

SUPPORT HR 676

NATIONAL IMPROVED MEDICARE-FOR-ALL

- Say goodbye to predatory private health insurance.
- Extend Medicare to every person living in the U.S.A.—everybody in, nobody out.
- Provide comprehensive benefits, including: mental health, vision, hearing, dental and Rx.
- Put health decisions back in the hands of the patients and health professionals.
- End health insurance premiums, co-pays, deductibles & medical bills.
- Pay for it through progressive taxes, 3% for the bottom 40% of earners, 6% for the top 60% of earners.
- Control healthcare spending and stimulate the economy.
- This plan will save more than \$6 trillion over 10 years!

**Health
Over
Profit
For
Everyone!**

Call Sen. Bernie Sanders, urge him to introduce the equivalent of HR676 in the Senate 202.224.5141

Get involved at www.UnitedforSinglePayer.org and www.HealthOverProfit.org

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A SUPERIOR SYSTEM: SINGLE PAYER LEGISLATION VS. AFFORDABLE CARE ACT

Single-Payer Bill, H.R. 676

Affordable Care Act

Universal Coverage

Yes. Everyone is covered automatically at birth.

No. About 30 million will still be uninsured in 2022 and tens of millions will remain underinsured.

Full Range of Benefits

Yes. Coverage for all medically necessary services

No. Insurers continue to strip down policies and services.increase patients' co-payments and deductibles.

Savings

Yes. Redirects \$400 billion in administrative waste to care; no net increase in health spending.

No. Increases health spending by about \$1.1 trillion over 10 years. Adds further layers of administrative bloat to our health system through the introduction of state-based exchanges.

Cost Control/ Sustainability

Yes. Large-scale cost controls (negotiated fee schedule with physicians, bulk purchasing of drugs, hospital budgeting, capital planning, etc.) ensure that benefits are sustainable over the long term.

No. Preserves a fragmented system incapable of controlling costs. Gains in coverage are erased by rising out-of-pocket expenses, bureaucratic waste and profiteering by private insurers and Big Pharma.

Choice of Doctor and Hospital

Yes.Patients will be allowed free choice of and their doctor and hospital

No. Insurance companies continue to deny and limit care and to maintain restrictive networks.

Progressive Financing

Yes. Premiums and out-of-pocket costs are replaced with progressive income and wealth taxes. 95 percent of Americans will pay less for care than they do now.

No. Continues the unfair financing of health care whereby costs are disproportionately paid by middle-and lower-income Americans and those families facing acute or chronic illness.

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