

NATIONAL HEALTH CARE AND COVID-19

"It took a national public health crisis as big as the Covid 19 pandemic to lay bare the destruction of our health system wrought by insurance companies and the government over the last 40 years." - Dr. Dave Apsey

Let's take a look at how a single payer system would deal differently with this crisis.

As the virus outbreak was announced internationally and urgent warnings were publicized, national health care systems like S Korea, Japan and China jumped into action, mobilizing testing, social distancing measures much sooner and stronger than in the USA. Health workers received necessary protective equipment and health facilities, with China in an extraordinary effort building a 1000 bed hospital in a little over a week to treat Covid patients.

In addition, in national health care models, all people have equal rights to the same quality health care. Even in the United Kingdom as the Prime Minister became severely and acutely ill, the nurses and Prime Minister proclaimed he had care no different than anybody else in the public system with everybody else. In the United Kingdom, the response was slower than necessary but in that case, everybody has the equal right to exactly the same health care whether they are employed or not.

In the USA, the response has been quite different. Despite our great wealth and physical ability to prepare, the health care system is built and maintained for the profit of giant transnational pharma, hospital, insurance payers and staffing firms. These firms are owned and controlled by the largest investment fund managers with a close eye on one factor, the profit for their investors. The billionaire class covets their coordinated investment funds controlling trillions of the world's wealth. The health care system in the USA and the world is one of the most profitable businesses on earth and these fund managers are expert at extracting everything for their owners.

So what's the effect on the ground? Water is shut off to homes of people too poor to afford the bills, people including frontline health workers are laid off by their staffing agencies and entire hospital systems closed because they cannot generate enough profit during this crisis. Those workers have their health insurance canceled by

midnight the day they are laid off leaving their physical health and their families at the mercy of disease that may strike as they cared for the rest of the patients in the hospital before it closed.”

“The demands of this new impoverished class for food, housing, education, health care and an opportunity to contribute to society are summed up as the demand for a cooperative society.”

Such a society must be based on the public ownership of the socially necessary means of production and the distribution of the social product according to need.”- LRNA program, 2018.

The coronavirus pandemic has brought everything into sharp contrast. Whatever we experienced five months ago has been rearranged, re-contextualized. Through the lens of the pandemic, the demands of the new class become clarified, magnified. The pandemic first emerged as a public health crisis. From February 29, when the first death in the US from COVID 19 was confirmed, the pandemic laid bare the inadequacy of the healthcare system: from the testing kits and supplies, to the protective equipment for health care providers and patients, to the medical equipment, to the available hospital beds and ICU rooms – all of which were in short supply. The government proved incapable of organizing the production and distribution of materials in time, and the result was the rapid ballooning of cases to We cannot get to public health with a system of private healthcare.

The pandemic quickly exacerbated and connected every other contradiction in society: Under these conditions, public health means much more than immunizations, more equipment, and expanded testing. Public health includes housing for all, as shelter-in-place orders could not apply to those unhoused, those detained in prisons and jails, and any confined living situation including nursing homes and shelters. Class and race inequality quickly revealed itself, as the vast majority of deaths due to COVID 19 occur within the new class and especially among African-Americans. The statistics are especially alarming in the large cities, like Detroit, Chicago and New York. As public health officials warn people to wash their hands frequently, for at least 20 seconds, many families in Detroit, Flint, and many other places must continue to live without safe running water. Quickly, from all directions, have come programmatic demands that the

government provide for the people – for example, demands that the government use the existing Laws to take over corporations and force them to make the needed equipment, like masks, gowns, and ventilators. New York Governor Andrew Cuomo, no friend of the working class, called on the president to use his war powers to compel the production of personal protective equipment. Demands reverberated that the government declare a moratorium on foreclosures, evictions, and rent payments; demands that the government find permanent housing for the homeless. In contrast, the Federal government has moved quickly to pay corporations to produce equipment on a voluntary basis, piecemeal; prices on needed equipment have skyrocketed as states bid against each other and against the Federal government to get what the private corporations are producing; the Federal Reserve and Congress have moved to shore up the airline and hotel industries and the travel/cruise industry with bailouts. And when Congress moved to pass the “stimulus package,” heralded for providing most Americans with \$1,200 payment, it was immediately revealed that for every \$1,200 payment to the American people, at least \$18,000 is mortgaged from their pockets and given to the major corporations.

This is not the same old crisis. This crisis is different. People from all sections of society are raising demands. Some promote programs to address those demands. None of these demands can be fully addressed unless they address the needs and demands of the new class. Recent polling shows that Medicare For All is more popular than ever. An improved, single-payer, Medicare for All program, that eliminates insurance companies and nationalizes the drug companies, resolves not only the pandemic public health crisis. It addresses the everyday issues that the most vulnerable of society have to face every day. The needs of the most vulnerable in housing, from skid row in Los Angeles to the streets of silicon valley to the tent encampments in Chicago can only be met by making corporate real estate public. The collusion of the corporate government in keeping public housing empty gives us an opportunity to explore what real public property, in the interests of the people, would be like. An almost universal distrust of the federal government runs rampant — precisely when we need a government that promotes the well-being of all. As the government continues to turn its back on the new class, more and more organizations of the class demand that the government take care of the people or get out of the way.