



Money, money, money! The politics of funding single payer

I think what excites people about single payer is just this idea that we could just radically change what people think about as health care and people's experience with health care, and we want that spirit to be honored in these conversations. - Irene Kao

911. What's your emergency?

America's healthcare system is broken and people are dying.

Welcome to Code WACK!, where we shine a light on America's callous healthcare system, how it hurts us and what we can do about it. I'm your host Brenda Gazzar.

(music)

This time on **Code WACK!** What are the main obstacles in implementing a new law paving the way to Medicare for All in California? Where does the biggest opposition lie – and what's at stake if the law doesn't fulfill its mission? To find out, we spoke to **Irene Kao**, executive director of **Courage California**, a progressive grassroots advocacy organization. She's also a board member of the single-payer advocacy coalition **Healthy California Now**.

Welcome back to Code WACK! Irene.

Kao: Thank you for having me back.

Q: Last time, we spoke about a new California law that paves the way for single-payer health care. One of the main things Senate Bill 770 does is compel state leaders to start having conversations with the federal government about how to qualify for a federal waiver to unlock federal funding. What are the main challenges in implementing this law?

Kao: You're taking the government of the largest state in the nation and you're taking the federal administration. So two huge bureaucracies, two big systems need to be talking to each other about this. So I think one of the challenges will be really about how do you get these two administration, these leaders in California and at the federal level talking to each other, but how do you also ensure that this doesn't just become sort of an in the weeds process, but really becomes a much broader conversation about what are the transformational opportunities that we have with a single-payer system? And what are the other broader conversations that this could really be inspiring about other reforms to the healthcare system that we have now? Right, because I think sometimes when folks look at policy or something as technical as a waiver, state and government contracts and sort of RFPs (requests for proposals) are notoriously very in the weeds, very detailed.

And so it can be very easy to get caught up in ... these very specific aspects of it or the process. But again, I think what excites people about single payer is just this idea that we could just radically change what people think about as health care and people's experience with health care. And we want that spirit to be honored in these conversations. So I think that will be a challenge.

Got it.

Kao: I think another really big challenge is of course the healthcare insurance industry (is) very profit driven. We've seen how they've generated hundreds of millions of dollars in profits for themselves, for their CEOs, while a lot of Californians and folks around the country are struggling with their copays, their deductibles, their day-to-day healthcare costs, their prescription medications and that disconnect has been really hard on folks. Like we all hear stories about people going into bankruptcy or having financial struggles because they had a health emergency.

And being able to rethink what health care could look like without those complications and thinking about it in a more positive sense and less about the negatives, it's a really interesting opportunity and I think that's what people really

want. But again, like when you get into government, right, and bureaucracy, it can be hard to lose sight of that bigger spirit, that bigger ambition and so I think that's why it'll be important for single-payer advocates, people who are engaged as stakeholders in this, to really try to reinforce that as this is what we're really trying to do here in California and in the nation.

Q: Yes, absolutely. So what opposition is there to Senate Bill 770, which was recently signed into law, and is this a problem?

Kao: I think that the real opposition that we saw for this bill and that we're going to see every year is from the healthcare insurance industry. That's not going away, obviously, and I also feel like 2024 is going to be complicated because everyone is going to be just very aware of the elections that are happening and the different outcomes and potential for what that means. So 2024 is really critical because we know right now here in California, we have a democratic super majority in the state legislature. We have a friendly Democratic Biden administration to work with at the federal level and fingers crossed we grow our super majority and get more progressive Democrats in the state legislature and the Biden administration gets reelected so we have, again, like more favorable conditions past 2024.

But I also do think, again, what's going to be really important is right now voters are just thinking about their cost of living, their experiences with different systems right now and we know, again, people are having a hard time accessing the healthcare resources and services that they need, especially mental healthcare services. They're struggling with healthcare costs. And so it is really about how do we talk with residents of California, people around the country about the benefits of single payer, how it'll help them save on these daily costs. They won't have to keep facing these barriers to accessing care and services and it's really important 'cause I think sometimes doing lobby and bill advocacy, you can get very focused on sort of the inside game and talking with legislators and talking with other activists.

But it's really important for us to make sure that we are broadening these conversations and bringing folks who want these changes, who want these reforms in the healthcare system more into this process. And so for me, it's sort of like playing chess. We've got to handle a lot of different aspects of making sure that single payer is successful. And of course, I think engaging and responding to the diversity of Californias is going to be the No. 1 priority and that's going to take time and that's definitely going to need to happen also in 2024 and beyond 2024 as well.

Q: Got it. It's hoped by many that a single payer plan would include long-term care coverage. Why is this so important today and for our future?

Kao: I am in my mid-forties and my parents' generation are in their seventies and eighties. And it is more and more a question now for me and my partner of what does long-term care mean for our parents? What are we planning for? And I know for some people, this is even more immediate. I have several friends, several colleagues who are caretakers for their parents, for children or family members with long-term disabilities and over and over I hear so much about how their access to health care is so fractured, it's so expensive.

So when we think about single payer and how it could really reform the systems that's not really working, and because there's sort of a growing movement for sort of more of like what's called the caring economy, I think it's going to be more and more important for this kind of long-term care to be part of single payer because it is both because people are having to make choices because they can't afford having family members or loved ones in a healthcare system or healthcare setting. And also because people are making that choice to not have their family and loved ones in those settings. And people either way should have that choice and feel like they can access that kind of long-term care without fear of going bankrupt or having to make choices out of hard circumstances.

Q: And besides long-term care, the bill also, or the law now calls for including dental, vision and hearing care. How realistic is it that the state could really save enough money with single payer to cover all of that?

Kao: So the Healthy for All California Commission, which was convened by the governor and the state legislature that met over several years, they did produce a final report showing that there would be cost savings. So over the next decade we could save up to like \$500 billion by transitioning to single-payer health care. And, and that's not even counting again, sort of the value that people get of like different healthcare experiences, not paying copays, deductibles, and just having lower costs for people around California. So I think it would save the state and it would save the individual residents of the state as well and that savings would more than cover dental, vision and hearing. So again, like people feel like they can have comprehensive healthcare and like whole-person health care.

Q: So now that Senate Bill 770 has been signed, what is Healthy California Now focusing on and what are the organization's next steps?

Kao: Yes, so as was the passage of most bills, implementation is the big next to do. So a really big one that I mentioned was stakeholder engagement. So Healthy California Now is already a coalition of labor unions, grassroots groups, single-payer groups. But we still need more work to do to sort of engage a body that really represents, again, the diversity of all Californians. So for several months now, we've been convening what's called an advocates table. So it is broadening this coalition, bringing more voices and more groups into these conversations to start talking about what does single payer look like, what needs to be included, who needs to be included, and how that's going to happen. So again that's going to be a big and complicated process, but I'm excited about it because there's already studies out there, there's work that other people have done that we can build on and on top of that, because there are these other coalitions and other work that's already underway, again, to reform the system we already have, there's also really nice building blocks as well that exist, that we can work with.

And then I think the other really big one is again, trying to really ensure that as California leaders have conversations with the federal government, that there's this loop of conversation happening between these stakeholders and our coalition, the governor's administration, state legislative leaders, and the federal government as well 'cause again, we, this is going to be a long process, a process that's got a lot of details, but again, we also just want to ensure that as these conversations are happening between administrations and leaders, that the voices of these diverse stakeholders are still very much centered in that. So I think that's going to be a big one.

I think the third one is really going to be a lot about communications and really connecting with residents around California. So, you know, as the things happen, bills passing in Sacramento, but I don't believe actually most people in California know what bills have passed and what the implications are and given how we know how popular single payer is in California, I think it'll be really important for us to start being a lot more public and speaking with a lot more people in California about what do you want here for health care in California? This is what's already in place and this is how you can engage because at some point, we will have a report that will invite public opinion, but we already know, right, that the activists will show up, people who are paying attention to policy, who are already engaged in Sacramento or already in conversations with maybe their state representatives are more likely to show up.

So it's really about the people who are most deeply impacted by the issues and the problems in our healthcare system now who also need to be vocal. And obviously there's an intersection and overlap between those two, but we just really want to make sure that when we're talking about public comment, it really is about the public. But you know, we need to get people ready to speak to it, to share their stories and to advocate for what they know will help them solve some of the issues and questions that they have right now about our healthcare system.

Q: That's great. So what can our listeners do to get involved in this?

Kao: So, a couple ways. The easy one, is to follow the Healthy California Now Coalition, just because even if folks want to be more casual observers don't want to necessarily be involved in the details or the weeds of things, I think it's still really important to sort of see where the progress is at and find where there are points for public comment or public engagement, and so the Healthy California Now coalition, because we're leading this work with some advocates and partners around the state, that will be a really great place for people to sort of start as a place for resources and a place where there'll be actions. And then on top of that, the Healthy California now also has a healthcare calculator. So people can actually put in some information about themselves and find out how much a single-payer system would save them in any given year.

And then that sort of information is, is really valuable, that information, those stories they tell, it's, it's about having conversations with state legislators because even though we passed this bill, there's more that still needs to get done. So state legislators will still need to be paying attention to this report, engaging with the federal administration. And so it's going to be important for residents and your listeners to really keep talking with their state legislators, keep advocating for a single-payer system, tell their personal stories and tell them what changes they want to see in a healthcare system because, you know, there's a difference between people voting for a bill and being a real champion or advocate for that bill and we want as many of our state legislators who voted for this bill to be really proactive advocates for single payer and so the more we have that, again, the more we open up this possibility that single payer can really be transformational and not just, you know, this sort of process that our leaders go through to get a particular outcome.

So again, like pushing it will be really important because I mean, even when this bill was going through in the Capitol, we were just having a lot of conversations. A lot of our legislators were uncertain. They were feeling pressure from different sides and

so the more they hear directly from people who live in their districts and the more they hear personal stories, I've seen how state legislators have been really moved by people being very candid with what they've experienced personally or with their loved ones and their family and that really does make a difference. I know a lot of people say that but it really does make a difference. I've seen legislators change their minds. I've seen the looks on their faces when they've heard these stories. And, you know, for legislators who are sometimes maybe hesitant or maybe aren't champions, sometimes it is a personal story or these constant interactions that make them really deeply understand this and feel a lot more passionate about this issue.

Yes, I totally agree that stories definitely can change hearts and minds, especially in health care. 'cause there's so many horrific stories out there.

Thank you Irene Kao of Courage California. Do you have a personal story you'd like to share about our 'wack' healthcare system? Contact us through our website at heal-ca.org.

And don't forget to subscribe to Code WACK! wherever you find your podcasts. You can also find us on ProgressiveVoices.com and on Nurse Talk Media.

Code WACK!'s powered by HEAL California, uplifting the voices of those fighting for healthcare reform around the country. I'm Brenda Gazzar.