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Single-Payer Myths; Single-Payer Facts

Facts about National Health Insurance (NHI) You Might Not Know

The health care delivery system remains private. As opposed to a national health service, where the government employs doctors, in a national health insurance system, the government is billed, but doctors remain in private practice.

A national health insurance program could save approximately \$150 billion on paperwork alone. Because of the administrative complexities in our current system, over 25% of every health care dollar goes to marketing, billing, utilization review, and other forms of waste. A single-payer system could reduce administrative costs greatly.

Most businesses would save money. Because a single-payer system is more efficient than our current system, health care costs are less, and therefore, businesses save money. In Canada, the three major auto manufacturers (Ford, GM, and Daimler-Chrysler) have all publicly endorsed Canada's single-payer health system from a business and financial standpoint. In the United States, Ford pays more for its workers health insurance than it does for the steel to make its cars.

Under NHI, your insurance doesn't depend on your job. Whether you're a student, professor, or working part-time raising children, you're provided with care. Not only does this lead to a healthier population, but it's also beneficial from an economic standpoint: workers are less-tied to their employers, and those that dislike their current positions can find new work (where they would be happier and most likely more productive and efficient).

Myths about National Health Insurance (NHI)

The government would dictate how physicians practice medicine.

In countries with a national health insurance system, physicians are rarely questioned about their medical practices (and usually only in cases of expected fraud). Compare it to today's system, where doctors routinely have to ask an insurance company permission to perform procedures, prescribe certain medications, or run certain tests to help their patients.

Waits for services would be extremely long.

Again, in countries with NHI, urgent care is always provided immediately. Other countries do experience some waits for elective procedures (like cataract removal), but maintaining the US's same level of health expenditures (twice as much as the next-highest country), waits would be much shorter or even non-existent.

People will overutilize the system.

Most estimates do indicate that there would be some increased utilization of the system (mostly from the 42 million people that are currently uninsured and therefore not receiving adequate health care), however the staggering savings from a single-payer system would easily compensate for this. (And remember, doctors still control most health care utilization. Patients don't receive prescriptions or tests because they want them; they receive them because their doctors have deemed them appropriate.)

Government programs are wasteful and inefficient.

Some are better than others, just as some businesses are better than others. Just to name a few of the most successful and helpful: the National Institutes of Health, the Centers for Disease Control, and Social Security. Even consider Medicare, the government program for the elderly; its overhead is approximately 3%, while in private insurance companies, overhead and profits add up to 15-25%.