

# The Ten Health Care Myths

## Myth 1: Universal health care would be too expensive.

**Fact:** The United States spends at least 40% more per capita on health care than any industrialized country with universal health care.

**Fact:** Federal studies by the Congressional Budget Office and the General Accounting office show that single payer universal health care would save 100 to 200 Billion dollars per year despite covering all the uninsured and increasing health care benefits.

**Fact:** The costs of health care in Canada (as a percentage of gross domestic product (GNP)) was identical to that of the United States when Canada changed to a single payer, universal health care system in 1971. Canada costs have increased at a rate much lower than the United States, despite the US economy being much stronger than Canada's.

**Conclusion:** Health care costs under a single-payer universal system in the U.S. would be cheaper than our current system due to lower administrative costs, global budgets and accountability of providers.

## Myth 2: Universal Health Care Would Result In Government Control of Our Health Care

**Fact:** A publicly administered finance system will put medical decision making back in the hands of medical professionals and their patients-- unlike today, when doctors have to get permission to order a test or a treatment from an insurance administrator who has little or no medical training.

**Fact:** A single payer plan would have provisions to protect the health care system from some of the problems that governments face: strong conflict of interest rules, prohibitions on partisan activity and connections to for-profit insurance and pharmaceutical companies.

**Conclusion:** A Single Payer Health Care System administered by a state public health system would be much more democratic and much less intrusive than our current system. Consumers and providers would have a voice in determining benefits, rates and financing.

## Myth 3: Canadians are flocking to the U.S. because they can't get services in Canada that they need.

**Fact:** Studies based on in-patient discharge data, by the prominent research periodical Health Affairs, show that most Canadian admissions to U.S. hospitals were unrelated to waiting times or to leading-edge technology commonly associated with this myth.

**Fact:** The vast majority of health care services provided to Canadians by U.S. hospitals were emergency or urgent care, mostly related to travel within the U.S.

**Conclusion:** Canadians are not coming to the U.S. because they cannot access health care in their own country. In fact, the data indicates that Canadians are extremely satisfied with their health care system.

## Myth 4: Universal health care would deprive citizens of needed services

**Fact:** Studies show that citizens in universal health care systems have more doctor visits and more hospital days than in the U.S.

**Fact:** About 46 million Americans and 6 million Californians are uninsured. The U.S. already deprives its residents of health care when they can't afford it, or can't get insurance because of pre-existing conditions.

**Fact:** Americans have problems accessing health care due to payment problems or lack of available care- far more than any other industrialized nation. About 17 percent of the population is without health insurance. Approximately another 75 percent of ill people who are uninsured have trouble accessing or paying for health care.

**Conclusion:** The United States is the only modern industrialized nation in the world that does not provide health insurance to its residents.

### **Myth 5: The United States has the best health care system in the world.**

**Fact:** The United States is rated 37<sup>th</sup> in overall performance by the World Health Organization.

**Fact:** The Institute of Medicine reports that patients get treated according to clinical guideline only 50% of the time, and that there are 98,000 deaths per year due to medical error. This is equivalent to a jumbo jet crashing every day. In addition, the United States rates 23<sup>rd</sup> in infant mortality, down from 12<sup>th</sup> in 1960 and 21<sup>st</sup> in 1990.

**Fact:** Outcome studies on a variety of diseases, such as coronary artery disease, and renal failure shows the United States to rank below many industrialized nations, including Canada.

**Conclusion:** The United States ranks poorly relative to other industrialized nations in health care-- despite having the best trained health care providers and the best medical infrastructure of any industrialized nation.

### **Myth 6: In order to be able to afford to insure everyone under a universal health care system, benefits would have to be reduced for people who currently have a good health insurance plan.**

**Fact:** Given what everyone—consumers, employer and taxpayers—now pay in the U.S., \$2,000 more per person per year than any other modern industrialized nation, we could have a “Cadillac” universal health care system just by using our dollars more efficiently.

**Fact:** SB 840, proposed by Senator Kuehl would replace the current system of multiple public and private insurers with a single, reliable insurance plan. This plan would save \$20 billion in administrative costs. In addition, California would buy prescription drugs and durable medical equipment (e.g., wheelchairs) in bulk and save another \$5.2 billion. That is more than enough to cover the uninsured who are currently forced to use expensive to treat emergency rooms. Enough to provide every Californian with a quality affordable health plan.

**Conclusion:** The best solutions to the health care crisis is for California to assert its purchasing power, get rid of greedy for-profit corporations, and cut administrative waste out of the health care system. This can be achieved through a universal health care, single payer system.

### **Myth 7: Universal Health Care is Socialized Medicine and is be Unacceptable to the Public**

**Fact:** Single payer universal health care is *not what critics call* “socialized medicine.” It is a health care *payment* system, not a health care **delivery** system. Health care providers would be returned to a fee-for-service type of practice, and would not be employees of the government, as they are under what critics describe as “socialized medicine.” Single payer health care is civilized medicine in the same way that public funding of Medicare is civilized medicine.

**Fact:** Repeated national and state polls have shown that between 60 percent and 75 percent of Americans would like a publicly financed, universal health care system.

**Conclusion:** Single payer, universal health care is not “socialized medicine” and is preferred by the majority of the citizens of this country.

**Myth 8: The problems with the health care system are best solved by managed care companies (private corporations) because they are most efficient.**

**Fact:** Private for-profit corporations are the least efficient at delivering of health care. They spend between 20 percent and 30 percent of premiums on administration and profits, while programs such as Medicare spend less than 2% on administration (and **zero** on profits).

**Fact:** After hospitals went from not-for-profit to for profit, the cost of hospital care increased as much as 30 percent

**Fact:** 80 percent of citizens and 71 percent of doctors believe that managed care has caused the quality of care to be compromised.

**Conclusion:** For-profit, managed care insurance companies cannot solve the health care problems in our state or country. Health care is not a commodity that people should shop for, but a human right available to all.

**Myth 9: Health care costs are increasing because consumers are going to the doctor too much (over-utilization of health insurance).**

**Fact:** Physicians and other medical providers tell patients what medical care they need; it is not a patient decision.

**Fact:** Providers are demanding double and triple increases in their rates.

**Conclusion:** The “conventional wisdom” about what is driving the cost of health care is not based on well documented utilization data.

**Myth 10: Those darn trial lawyers are filing frivolous lawsuits. Those costs are making health care too expensive.**

**Fact:** The General Accounting Office (GAO) performed a study in 2005. The study documented that less than 2% of the premium increases in health care are due to lawsuits filed on behalf of patients.

**Fact:** Insurance companies and the pharmaceutical industry are reporting record profits. The “health care industry” has consolidated itself into large, for-profit corporations that are responsible to Wall Street shareholders instead of patients/consumers.

**Conclusion:** Insurance companies and for-profit medical providers are reaping in record profits, as more workers lose coverage because the cost has become so expensive.

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