

We can save billions on health care — why won't Congress do it?

With Rachel Madley
Director of Policy and Advocacy
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This time on Code WACK!

Are Americans finally waking up to the truth about single-payer healthcare? With new Medicare for All bills recently reintroduced in Congress, we're setting the record straight. Will it really save us money? Is it socialized medicine? And why aren't our legislators addressing the REAL causes of our skyrocketing healthcare costs?

To unpack the facts and bust the myths, we're joined by **Rachel Madley**, Director of Policy and Advocacy at the [Center for Health and Democracy](#). A former health policy advisor to Congresswoman Pramila Jayapal — lead sponsor of the House Medicare for All bill — Rachel helped shape and reintroduce the landmark legislation in 2023. She's also a former FDA staffer and holds a PhD in Microbiology and Immunology from Columbia University, where she was active in both [Physicians for a National Health Program](#) and Students for a National Health Program.

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Besides cutting out the middlemen (like for-profit insurance companies), how else would Medicare for All lower healthcare spending?

"The other way that Medicare for All will reduce our spending on health care is by making it a much simpler system. I have spoken to a lot of physicians and medical providers who talk about either struggling to stay in independent practice or who are having to join hospitals or large health systems because of the paperwork burden of private health insurance.

"So right now we have millions of prior authorizations that are required by health insurance companies every year for procedures that people need. And that means that doctors are having to hire extra people to complete that paperwork, or they're having to forgo their private practice work [and go to work for] a hospital.

"On the health insurance end, the same thing is happening. These health insurance companies have huge amounts of employees who are doing all of this paperwork every day, and if you look at the technology that these health insurance companies are using, it was developed decades ago, and that's on purpose because they wanna make it harder for you to get care.

"However, that adds another layer of waste to the current system because you have antiquated technology that takes a lot more people to run it, and you're putting a lot more paperwork burden on patients. And all of that adds up to tons and tons of money wasted in this bureaucratic mess that we have created." – ***Rachel Madley***

What about people who think Medicare for All is 'socialized medicine,' or who are concerned about 'government overreach'?

"That's a great question, and I think that myth stems from a thought that Medicare for All would somehow make hospitals and doctors' offices into

government-run practices, and every doctor would be an employee of the government. And that is not what we're talking about here.

"We are talking about only changing your health insurance, so, *only changing how we pay for health care*. Again, you can keep your doctor if you like them. If you don't like them, you can go to a new doctor and you won't have a restrictive provider network like you do in your current insurance plan. But hospitals and doctors can remain practicing as they have, and almost all physicians and medical providers in the country currently accept Medicare. This is only changing your insurance coverage and simplifying it.

"The government is actually not overreaching. They're going to give you more freedom to see any doctor that you would like regardless of location.

"There's not going to be those restrictive networks. They're also going to give you the freedom to get the care that you actually need. So you won't feel constrained into not getting medical care because of costs, because your health insurance company requires a prior authorization or denies the care that you need.

"You will get to be the decision maker in your healthcare with your doctor."
– ***Rachel Madley***

The nonpartisan Committee for a Responsible Federal Budget found the government is set to overpay Medicare Advantage insurers more than \$1 trillion over the next decade ... But instead of cracking down on that, Congress is planning to cut funding for public programs like Medicaid and Medicare. Why aren't they focusing on the real waste?

"That's something I have been asking myself a lot lately ...

"Unfortunately, what it boils down to is the. Intense lobbying pressure from big health insurance companies. They are one of the highest, if not the highest spender for lobbying in Washington DC. The Center for Health and

Democracy's founder, Wendell Potter, worked as someone who helped write talking points for those lobbyists.

"So he has inside knowledge of what they're saying, what they're going to tell these members of Congress. And there is also a huge amount of money donated to political campaigns from big health insurance companies, big health insurance political action committees, or Super PACs, as well as health insurance executives.

"And that's why when we look at healthcare, we also have to look at democracy and how we make sure that our democracy is really serving the people.

"I also want to note that when the Build Back Better Act was being negotiated [under the Biden Administration, addressing] Medicare Advantage abuse was also not included in that bill and then the Democrats had the pen.

"So I do think that it is time for us to take a really close look at what our healthcare policy says about the priorities of our members of Congress. Right now it looks like the lobbying and the political donations from big health insurance companies unfortunately outweigh the desires of the people to have a better healthcare system. " - ***Rachel Madley***

Helpful Links

[Center for Health and Democracy](#)

[Physicians for a National Health Program](#)

[Medicare Advantage Will Be Overpaid by \\$1.2 Trillion](#), *Committee for a Responsible Federal Budget*

[Health care reform: How it would affect physicians](#), *Medical Economics*

[Unbreaking America's Healthcare](#), *RepresentUs*

[The Politics of Health Care and the 2024 Election](#), *KFF*

[Episode Transcript](#)

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Guest Biography - Rachel Madley, PhD

Rachel Madley, PhD is the Director of Policy and Advocacy at the [Center for Health and Democracy](#). She previously worked as health policy advisor to Congresswoman Pramila Jayapal and in the legislative affairs office at the U.S. Food and Drug Administration.

Rachel received her PhD in Microbiology and Immunology from Columbia University where she was also a member of the executive board of Students for a National Health Program and [Physicians for a National Health Program](#).

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