- \* It will restore the physician-patient relationship and bring satisfaction back to the practice of medicine so that more doctors will stay in or return to practice.
- \* It will allow our people in our nation to be healthy and productive and able to support themselves and their families.
- \* It will create a legacy for your administration that may someday elevate you to the same hero status as Tommy Douglas has in Canada.

Mr. President, there are more benefits, but I believe you get the point. I look forward to meeting with you and am so pleased that you are open to our ideas. The Medicare-for-All campaign is growing rapidly and is ready to support you as we move forward on health care reform that will provide America with one of the best health systems in the world. And that is something of which all Americans can be proud.

With great anticipation and deep respect,

Margaret Flowers, M.D. Congressional Fellow, Physicians for a National Health Program

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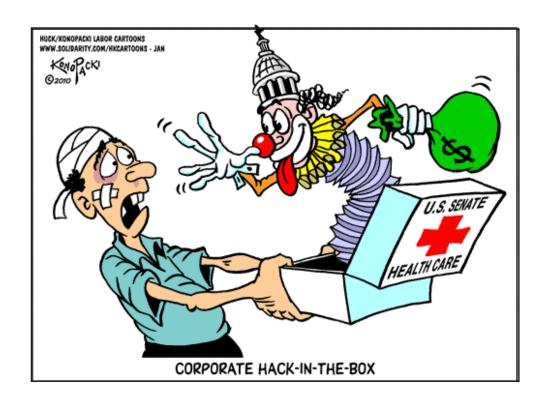
#### Hardball Time: An Editorial (cont'd from page 1)

difference. And it too has been declared off the table. This is where we need to take a stand. But we cannot afford any illusions here either. Some imply that the fact that California twice passed a single-payer bill harkens well for our movement. We need to be aware that the California constitution requires bills with funding mandates to pass by two-thirds. So the California bill lacked a funding provision. However, the passage of the bill, twice, was vital for movement building, but of itself was symbolic, not practical. In Massachusetts for years we wrestled with the question of whether to include a funding mechanism in our single-payer bill. For years our legislative sponsors counseled us not to. For the last several sessions we have included such a funding piece. But either with or without the funding, our bill never came out of committee, no matter how compelling our arguments at hearings or how many prestigious individuals and dedicated grass-roots people we mobilized at the State

House. Several years ago a delegations from Mass-Care had a heart-to-heart talk with the House chair of the Joint Committee on Health Care, where she admitted that nothing comes out of her committee without the approval of the health insurance industry. In other words, single payer has been declared off the table here too. So maybe California or Massachusetts won't be the US equivalent of Saskatchewan, but maybe Vermont, Maine, or any of the other states will make the breakthrough and set the example for the country.

We are working hard to get Bernie Sanders' initiatives in place. The movement is hoping to get ten senators to vote from the floor for Bernie's single-payer substitution proposal (S.703), and many are hoping that the state-waiver piece to facilitate single payer will be included in the Senate version and survive conference. So put the heat on Washington to stand up for this opportunity to win at the state level. Give them some backbone.

– Sandy Eaton, RN, Editor of CommonHealth



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