

## Can single-payer advocates overcome the 'narcissism of small differences'?

*featuring*  
**Peter Shapiro**



## *This time on Code WACK!*

With all its apparent advantages, **why hasn't California passed single payer yet?** Is **organized labor fully in the Medicare-for-All game?** Do **managed care providers - like Kaiser Permanente - have outsized influence** on healthcare reform in the state?

To find out, we spoke to **Peter Shapiro**, a retired letter carrier and author of [\*Song of the Stubborn One Thousand: the Watsonville Canning Strike\*](#) (Haymarket Books 2016). He represented his union at the founding conference of the [\*Labor Campaign for Single Payer\*](#) in 2009 and has been involved with the issue ever since. He currently represents the [\*Alameda Labor Council\*](#) on the board of [\*Healthy California Now\*](#), a single-payer advocacy coalition. This is the second episode in a two-part series with Peter Shapiro.

# SHOW NOTES

## WE DISCUSS

*Despite multiple attempts over several decades, California still has not managed to pass single-payer legislation. Why is that?*

“Well, part of it is just because it's tough everywhere to pass single payer. You have lobbyists to contend with in the state capitol who will just fight tooth and nail . . .

“And some people say, ‘Well, ... politicians are corrupt. Let's have a ballot initiative and let the people speak’ which by the way, is going to have to happen anyway, just because of the way the California constitution is written. Any kind of new taxes require a ballot measure to pass them. But ballot initiatives are very tough.

“[And] I think California has kind of a unique problem, that Kaiser [Permanente] is such a big deal here, and Kaiser has a very kind of ambiguous legacy. . . . it's powerful. It has a huge number of people enrolled in it. And I think any kind of single-payer bill that's successful is going to have to address the concerns that people not only have collective bargaining agreements with it, but also people who are enrolled. They want to know that they're not gonna lose what they have.” – **Peter Shapiro**

*Today there are two different strategies in California. There's SB 770, which focuses on negotiating for waivers to get as much federal funding as possible for a California single-payer system. And then there's the CalCare bill AB 2200, which hasn't passed yet, but would establish a single-payer system in the state. Do you think these strategies are opposed to each other?*

“Well, no. I mean, I don't think they're in contradiction with each other. Not everybody agrees with me on that one. I mean, [CNA California Nurses Association and AB 2200 sponsor] felt that (SB) 770 was counterproductive and they opposed it. [They feel] that you have to pass a policy bill first, and then you worry about the funding, and . . . getting the necessary federal waivers to make it possible.

“My feeling is that it's gonna be very, very tough, (especially now when we're dealing with a deficit) to get the state legislature to agree to a policy bill if they don't have some idea where the money's gonna come from.

“So (SB) 770 basically authorizes the governor to negotiate with the Center for Medicare and Medicaid Services in Washington DC and to try to find out just what they will approve . . .

“. . . the other issue though, . . . is that (SB) 770 creates a process where stakeholders basically weigh in, supposedly to offer their own ideas about what should be in the state plan. And CNA is worried, I think, not without reason, that that could lead to a real watering down of the bill. It just depends on who the stakeholders are.

“Healthy California Now, which is the state (single-payer) coalition – I'm on their board – has been trying to get people who really matter, and not just insurance industry hacks . . . or hospital association hacks, but the people who really count, who we need to have on board, and get them to say what kind of bill do you want.” – **Peter Shapiro**

### ***So what's an example of an issue that's dividing people?***

“One of the issues that's dividing people is capitation. Now, I'd be willing to bet that a lot of the people listening to this broadcast have no clue what capitation is. Basically, it means that you reimburse providers based on how many patients they treat. Now, obviously, that's gonna be a factor in how they should be compensated.

“The concern that people have is that if you pay people based on how many patients they treat, they're going to have a financial incentive to treat the people who are going to be cheaper to treat, and the people who are gonna be costing more money are gonna get treated badly. The other objection - *CNA will say this* - is that you still have people who get their health care through Kaiser, then there's gonna be some kind of administrative entity sucking up some of that money, and it won't be as efficient as it should be, which may be true.” – **Peter Shapiro**

## Helpful Links

[How California is trying to establish a single-payer healthcare system](#), *Healthcare Brew*

[CalCare Campaign](#), *National Nurses United*

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[Healthy California Now](#)

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[The California Single-Payer Movement](#), *a history, Health Care for All California*

[5 things to know about the Kaiser Permanente strike](#), *The Hill*

[California inks sweetheart deal with Kaiser Permanente](#), *Fierce Healthcare*

[How Capitation in Healthcare Works](#), *Very Well Health*

## Episode Transcript

Read the [episode transcript](#).

# Guest Biography - Peter Shapiro

Peter Shapiro is a retired letter carrier and author of [Song of the Stubborn One Thousand: the Watsonville Canning Strike](#) (Haymarket Books 2016).

He represented his union at the founding conference of the [Labor Campaign for Single Payer](#) in 2009 and has been involved with the issue ever since. He currently represents the [Alameda Labor Council](#) on the board of [Healthy California Now](#).

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