

Single Payer Healthcare and Coronavirus

Healthcare has been one of the largest social issues in the United States over the past fifteen years. The U.S. remains one of the only developed countries with a for-profit, privatized model, while other countries have either completely nationalized systems or have much larger public options. The ethics of a public or private health system have been debated back and forth in almost every sphere of public influence in America, but with the COVID-19 pandemic now shaking the world to its very core, the necessity of a system that does not leave anyone uninsured is more apparent than ever.

Even besides the current health crisis, there are several reasons that a universal system is far preferable to the U.S. system. The first is its price. [Publishing in *The Lancet* in February](#), Galvani and colleagues estimate that a universal single payer system through the current Medicare for All act would not only save 68,000 lives a year, but also save 13% of healthcare expenditures, which would equate to 450 billion dollars annually. This is important to note, as one of the arguments against Medicare for All is its cost. However, all evidence would point to a decrease in spending if a single payer system were adopted, which deflates these concerns. The cost-effectiveness of a universal system is to be expected though, as America would not be treading new ground by adopting single-payer. South Korea has had national care since 1977, and completely universal since 1989, as Soonman Kwon writes in a 2009 article in [Health Policy and Planning](#). South Korea and other countries with national systems have proven that they can and do work, provided proper regulation and care are put into it. If America followed their lead, not only would low income households be provided with the health services they need, taxpayers with existing insurance plans would pay less for care, which would allow for economic stimulation.

While a single payer system would help the economy, what is important is the lives it would save. In fact, a market solution is completely unequipped for any kind of healthcare, as Wright and Rogers articulate in their book, [American Society: How it Really Works](#). As they point out, due to the extraordinary cost of healthcare, not paying for it often means death, and “customers” will pay any price for it, which, when turned to profit, will almost always lead to abuse. Gerald Friedman continues this human rights argument in his book, [The Case for Medicare for All](#), where he describes how market-based healthcare is almost entirely incompatible with the rights of life, liberty, and the pursuit of happiness. He addresses that the reasons economists commonly give for “trading off” these rights are often completely disproven by the economic efficiency of countries with single payer systems. His point paints a clear picture: America’s costly and ineffective system has all of the downsides with almost none of the benefits, and he asks rightfully why we consider our devotion to markets to be more important than the human rights of our fellow Americans.

While many of the previous issues present good arguments for the adoption of Medicare for All, the current pandemic proves inarguably that a single payer system is needed as soon as possible. [Writing for Vox, Dylan Scott](#) argues that the U.S. health system carries several problems that have led its response to Coronavirus to be significantly worse than every other developed country. This is likely because many in the U.S. don't have access to medical care or have to avoid it due to cost, which often prevents infected people from being able to get treatment or to self-isolate, exacerbating the pandemic. Some may raise the concern that a pandemic will affect a country no matter its healthcare system, but in his opinion article in The Guardian, "[America's extreme neoliberal healthcare system is putting the country at risk](#)," Adam Gaffney proves that a for-profit system creates a unique risk. Many hospitals in the United States have closed due to a lack of profits, not a lack of need. This has created a substantial danger to rural and low-income communities due to America's market-based approach.

But the market risk has created more problems. In addition to a single-payer system, one of the most significant in the current election cycle is the claim that Americans prefer their employer sponsored healthcare plans. However, Medhi Hasan and Abdul El-Sayed explain in a [Deconstructed podcast](#) that millions of Americans have lost their jobs in the coronavirus pandemic, and thus their employer sponsored healthcare that its defenders were so confident they preferred. This lays bare its biggest problem: it works, until you lose your job. And in a pandemic, all of those people are now at increased risk of losing their lives or their financial security simply because their government does not have the proper systems in place to insure that they will be healthy in unprecedented times.

The reasons for Medicare for All or any single payer system were already numerous, but the events of the last few months have shown that the failure to adopt it has been catastrophic for the United States. If a system that protects its people is not adopted soon, another crisis will only be worse as the for-profit system approaches an apex of austerity.