



CANADIAN FEDERATION
OF NURSES UNIONS
LA FÉDÉRATION CANADIENNE
DES SYNDICATS D'INFIRMIÈRES
ET INFIRMIERS

U.S. Medicare – a common sense prescription for all Americans

By Linda Silas, President of the Canadian Federation of Nurses Unions (CFNU)

Canada's nurses, who work in our universal public health care system, are thrilled to witness an effort to enact a similar system in the United States of America via the *Medicare for All* bill introduced by Senator Bernie Sanders.

We have a message for conservative critics who have sought to disparage what we have accomplished: Canadian Medicare works for Canadians. It is our national crown jewel, and Canadians would not trade it for the world.

Universal public health care – dubbed Medicare – has been a stable pillar of Canadian society for over 50 years. While we continue to adjust and strengthen our system after half a century, make no mistake – Canada's Medicare system remains the number one priority for Canadians.

It is a source of pride and part of our identity. Underlying our health system are two fundamental principles: first, we recognize health care as a human right for all those living in Canada; second, we recognize that public health care delivery is fiscally prudent and the best way of managing costs now and into the future.

We cover all residents of Canada for 100% of medically necessary services covered under Medicare, free of financial or other barriers, within our publicly administered system. We do have a choice of health care providers or what facilities we go to.

Canada spends far less than the U.S. on health care – primarily by eliminating so much of the waste and administrative costs that are endemic to a system based on private insurance, while recording better outcomes in a broad range of health barometers.

The U.S. spends about twice as much per person on health care as Canada does. Even though Canada's population is similar to that of California, Americans are paying double the amount for their health care.

Yet life expectancy is nearly three years higher in Canada, and infant mortality rates are far lower compared to the U.S., according to rankings by the Organization for Economic Cooperation and Development in 2015. Mortality for heart disease and amputation linked to diabetes are also far lower in Canada than in the U.S.

While Americans debate the *Medicare for All* bill, let us challenge a few myths about your neighbors up north.

Our wait times are based on medical advice, not on an insurance policy. So yes, if it is urgent, you will see the specialist you need to see. If you need dialysis treatment, or to be admitted to

an intensive care unit, you will receive care, without worrying about going bankrupt as a result or having to endanger your health by forgoing needed care due to the out-of-pocket cost. So, don't buy the claims that Canadians are streaming across the border for treatment.

As in any comprehensive system, some readjustments need to be made after several decades. Our communities, our workforce and our population's demographics have changed over the past 50 years. So too has the nature and prevalence of certain illnesses, in particular, chronic disease. Policies are changing to reflect the fact that the social determinants of health have a significant impact on our health status and our health system's requirements.

We are, for example, working to strengthen our primary health care services, including mental health services and Indigenous health outcomes, and establishing a universal, public plan for prescription drugs, which still cost too much, though not nearly as much as you pay in the U.S.

We've learned that having a public system not dominated by unaccountable private corporations greatly improves the ability of Canadian governments to make the additional improvements we need.

Our experiences have clearly demonstrated that it is possible to have a rational, humane health care system that protects patients, not private insurance companies, at a lower cost. We strongly endorse your *Medicare for All* bill as a common sense prescription for all Americans.

About Medicare for All

Medicare for All is a bill introduced to the United States Congress on Wednesday, September 13, 2017, by Vermont Senator Bernie Sanders. The bill proposes federally administered, single-payer medical care coverage for every resident of the United States of America. The plan would cover a broad basket of medical services, including inpatient and outpatient care, primary and specialty care, long-term and palliative care, mental, vision, hearing and oral care, prescription medications, medical equipment and a broad range of diagnostics. The bill is co-sponsored by 16 other members of Congress. Currently in the US, twenty-nine million Americans do not have health insurance and millions more remain underinsured or cannot access insurance coverage due to costly copayments and deductibles.

About the CFNU

The Canadian Federation of Nurses Unions (CFNU) is Canada's largest nurses' organization representing nearly 200,000 nurses and student nurses. The CFNU has been advocating for national discussions on key health priorities, such as a national prescription drug plan, a comprehensive approach to long-term and continuing care, greater attention to health human resources, and federal government engagement on the future of public health care.