



National Day of Action: Single payer & the power of righteous fury

"The best way to save and protect the public programs we have right now is to go on the offensive — to demand a national single-payer healthcare system free from profit." – Dr. Ana Malinow

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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**.

This time on **Code WACK!** Why is **National Single Payer** organizing a **National Day of Action** on May 31 amid cuts and freezes to public health programs? How has an incremental approach to universal health care in America made comprehensive healthcare reform more difficult? To find out, we recently talked to **Dr. Ana Malinow**, who spent three decades working as a pediatrician with immigrant, refugee and underserved children before retiring as clinical professor of Pediatrics from UC San Francisco School of Medicine. The past president of Physicians for a National Health Program is on the steering committee of National Single Payer. She's also a lead organizer for The Movement to End Privatization of Medicare.

Welcome back to Code WACK!, Dr. Malinow!

Malinow: Thank you, Brenda. It's such a pleasure to talk with you, and thank you for inviting me back. Yes.

Oh, we're so excited to have you back. So, first off, can you tell us about the National Day of Action coming up on May 31st. What's it all about and what message is National Single Payer and its partners hoping to convey?

Malinow: So on May 31, health and justice social activists from across the country are coming out into the streets all over the country to demand that we remove profit from health care. So that is our major demand, and so far over 50 organizations from labor unions to veteran groups to single-payer organizations have endorsed the National Day of Action, and different cities from across the country are holding actions in their own local areas. The message is we must get profit out of healthcare. The National Day of Action has four demands. They are the recognition by our government that health care is a human right, the elimination of private health insurance, and the banning of for-profit, delivery of healthcare, the enactment of a publicly funded and publicly financed national single-payer program that would provide comprehensive coverage to everyone. And finally, that healthcare delivery must be transformed from profit seeking ventures into services organized to serve the people of our country, a system in which all caregivers are free from corporate control. Those are our demands.

Great. So tell us what actions are being planned in California's San Francisco Bay Area?

Malinow: All of them are going to happen on May 31. The one here in the Bay Area, ours is starting at 11:00 AM and we're going to be gathering at the Harry Bridges Plaza in the Embarcadero, and then marching to BlackRock because we know that BlackRock is the world's largest asset manager. It manages \$7.5 trillion in assets and is the second largest owner of UnitedHealthcare, which as we know is the largest health insurance company in the country. And it also is the largest denier of healthcare claims using AI with a 90% error rate, and the largest up-coder netting \$3.7 billion in one year from scamming Medicare. So that's what we're gonna be doing here in the Bay Area on May 31.

And where would people go to find out if there's an action in their area?

Malinow: For people who would like to find out if there is something going on in their own locality, please go to our website if I can plug that. It's **www.nationalsinglepayer.com**. Go to our action page, and then you can scroll down and then look at our Google map and hover over your city, and there will be contact information for people to use so that they can contact the person, they can see where the action is going to be held at what time, and so forth.

Q: Got it. So Dr. Malinow, why is this being held now? We know that the Trump administration has been cutting back or freezing funding for health care and public health agencies and seems opposed to single payer. Why hold this National Day of Action now?

Malinow: So most definitely, they are opposed to single payer <laugh>. Not only is the Trump administration, but Congress sadly, but to answer your question, why now? What an important question. Now, I will take you back to December of 2024, when Brian Thompson, the UnitedHealthcare CEO was shot in New York City. The response from a large swath of people in this country was not your typical 'sending you thoughts and prayers.' In fact, there was a collective righteous fury that percolated against the victim, not against the shooter. I think that that's what people found most shocking about the response. And the fury came from this collective suffering of millions of people in this country who are uninsured or underinsured, insured and denied, <laugh> insured and bankrupted by medical debt who must choose between a pill or a meal, who can't wait to get to be 65, only to find out that they've been hoodwinked into enrolling into Medicare Advantage Plan that restricts networks, that denies their care, that delays their care, or who choose to pay more to remain on original Medicare, only to find out that they have been aligned through no choice of their own into a for-profit Accountable Care Organization whose doctors are financially incentivized to deny, delay and restrict their care.

So we know that at least 68,000 people die unnecessarily every year in this country because of our healthcare system and you've had a wonderful guest in the past, Dr. Jim Kahn, who estimates that these are even higher and why now? It is natural for us to go on the defensive when we are being attacked. And yes, the

Trump administration is threatening public programs that we have. Medicare, though even more than half of it is already privatized Medicaid, which is 70% in private hands, the VA which is underfunded and being outsourced and even privatized even more. But the best way to save and protect the public programs we have right now is to go on the offensive to demand a national single-payer healthcare system free from profit. Universal. That means everybody in, nobody out – comprehensive, covers all necessary medical services, affordable, meaning free from profit, high quality, equitable, and just, and that's how we save our public programs.

Q: Got it. So you're saying we need to tap into that dissatisfaction that was revealed after Brian Thompson's murder and go on the offensive against the threats to our public health programs.

Malinow: Exactly. That's exactly, exactly right. Yes. We have to channel that righteous fury into something positive.

Q: Right.Okay. So if we had a national single payer system, how would that change things for everyday people, both patients and doctors?

Malinow: So our national health system must be not-for-profit, and it must have the guardrails and enforcement mechanisms to prohibit all profits and margins from the not-for-profits. Now how would this change things for people? Well, it would save lives, right? At least 68,000 every year, probably even more. And save our government money, at least \$450 billion every year. And this was a study that was done by Alison Galvani out of the Yale School of Public Health, where she and her colleagues not only estimated, you know, the thousands of lives that would be saved every year, but they also estimated that about 335,000 lives could have been saved during the pandemic, during the Covid pandemic had the U.S. had a single payer healthcare system during the pandemic. Wow. So how would that change? Yes, people would be alive today. That's how that would change. Not only would they be alive, but they would be much, much healthier.

They would not have to worry about having to pay for health care. They would not have to worry about becoming medically bankrupt because of any illnesses. And calculations of this kind of funding have found that in addition to saving money

for the government, it would also save money for about 90% of Americans. So how would this change? It would make things better as far as life expectancy and just the overall wellbeing and save money.

Now for healthcare providers, the yoke of the administrative hassle dealing with a thousand insurance companies, a hundred formularies, all of which change from year to year by the way hiring the staff to handle the paperwork would be supremely freeing. It would free up doctors to do what they've been trained to do, which is to treat their patients and hospitals to what they've been set up to do, which is to heal patients. And further, it would free up businesses who pay higher salaries for their workers. So it would free up businesses so that, that, you know, instead of paying this poll tax basically to insurance companies, they would be able to transfer that money to their workers and then also not spend another day thinking about how much their premiums are going to be going up next year. It would be like a giant yoke being lifted from the entire country.

Q: Yeah. Can you speak to how difficult insurance companies can make or have made your life and other physicians' lives?

Malinow: Yes, yes. You know, most physicians spend about 24% of their revenue or like 25% of their revenue goes to administration. For hospitals, it's the same. That means that so much time and resources are devoted to having this administrative waste. What we need to do is to cut that administration and if we were to have a single-payer financing system, that administration would be automatically cut in half and we would be able to use the savings from administration to actually take care of our healthcare needs, and physicians would be freed up from having that administrative hassle. And so that's why it would be so important, and I will tell you furthermore, I think that not only is the administration, this what we call the moral injury or burnout, but it's the fact that physicians are no longer in charge of taking care of patients.

Physicians, I believe, have lost the ability to practice the art of a medicine. And what they do today is make money for a health system. They feel more and more like they're wheels in a cog. Now, I think that this is changing and physicians of today are not the same as the physicians from 10 years ago, and certainly not from 20 years ago because the healthcare landscape has changed so much. And I

do think that physicians are much more knowledgeable, much more aware about single payer and are joining unions. They are really ready to fight, to be able to practice the art of medicine – what they've been trained to do.

Q: Yes. So we've heard talk about transforming healthcare from a profit-driven system to one that actually serves people. What would that kind of transformation take?

Malinow: Well, honestly, a lot of work. <Laugh> A huge movement organizing protests, a bottom up movement that demands the healthcare system that we are paying for, but not getting, and a recognition that we are no longer going to be settling for crumbs anymore, that we are not going to go down the path of incrementalism, which is the path that has led us to where we are today. To think that, 'well, if we just put, you know, guardrails around Medicare Advantage, if we pass the ACA and we create guardrails against the insurance companies, if we subsidize the health insurance companies to provide healthcare for people who can't get it from their employers, if we expand Medicaid,' you know, all those things have improved <laugh>, you know, healthcare for some people, but unfortunately it has also enriched the health insurance companies to such a degree that it is much, much harder today to fight against health insurance companies than it was in 2010 when the ACA was passed.

Wow. Because they're so much more powerful, and they use that money for lobbying?

Malinow: Of course, of course. It's this, it's this feedback loop of corporations who are so wealthy that they you know, the large corporations like BlackRock and UnitedHealthcare, the campaign contributions that corrupt elected officials, that fix the rules of the game so that large corporations can keep making more money to keep financing these politicians that corrupt the system, that game the system even more and more. So that is what needs to stop. And unfortunately, that's where incrementalism has gotten us to.

Right. They're unwittingly making the insurance companies more powerful and harder to fight. So how is this National Day of Action different from other rallies we've seen for Medicare for All?

Malinow: So I think that the mood today is different. We see thousands of people, hundreds of thousands of people from all over the country who are coming out to protest in the streets. I think people are angry. They don't want to see what the Trump administration is producing, creating, but they also don't wanna go back to the old status quo. And I think that that's the big difference, the status quo of the high monthly premiums, the high deductibles, the job lock, and those are the lucky ones with health insurance. The Commonwealth Fund just published this article, I don't know if you've read it, but it shows that almost one quarter of U.S. families with employer sponsored health insurance, the lucky ones, right, spent more than 10% of their household income just on premiums and deductibles in 2023. Wow. That means that even if you have employer sponsored health insurance, a quarter of those people are going to be underinsured.

So that was the status quo. Is that what we want to fight for? No, I don't think so. Do we want to fight for a second tiered racist, classist system of healthcare for poor people in the richest country on earth known as Medicaid? Do we want to keep expanding that so that people have to prove their poverty month after month after month? And if they make \$1 more a month and they have to worry about whether their child is going to be eligible to get health insurance or waiting until you turn 65 to be able to get health care and even then seniors face very high out of pocket costs dying unnecessarily because corporations must deny care in order to pad their bottom line.

I don't think that that's what people want to go back to. So that is the biggest difference than before. Yes, people want to protect what they have from getting worse, but I also think that people want to fight to change the status quo. And I think that the shooting of the CEO of the UnitedHealthcare was that wake up call that people needed.

Thank you, Dr. Ana Malinow of National Single Payer. Stay tuned for next week when we continue our discussion about the benefits of single payer health care and the upcoming National Day of action on May 31. To find out what's happening in your area that day, go to nationalsinglepayer.com.

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