



# Missourians for Single Payer Health Care

438 N. Skinker Blvd., St. Louis, MO 63130 ~ Ph: 314.862.5735 ~ [www.mosp.us](http://www.mosp.us)

## President's message: American As Apple Pie

Medicare is as American as apple pie: PIE, as in Protect, Improve and Expand Medicare. U.S. Medicare is golden, not just because it is fifty, but because it is an essential national program which exists for the common good of our society.

Medicare was designed for our nation's seniors to get needed health care, while protecting their retirement savings. Basic Medicare has minimal bureaucracy, low administrative costs, and choice of providers, rating high in satisfaction in senior's polls.

We must work to protect Medicare, the ideal model on which to base a single payer universal health program for our country. We must demand that our members of Congress protect Medicare from devastation via higher co pays and deductibles, raising the eligibility age, means testing, underfunding, defunding, redirecting Medicare funds, privatization, and vouchers. Disingenuous politicians will say, "We had to kill it to save it", which really means, they had to kill it **to kill single payer**.

We must work to improve Medicare. It is not comprehensive, and it covers roughly 51% of overall medical costs. Medicare must pay for all necessary medical care, including dental services and durable and nondurable medical goods. Medicare must be empowered to negotiate for fair pricing for prescription medicines and medical supplies.

Everyone needs and deserves health care. Health care must be a civil right, as it is in every other developed country. We have cutting edge medical technology in tandem with Third World delivery models, in which our poor suffer more and die sooner. *(continued on next page)*

### **MoSP newsletter staff**

*Editor-in-Chief,*

*Mimi Signor*

*Mailing Committee, Mary*

*Jane & Bob Schutzius*

*Layout editor, Anne Bader*

*Webmaster, Don Ford*

[www.mosp.us](http://www.mosp.us)

## Summer Calendar

*MoSP summer movie nights*

*6:30pm in the Hanke*

*Room, Ethical Society of St.*

*Louis, 9001 Clayton Rd.*

**June 18, "The Spirit of 45"**, documentary by

British director Ken

Loach about the histori-

cal events leading up to

the creation of the

National Health Services.

**July 16, "SickO",**

Michael Moore's award-

winning documentary

about the plight of

insured Americans

compared with other

countries.

**August 20, movie TBA**



We must work to expand Medicare to every citizen. Be a change agent. Educate and advocate, demand that your elected representatives do the right thing, write letters to the editor/opinion editorials, call in to TV & radio talk shows, and join with like-minded citizens to celebrate Medicare's 50th Anniversary July 30, 2015.

—Mimi Signor, RN, President



## Join Show Me Medicare's Golden!

The planning committee for Medicare Week July 26-30 include these local advocacy groups: Missourians for Single Payer, Empower Missouri (formerly Missouri Association for Social Welfare), Missouri Alliance for Retired Americans, Ethical Society of St. Louis, Women's International League for Peace and Freedom, University City Commission on Senior Issues, Gateway Green Alliance, SAGE (support and advocacy for older LGBT adults), and Black Nurses Association of Greater St. Louis, with other local and state organizations.

If your group would like to participate with us, send an email to [showmemedicaregolden@gmail.com](mailto:showmemedicaregolden@gmail.com) with the name of your organization and the name and contact information of the person who will represent your group on the committee. If you, or anyone you know are from Kansas City, Springfield, mid-Missouri and Southeast Missouri and would like to participate, send an email to the email address above and we will put you together with like-minded advocates from your area.

—Mimi Signor, MoSP;  
Jeanette Mott Oxford, Empower MO;  
Judith Parker, MOARA

### Medicare Week July 24-30

**Friday – Sunday, July 24-26:** “Medicare is Golden” in communities of faith. Theme: Honor thy father and thy mother via health care

**Sunday, July 26, 1:15 pm:** Medicare's 50<sup>th</sup> birthday celebration at the ball park - Busch Stadium

**Monday, July 27:** Meetings with one's own member of Congress for a pledge to protect and preserve U.S. Medicare; MoSP annual Medicare's birthday meeting with Congressman Lacy Clay of St. Louis-to attend, contact Mimi via the MoSP website contact tab.

**Tuesday, July 28:** Demonstrations

**Wednesday, July 29:** Focus on rural Missouri

**Thursday, July 30:** Birthday party with musical celebration of Medicare's 50<sup>th</sup> Birthday  
Watch the website for updates and details on events: [www.mosp.us](http://www.mosp.us).

## NOW'S the TIME!



*Bob Wickline and his musical family*

Why wait until July? The 50th Anniversary of Medicare presents a golden opportunity to celebrate Medicare while promoting Medicare for All every day of 2015! Now's the time to explore creative ways to promote HR676 - Expanded, Improved Medicare for All to a broader audience. NOW'S the TIME!

To celebrate Medicare and promote Medicare for All-HR676 you may use our *Medicare for All* music video promos to educate, motivate, and activate. The 90-second *Medicare 50th Anniversary Music Video* contains a 30-second information scroll designed to communicate longer, more in-depth messages than those used to “tag” or come at the end of a 60-second radio audio PSA, promo, or paid commercial.

Both promos were edited from our rally song, “Medicare for All!” The complete version is available on our re-mastered, 10-song progressive CD by Wickline family and talented friends, “Wake up, America! *We shall reap what we sow!*” Thanks for your commitment to “... *promote the general welfare....*” in our continuing effort “...*to form a more perfect Union.*”

*“There are no easy answers to the problems that we face.  
If we truly want solutions, the mirror is the place  
To find the person who can change the world.  
With the will, there is the power!  
Why wait another day? Why wait another hour?  
NOW'S THE TIME!”*

### **Medicare for All! 90-second Promo**

#### **Medicare 50th Anniversary - HR676**

*(with 60-second video promo + 30-second information scroll)*

<https://www.youtube.com/watch?v=6dvf1u-s8go>

### **Medicare for All! 60-second Promo**

#### **Medicare 50th Anniversary - HR676**

<https://www.youtube.com/watch?v=ATUZeQIYssI>

—Bob Wickline, Fox Island, Washington,  
Cascade Mountain Music/ All rights reserved  
253-549-2468



# Medicare For All

### **Single Payer at Earth Day**



*Rebecca Kriegh at Earth Day booth*

My daughter, Rebecca Kriegh, and I sponsored and staffed a booth at Earth Day in Forest Park on April 26. We handed out information on single payer health care and pamphlets about MoSP, as well as flyers about Dr.

Woolhandler’s talk at the Central Reform Congregation. It was a great day and we had many interested visitors to the booth. As always, we must continue to spread the word. Southern Illinois People for Progress (SIPP) is trying to raise enough money for a billboard on Highway 55/70 to honor Medicare’s 50<sup>th</sup> Birthday July 30.

—Pam Gronemeyer, MD

## Free Clinic Spotlights the Problem and the Solution



*Dr. Bill Fogarty and Dr. Ed Weisbart  
at the Free Clinic*

It's one thing to know that there are tens of millions of Americans without health insurance; it's another thing to see 1,000 of them waiting patiently for care.

On Saturday April 18, the National Association of Free and Charitable Clinics

([www.nafcclinics.org](http://www.nafcclinics.org))

rented out Bartel Hall in Kansas City, Missouri where volunteers from across the state came to deliver free health care to uninsured Missourians. Many had no access to basic health care in over five years, despite coming from a household where someone works full time.

We saw diabetics without insulin, hypertensive patients without blood pressure meds, and people struggling with depression but unable to afford an antidepressant. We took care of these folks, evaluated them, got them a free, three month supply of their medicines (thank you, Rx Outreach!), and an appointment for follow up care.

These patients seem to be caught in the middle of a slow-moving train wreck. They know they're on the train track, they can see the train coming, but they can't get themselves off of the rails. Our country has decided that it's not our problem until the train hits them.

When untreated hypertension disables you from a stroke, when your untreated diabetes ruins your kidneys requiring dialysis, you can then get Medicare. As a taxpayer, I would much rather pay the pennies to prevent those disasters. As a physician, I can't stand having my hands tied because patients cannot afford the price tag that comes with my medical advice. How

can a nation with our wealth tolerate injustices in health care?

It's terrific to help these patients, but it's like putting a Band-Aid on a major injury. Helpful, but not a real solution to the problem. I volunteer at these one-day events from NAFC every chance I get, but our wealthy country must do more. Needless suffering warrants action: adopt single payer national health insurance.

—Ed Weisbart, MD, CPE, FAAFP  
Chair, PNHP-MO  
[pnhpMO@gmail.com](mailto:pnhpMO@gmail.com)



## A Doctor's Perspective



*Arthur Gale, MD*

Arthur Gale, MD spoke on **“Medicare after 50 years: the Good and the Bad”** on May 21 on the power of Medicare to lower prices, the pitfalls in Medicare Advantage plans (Part C) and how hospital mergers increase medical costs. Dr. Gale is in the private practice of

internal medicine in St. Louis.

Dr. Gale has recently published **“A Doctor's Perspective on Medical Practice in the Early Twenty-First Century”**, a series of his best essays on the impact of managed care and government reforms to the detriment of doctors, their patients and the quality of care. The price is ten dollars, which he donates to the Missouri Physicians Health Program. Dr. Gale's website is: [www.arthurgalemd.com](http://www.arthurgalemd.com).

Gale is the author of *The Hijacking of American Medicine by Managed Care: The Perspective of a Practicing Physician* and *The Hijacking of American Medicine by the Federal Trade Commission*.



## June 18 Film: *The Spirit of '45*



*Josh Lucker speaking*

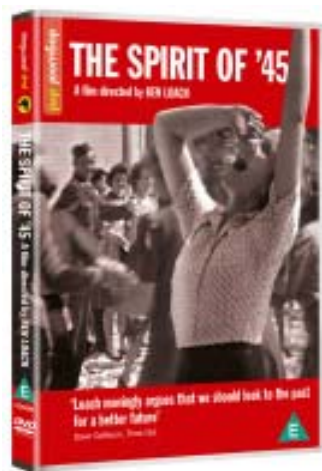
### *The Spirit of '45*

kicks off MoSP's summer movie nights on Thursday, June 18 at 6:30 pm at the Ethical Society of St. Louis. In *The Spirit of '45*, is a documentary by British director Ken Loach, which examines

the victory of the Labour Party in the UK following the end of WWII and the subsequent setting up of the National Health Service (NHS), public housing initiatives, nationalization of key levers of transport and natural resources, and the rapid transportation of the status quo of British politics. In a country like ours, where we still lack quality, universal health care for all (or a labor party, for that matter), the interviews from participants in the events of those tumultuous years in Britain echo lessons down to us across the years and the ocean.

Loach's previous work, such as *Land and Freedom* and *The Wind That Shakes the Barley*, has met with broad critical acclaim. *The Spirit of '45* is the next excellent film in a career that has spanned the decades. It is an amazing film, full of emotion and reason, which is always an excellent combination. Sadly, it saw extremely limited release in the United States, so take advantage of this opportunity to see this incredibly moving film.

The Campaign for a Mass Party of Labor (CMPL) believes that: "The bosses have two parties: We need one of our own!" The labor movement has tremen-



dous power, numbers, and resources. Instead of supporting corporate politicians and parties, we should use these resources to build our own party, a party that truly represents and is accountable to the workers. Frustration with the two major parties is growing. Let's not wait until yet another election year passes us by to raise these ideas. Let's work together to bring the Campaign for a Mass Party of Labor to our work places, communities, and schools.

—Josh Lucker



## *Sicko* is July 16 Summer Movie



*Sicko* is a 2007 documentary film by American filmmaker Michael Moore. The film investigates health care in the United States, focusing on its health insurance and the pharmaceutical industry. The movie compares the for-profit, non-universal U.S.

system with the non-profit universal health care systems of Canada, the United Kingdom, France and Cuba. According to *Sicko*, insured Americans are often victims of insurance company fraud and red tape. *Sicko* points out that the U.S. health care system is ranked 37 out of 191 by the World Health Organization with certain health measures, such as infant mortality and life expectancy.

*Sicko* premiered on May 19, 2007, at the 2007 Cannes Film Festival, receiving a 17-minute standing ovation from 2,000 people at the Grand Theatre Lumiere. It had an early premiere in Washington DC on June 20, two days before its U.S. release, with Moore appearing at a Capitol Hill press conference to promote the film.

## What Does the ACA's Excise Tax on High-Cost Plans Actually Tax?

(An NEA-Commissioned Report by Milliman)

March 13, 2015. Always suspecting the term “Cadillac Tax” to be highly misleading, NEA hired the actuarial firm Milliman to determine whether the excise tax on high-cost plans is really a tax on overly generous health plans. In addition, NEA has a much higher percentage of older and female workers than the national workforce, so we asked Milliman whether the tax corrects for the impact of age and sex on premiums. What Does the Excise Tax Really Tax?

The actuaries found that “although the excise tax is often referred to as a tax on overgenerous health benefits, it is likely to be a tax based on factors other than benefit richness and beyond the control of health plan members.” For example, Milliman tested the relative impact on premiums of plan benefits and other factors. The actuaries concluded that, compared to their benchmark, geography had a potential 69.3 percent impact on premiums, meaning that area-specific health care costs alone could boost a \$9,189 premium in 2018 to \$15,556.

Among their other findings: Premiums could increase by as much as 15.7 percent for plans with provider networks that have low negotiated discounts for doctors, hospitals, and others.

In contrast, plan benefits in the study only increased premiums by as much as 6.2 percent. The excise tax was designed to push employers to cut employees’ health benefits, but with factors other than health plan generosity driving tax liabilities, the resulting benefit reductions will be arbitrarily damaging to millions of employees and their families.

What Role Does Geography Play in Generating Tax Liabilities? Milliman concluded that geography-related premium differences will “lead to much higher premiums and substantial taxable costs in many parts of the country.” When the actuaries tested benefits typical of gold level health insurance exchange plans, they found

that plan members’ location alone would trigger the excise tax in many places, even when the same gold-level benefits in other places would not. They found, for example, that the premium for a gold-level plan in San Francisco, California, would be 37 percent higher than the exact same plan’s premium if it were in Huntington, West Virginia. In fact, they found striking disparities all over the country.

Does the “Age and Gender Adjustment” Correct for the Impact of Age and Sex on Premiums? Congress knew that the excise tax on high-cost plans could be unfair to women and older workers, but Milliman concluded that the tax’s attempt to fix the problem “fails to compensate for the impact on premiums of age and sex in many parts of the country.” As a result, health plan members’ age and sex could contribute to excise tax liabilities. It also means that women and older workers could be disproportionately hurt by tax-spurred benefit cuts.

To receive a copy of the report, please contact the NEA Collective Bargaining and Member Advocacy Department at [collectivebargaining@nea.org](mailto:collectivebargaining@nea.org)



### Letter to the Editor

**St. Louis Post-Dispatch, May 14, 2015**

***With better stewardship of tax money, we could provide better health care***



*Suzanne Hagan*

As I took my walk today, I noticed how the sidewalks in our subdivision have been modified to enable wheelchair users to cross the street. If not for those curb cuts, my neighbor Mark couldn’t exercise his dogs. His electric wheelchair makes many trips up and down neighbors’ driveways, delivering the Post-Dispatch to our doors.

No one, I hope, would begrudge these sidewalk improvements just because not all of us use them.

Yet we seem to think nothing of denying the working poor in Missouri the Medicaid benefits that their own tax dollars should entitle them to. Instead, we're sending their tax dollars, and ours, to other states that are not so stingy with this benefit. As I reflected on Sunday's front-page article "Medicaid missteps," I couldn't help but think about this paradox of neighborliness.

The article shows that about one dollar of every six goes to managed care — the insurance middleman. If we were better stewards of our Medicaid dollars and administered the program ourselves, this expense could be drastically cut. As it is, managed care companies like Centene make record profits while we deny Medicaid benefits to those who need them.

About the same amount (\$1 of every \$6) goes toward nursing home expenditures. Instead of warehousing our medically fragile citizens in such expensive ways, we might follow the lead of other states. In the PBS documentary "Caring for Mom and Dad," programs in Minnesota and Ohio have cut nursing home expenditures drastically. They have funded home health aide programs to provide services to citizens in their own homes or those of relatives.

If we were just better neighbors to our fellow citizens, and better stewards of our tax monies, we would save money and provide better care, a true win-win situation. Instead, we seem to think the answer to fixing Medicaid's problems revolves around adding fewer people to the rolls. However, the cost of physician services is the smallest of Medicaid spending segments.

I wish our Legislature would show some true leadership and tackle the real problems instead of stubbornly refusing taxpayers the benefits to which they are entitled.

—*Suzanne Hagan  
Ballwin*

## Trojan Horse for Medicare Privatization



*Ida Hellander, M.D.*

March 25, 2015. The bipartisan "Doc Fix" legislation (H.R. 1470, now H.R. 2) and proposed amendments will undermine traditional Medicare and advance the goal of privatization, accord-

ing to Dr. Don McCanne in a series of posts to his popular health policy blog, the *Quote of the Day*. If enacted as it presently reads, it will:

1. Limit choice of physician in traditional Medicare.
2. Reduce access to care in traditional Medicare.
- Imposes a deductible that cannot be covered by Medigap insurance (starting in 2020) to encourage patients to join a private plan.
3. Raise Medicare's costs by driving more patients into private Medicare Advantage plans.
4. Undermine Medicare's popular support by requiring higher income seniors to pay higher premiums (means testing).
5. Ending the SGR should cost \$20 billion, not \$210 billion.
6. The GOP sees this bill as a step towards their longer-term goal of turning Medicare into a voucher program for private plans, shifting more costs onto patients.

—Ida Hellander, M.D.

*Dr. Ida Hellander is director of health policy and programs at Physicians for a National Health Program. The full text of this condensed article can be read at [www.pnhp.org](http://www.pnhp.org).*



Missourians for Single Payer Health Care  
438 N. Skinker Blvd.  
St. Louis, MO 63130

Non-profit Organization  
US Postage  
PAID  
St. Louis, MO  
Permit MO 3550

Address Service Requested

## Membership Form

### Missourians for Single Payer Health Care

438 N. Skinker Blvd., St. Louis, MO 63130

Phone: 314-862-5735

[www.mosp.us](http://www.mosp.us)

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ Zip \_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_ Email\_\_\_\_\_

### Categories

\_\_\_\_\_ Individual, \$20      I will contribute \$\_\_\_\_\_ towards \_\_\_\_\_

\_\_\_\_\_ Family, \$30      \_\_\_\_\_

(specific programming and expenses)

\_\_\_\_\_ Organization, \$50

\_\_\_\_\_ Other \$\_\_\_\_\_

\_\_\_\_\_ I'm unable to pay dues at this time, but I will support and promote MoSP among relatives, friends, colleagues, acquaintances, however I can. Please continue to send me the newsletter. Please call on me for volunteer help.