



Missourians for Single Payer Health Care

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President's message: Prostitutes versus Single Payer

Prostitution is business as usual in American government. "Prostitute," the gender-neutral noun, "is a person who sells one's moral integrity for a low or unworthy purpose, having compromised principles for personal or financial gain."

Political prostitutes solicit millions from the medical-industrial complex to win elections and enact laws that enrich their benefactors. Corporations recoup their political capital through favoritism, deregulation and tax exemptions. The insurance industry profits, while our citizens struggle with poor health and medical debt.

The insurance industry designed the Affordable Care Act with the endorsement of Senator Max Baucus, who accepted more money from the insurance industry than any other member of congress. Baucus had single payer advocates arrested for protesting.

Senate Minority Leader Chuck Schumer states that single-payer will happen in "10 or 20 years." The Center for Responsive Politics in Washington, D.C. reports



Our Revolution, California



SB562 Advocates, Sacramento

that Sen. Schumer received \$2,715,088 from the health industry in 2017.

Californians have worked towards a state single payer program since the 1990's. Despite 4 million advocates, the endorsement of labor, a super majority of Democrats in both houses, and a Democrat as Governor, SB 562, The Healthy California Act has been refused a public hearing. Politicians gloat that "single payer is dead."

Elected politicians have a right to taxpayer funded health care, while denying it to the rest of us. Our government is a thinly disguised Plutocracy serving the wealthy. When we remove the prostitutes from our capitols, and outlaw big money in politics, we will establish health care as a civil right, as it exists in every other Democracy except ours.

---Mimi Signor, RN, President



Jim Hightower, MoSP, 2006

“Let’s be blunt: When it comes to the fiery leadership that America’s grassroots people want and need, the Democratic Party establishment is weaker than Canadian hot sauce. When you’ve got 60 percent of your party’s rank-and-file congressional members ready to go on such a basic issue and 60 percent of the public is also ready to go—it’s time to go!”

---Jim Hightower



AFL-CIO Resolution for Single Payer

Stating that, “We have a real opportunity to achieve the labor movement’s historic demand for health care as a basic human right,” delegates at the AFL-CIO Convention approved a resolution October 24 promising that America’s largest labor federation will play a leading role in the fight for Medicare for All. This resolution, said USW President Leo Gerard on behalf of the Resolutions Committee, “commits the AFL-CIO to work with sponsors of single payer legislation...to move expeditiously towards a single payer Medicare for All system.”

As the movement to establish a single payer Medicare for All system moves beyond the aspirational and begins to wrestle with serious opportunities to implement healthcare for all legislatively, today’s convention action will prove to be an important step forward in that fight. We thank all of our supporters who made this advance possible and commit to redouble our efforts at this historic moment.

---In Solidarity, Mark Dudzic, National Coordinator



Obituaries

Remembering Dr. Suzanne Hagan, OD



Suzanne (l.) with Carol Paris and MoSP Board, 2012

When Suzanne transitioned from a member of MoSP to a Board member in 2011 she wrote about why she made the decision to serve: “As a doctor, I wrestled (often ineffectually) with the multiplicity of insurance providers, the difficulties of getting on provider panels, and the utter ridiculousness of our current system. When I became a cancer patient in 2008, I found out how difficult it was to deal with my supposedly good insurance provider. I was sent bills for thousands of dollars in charges that the provider should have paid but didn’t. Undergoing major surgery and aggressive chemo, I scarcely knew my own name some days, and could not respond appropriately to the demands of dealing with the provider. Both experiences convinced me that a single payer system—Medicare for All—was the only rational approach. I wanted to join MOSP since they saw things the way I did. I realize the difficulty of redirecting our lumbering, overloaded and leaky national ship of health care insurance. I look forward to educating myself about what can be done in terms of creative solutions to help right this listing vessel.” We lost Suzanne to cancer on Oct. 18.

Suzanne advocated for Single Payer Health Care (Medicare for All) through frequent letters in the St. Louis Post-Dispatch. Some can be read in the Spring 2014, Fall 2014, Winter 2014 and Spring 2015 MoSP newsletters.

Prior to becoming an optometrist, Suzanne had careers in college teaching, science and medical writing and editing. After selling her optometric practice, she volunteered at Shaw Nature Reserve and the Green Center in University City.

Suzanne’s husband, J.C., invites you to a celebration of Suzanne’s life Friday, Dec. 22, 11 AM-3 PM at The Green Center, 8025 Blackberry Ave, St. Louis, MO 63130.

Remembering Dr. William Landau, MD



Bill Landau

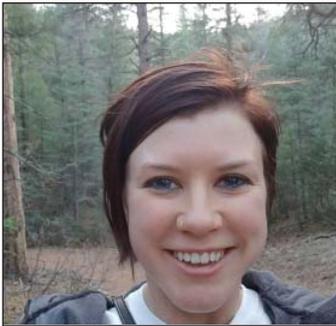
Dr. William Landau, former chief of neurology at Washington University, was an ardent advocate of universal health care. Dr. Landau served on several national medical boards and completed research on Parkinson’s disease, nerve damage and metabolism in the brain.

Dr. Landau was a member of Physicians for a National Health Program and MoSP. Together, we gave single payer presentations at schools of medicine using PNHP slides on a slide carousel, years before we used computers or Power Point. The med students listened intently to Dr. Landau and eagerly awaited the question and answer sessions at the end. He could nuance sarcasm. One student asked him what would happen to the employees of health insurance companies once single payer was enacted. He replied, “We’ll line them up, march them out and shoot them. Does that answer your question?” Dr. Landau also worked with the American Civil Liberties Union of Eastern Missouri for more than 50 years. He died Nov. 2 at age 93.

---Mimi Signor, RN

Updates

STL-DSA Campaign for Single Payer



Catherine Wood, RN

The healthcare committee of the St. Louis Democratic Socialists of America (STL-DSA) recently launched a campaign to advance the cause of single payer healthcare in Missouri. This largely focuses on a combination of local canvassing and phone banking in diverse areas of St. Louis City to increase awareness and support for single payer. The emphasis is on “deep canvassing”, which focuses less on getting a signature or other specific action and instead seeks to have a dialogue to learn about personal experiences and thus inform and shape beliefs about healthcare. There is an actionable item to foster conversation: encouraging Missouri’s Democratic Senator Claire McCaskill, to support the “Medicare for All” bill proposed by Senator Bernie Sanders. This goal seems unattainable, but highlights the divisions between those fighting for a truly universal system and those willing to maintain an unacceptable status quo.

The response has been supportive. People are interested in talking about their experiences in healthcare and a significant number voice support for public health insurance, including the current Medicaid and Medicare. Those who have had overall good personal experiences will recount the issues and barriers their friends and family have experienced. One woman said, though her insurance has been good because of her employer, she still strongly supports Medicare for all because her brothers have not been so lucky.

Some of the people canvassed have voiced interest in joining the campaign effort. Help from anyone who supports the advancement of single payer is welcomed and encouraged! Missouri Jobs with Justice has been

The healthcare committee of the St. Louis Democratic Socialists of America (STL-DSA) recently launched a campaign to advance the cause of single payer healthcare in Missouri. This largely

a key supporter of the effort, giving the campaign the ability to use critically helpful canvassing tools. The guiding script points, canvassing education, and support of the campaign group eases and simplifies the experience. The current campaign will run through the spring, followed by rallies and other events.

---Catherine Wood

Catherine Wood is a member of the Democratic Socialists of America and a registered nurse in the ICU at Missouri Baptist Medical Center. Anyone interested in single payer canvassing with the DSA can contact her at cak.wood.91@gmail.com or the organization, info@dsa.org.



Tim Faust, of the “Heavy Medical” podcast touted single payer for STL - DSA Oct. 20, with Bob Haiduwek of Mfor.All.org

Mid-Missouri MoSP Actions



Dr. Robin Blake, on Big Pharma

Mid-Missourians for Single Payer has had a busy fall. We continue to partner with Physicians for a National Health Care Program (PNHP) and local groups. We were excited to partner with the Jefferson City Indivisible

group to show the film *Fix It* in Jefferson City on Sept. 26. A panel discussion with physicians Robin Blake, Sue Pereira, and Bridget Early, plus Barbara Ross from Missouri Faith Voices prompted a lively discussion. We hope to partner again with Indivisible to show *Big Pharma* in Jefferson City in the coming months.

In collaboration with PNHP we are screening *Big Pharma: Market Failure* throughout the Mid-Missouri region. We collaborated with the Pettis County League of Women Voters to show the film in Sedalia on Oct. 10. Mahree Skala moderated with panelists Dr. Jan Swaney and Dr. Sue Pereira. On Oct. 22, Dr. Robin Blake led a discussion of *Big Pharma* at a forum at the Unitarian-Universalist Church in Columbia. We collaborated with the Audrain County Public Library in Mexico to show the film on Oct. 25. Another screening of *Big Pharma* was held Oct. 30 at the Daniel Boone Regional Library in Columbia with panelists Robin Blake, Barbara Ross and pharmacist Ann Brownstreet. We collect signatures for the CLEAN petition at our screenings.

---Margie Sable, DPH

Our group is growing and we'd love to have more people join us in our efforts. Please contact Margie Sable at Margie.Sable@gmail.com for more information.

Southern Illinois for Progress



Pam Gronemeyer

We rallied at my congressman's office for single payer and to stop the tax reform, the reverse Robin Hood tax that will steal from the poor to give to the rich. At our annual Madison County IL Dem's dinner I talked with the IL 13 candidates about single payer. Jason Kander, the speaker, is now for single payer. Last year, he said that he did not want to re-legislate healthcare and we should fix the ACA, but he has changed his opinion.

I attended the Healthcare Now meeting in Las Vegas where people were enthusiastic about Bernie Sanders' single payer bill. Lew Prince and I filmed a program for Green Time TV about small business and single payer, which will be shown in November.

---Pam Gronemeyer, MD

MoSP Southeast Missouri



Linda Sanders

Cape Girardeau County Democrats are soliciting petitions for the *Clean Missouri Ballot Initiative*: "Shall the Missouri Constitution be amended to:

- change process and criteria for redrawing state legislative districts during reapportionment;
- change limits on campaign contributions that candidates for
- state legislature can accept from individuals or entities;
- establish a limit on gifts that state legislators, and their employees, can accept from paid lobbyists;
- prohibit state legislators, and their employees, from serving as paid lobbyists for a period of time;
- prohibit political fundraising by candidates for or members of the state legislature on State property; and
- require legislative records and proceedings to be open to the public?"

---Linda Sanders



Letters to the Editor

(Letters condensed for space)

St. Louis Post-Dispatch, Oct 28, 2017

Don't let stock profits control the right to medical care



Suzanne Reinhold

Centene's party at the expense of poor Americans on Medicaid has momentarily ended, with the president's announcement of the termination of Affordable Care Act subsidies. We should rejoice for such loss of ill-gotten gain, except that it means that another group of the working poor have no way to pay for medical insurance.

Only the richest country in the world would seek to perpetuate a for-profit medical insurance system, instead of enacting Medicare-for-all, like other advanced countries. Eventually, the Congress will pass it, due to the rising cost of medical care, and when Americans realize stock profits should not control the human right to medical care.

We can thank former President Barack Obama for putting the idea of medical care as a right into the minds of Americans, a problem the Republicans are stuck with.

---Suzanne Rechten Reinhold, St. Louis County

*The Examiner, Serving Eastern Jackson County, MO,
Oct 17, 2017*

NIMA is rational way to fix broken health care system

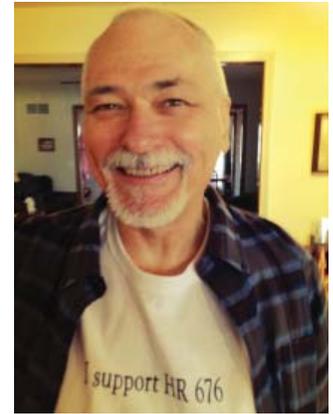
Has anyone else noticed the plethora of health care insurance ads being directed toward us? As a senior on Medicare I receive mailings almost daily advertising supplemental plans. These ads are being paid for out of our health care dollars. The health care insurance industry's primary focus is not to pay our medical bills, their main purpose is to make a profit for themselves and their shareholders.

As long as we depend upon the health care insurance industry to pay our medical bills, we will pay too much for far too little.

This is why health care should not be viewed as a commodity to be bought and sold for profit. Health care should be an obligation of every nation to provide to its citizens. The U.S. is the only developed nation in the world that does not see this. The U.S. has poor to mediocre medical outcomes and pays two times more per capita than any other developed nation.

Let's move to NIMA (National Improved Medicare for All), a single payer healthcare system such as HR 676. It would be the fiscally conservative and the socially progressive solution to our health care financing challenges.

---Terry Flowers, Independence



Terry Flowers

St. Louis Post-Dispatch, Oct 16, 2017

Medicare for All would offer Americans better health care



Pam Gronemeyer

Now that President Trump has found ways to destroy Obamacare without the need for Congressional approval, we must push for the Improved Medicare for All plans by Rep. John Conyers, D-Mich. and Sen. Bernie Sanders, I-Vt.

A majority of the American people support federal government involvement in the delivery of health care to all Americans. The federal government already pays for about two thirds of health care costs through Medicare, the Veterans Administration and Medicaid. As a physician, I know that Medicare works. It is only at the age of 65 that one sees the curve of health care outcomes improve in relation to other nations because of Medicare.

Medicare for All is publicly funded and privately delivered. The health care bills are paid by one payer, the federal government, not a myriad of insurance companies. No one would need to turn to Go Fund Me pages to pay their bills or file bankruptcy.

We need to demand that the government represent us and not let edicts of our president control our health and welfare. Call your congressman and senators and ask them to support the House and Senate bills. Learn about Medicare for All through websites at Physicians for a National Health Program or Healthcare Now.

The money that we currently pay for premiums, co-pay, and deductibles would be reduced by a combination of a progressive tax, employers' tax and other creative funding. This would be a solution that all Americans can proudly support.

---Pamella Gronemeyer, Glen Carbon

Springfield News Leader, August 2, 2017

We should support Medicare for all



Judy Dasovich

Americans need affordable, accessible, quality health care. Our current system relies on private insurance which provides none of these things. Improved and expanded Medicare for all can give us the tools we need to move towards these goals.

The Affordable Care Act (ACA) mandates that people buy an expensive, defective product which enriches corporations, executives and shareholders using tax payers' money. Those who do have insurance often can't afford the premiums, co-pays, and deductibles. If the ACA is fully implemented, 25 million people will be without health insurance. Many states, like Missouri, have not expanded Medicaid, which excludes even more people. The ACA, based on a profit driven system, cannot control costs or ensure quality.

Cost savings will be substantial if we get profit out of health financing. Traditional Medicare's overhead is less than 3% compared with around 15% for private insurance companies. It would provide freedom from

insurance companies' narrow and restrictive networks, freedom to choose our own doctors and hospitals.

Some individuals may pay more in taxes with Medicare for all but total spending on health care would be less for the majority. University of Massachusetts economist Dr. Gerald Friedman's study from 2013 shows that only those with incomes in the top 5% will pay more under expanded Medicare; 95% of us will pay less and have higher net incomes. The money will be used for actual care instead of enriching unnecessary middlemen. Business people can focus on their businesses instead of health care financing. Hospitals and providers will continue to operate privately. It is only the funding mechanism that is changed, improved, and expanded from senior citizens to all of us.

Medicare is a popular program that has worked well for American seniors and entire countries like Canada, Australia and Taiwan. Other industrialized countries pay about half of what we do and provide more care to more people while producing better outcomes. All have some form of financing that makes health care more affordable and accessible. No system is perfect, but other countries' systems outperform the expensive, complex, profit driven one forced upon us here.

This newspaper reported on Senator McCaskill's April town hall meeting in Springfield. She said that Medicare for all is "too expensive and not realistic." Other countries' and our own American experience with Medicare have proven her wrong. Senator Blunt and Representative Long support the current Republican position, which continues to support the business of private health insurance.

Our national legislators are partnering with private health insurance companies behind closed doors. Isn't it time they listen to us instead? Tell your congress people you support H.R. 676 – the Expanded and Improved Medicare for All Act. Everybody in, nobody out!

---Judy Dasovich, Springfield

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(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.