



PUBLIC CITIZEN

# THE CASE FOR MEDICARE-FOR-ALL

## Medicare-for-All Would Improve Health Care for Families and Providers

In an attempt to dampen enthusiasm for the proposal, Medicare-for-All skeptics have raised a number of questions about how such a system would work. For instance, they question how Medicare-for-All would affect access to care, including whether there would be wait times; whether providers would face lower pay; and what could happen to workers currently employed in the private insurance industry.

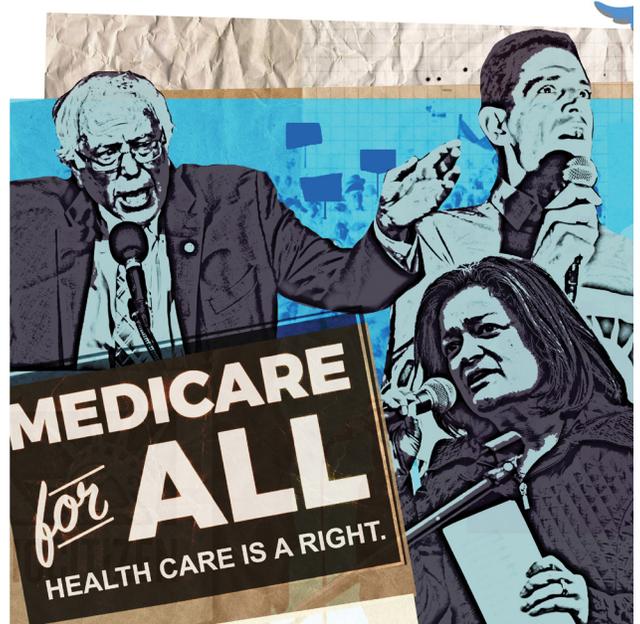
The reality is that Medicare-for-All would build on the [success](#) of the existing Medicare program, which has a strong record for ensuring access to timely care for enrollees. Furthermore, Americans would no longer be forced to skip treatments due to cost – in essence putting themselves on an infinitely long waiting list with no way to get off – which could greatly reduce our [unacceptably high rate of avoidable deaths](#) due to lack of access to care.

Nor would funding for Medicare-for-All depend on significantly reducing provider salaries. In fact, Medicare-for-All would actually provide great benefits to physicians and other providers by allowing them to focus on providing care rather than on billing and other exhausting [paperwork](#). For private insurance industry workers, robust employment support would be provided for those who need retraining during the transition to the new system.

Here are some of the ways Medicare-for-All's implementation would improve our health care system:

### Build on Medicare's Successful Record of Providing Timely Care

While a commonly-voiced argument from the op-



Graphic courtesy of Isabelle Cardinal.

position is that wait times for care would increase, there is plentiful evidence that Medicare-for-All would actually improve access to care, compared with our current system. By building on the success of Medicare, which remains [extremely popular](#), we can expect Medicare-for-All to provide continue providing access to timely care. Around [90 percent](#) of Medicare beneficiaries report that they are able to schedule timely appointments for primary and specialty care. In addition, the [abundant supply of specialists](#) in the United States means that Americans are unlikely to experience difficulties accessing specialty care. The timeliness of care under the existing U.S. system is [not an object of global envy](#), with wait times about average [when compared](#) to other countries but with far more Americans reporting difficulty accessing care due to cost. All this comes despite the fact that we currently spend twice as much as comparably wealthy nations on our fragmented health care system.

### Ensure Americans Receive the Care They Need

Studies find that Americans routinely [avoid needed health care due to cost](#), and families with below average incomes are even more likely to [forgo](#) needed care—including doctor appointments, medical tests, and filling prescriptions—all due to costs. Even a number of higher-income Americans [report](#) having unmet health care needs due to the high

cost of care. Finally, the U.S. [ranks the worst](#) out of 16 industrialized countries for deaths that could be prevented with proper medical care. By providing guaranteed access to health care, Medicare-for-All would ensure that everyone in the U.S. would no longer need to forgo needed treatments due to cost.

### Better Pay for Primary Care Doctors and Other Types of Providers

Physician compensation accounts for [less than 10 percent](#) of total health care costs. Therefore, developing a more affordable health care system would not rely significantly on driving down pay for physicians or other health care providers. Furthermore, other providers, such as family physicians, primary care doctors, internists, and [mental health care providers](#) would likely see pay increases, as everyone in America would now be able to afford needed services.

### Benefits Physicians and Other Providers

A growing number of doctors support Medicare-for-All, including [more than 55 percent](#) in a recent survey. Medicare-for-All would provide many benefits to health care workers. For instance, providers would not have to wade through [exhausting and time-consuming paperwork and billing](#). These excessive bureaucratic tasks are a [major cause](#) for provider burnout. Furthermore, doctors and other health care providers also face the risk catastrophic costs of their own health care and that of their loved ones. These providers understand more than most the pitfalls and snares of our current system and

the way it can fail and victimize Americans.

### Ensure a Just Transition for Private Insurance Workers

It's true that the [one to two million workers](#) currently employed in the private insurance field would be affected by transition to Medicare-for-All. Fortunately, many of these workers would have a bevy of new job opportunities open up for which they are well-qualified. For one, Medicare-for-All implementation would mean a number of new [jobs in health care-related fields](#), including in the offices of providers of family care, primary care, and mental health, who would likely see an increased demand for patients as more Americans could finally get

the care they need. Workers that are unable able to easily move into such jobs would receive support for finding new jobs or retraining for other careers. The Medicare-for-All [bills under consideration](#) in the last Congress in both the House and Senate included robust provisions to help former private insurance workers to transition into other careers. These provisions include job training and placement, as well as eligibility for two years of transition benefits equal to their salary during their last 12 months of employ-

ment. Other transformational moments in our nation's history did not come with such guarantees like when wainwright and farrier jobs were no longer needed after the invention of the automobile.

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