

Title: **Ames teach-in addresses health care 'crisis'**
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 Size: 60.91 column inches
 Ames, IA Circulation: 13414



Ames teach-in addresses health care 'crisis'

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In the wake of multiple recent attempts to repeal and replace the Affordable Care Act (ACA), often referred to as Obamacare, ongoing conversations about the future of both state and federal health care regulations and programs reached Ames Wednesday in the form of a teach-in on the

topic of an alternative program called "single-payer" health care.

The teach-in was hosted by Iowa Citizens for Community Improvement (CCI) at Collegiate United Methodist Church, and welcomed approximately 35 people to learn

about what single-payer health care is, how to achieve it and how to make it a key issue in the 2018 elections.

Michael Lighty, director of public policy for National Nurses United, was the speaker for the teach-in. Throughout his hour-long presentation,

Lighty said that the morality of health care is under attack in the current health care system, due to drug companies, insurance companies and hospital corporations dominating the system based on profit.

See **TEACH-IN** on page **A5**

TEACH-IN: 'This crisis is real, it's affecting people'

Continued from page **A1**

Lighty outlined data surrounding the current health care system, and said that more Americans now report difficulty affording health care. Thirty-six percent of privately insured Americans are covered by high deductible health plans, with an average deductible of \$4,347 per year for a single family, according to the Kaiser Family Foundation and Health Research and Educational Trust. In a recent poll, 20 percent of insured people reported having trouble paying their medical bills. Thirty-three percent of U.S. adults go without recommended care, do not see

a doctor when they are sick or do not fill a prescription because it costs too much.

Prices for medical procedures in the United States also skyrocket past the cost of the same procedures in other countries, Lighty said. In Australia, an appendectomy costs \$5,177, while in the United States it costs \$13,910. An MRI costs \$1,145 in the United States, and only \$138 in Switzerland.

Additionally, roughly 30 million Americans remain uninsured, and an estimated 39 million adults are under-insured, according to data compiled by the Kaiser Family Foundation.

"This crisis is real, it's

affecting people, they're postponing their care," Lighty said. "We're overwhelmed. High costs, high deductibles. How do we cope?"

During the teach-in event, the audience members in attendance were asked to turn to each other, and share the health care story that brought them out Wednesday. Some attendees opted to publicly share experiences with insurance companies or doctors, and chronicled tales of losing their life savings in order to pay medical bills, their support for Medicare and voiced frustration over how to create a more successful health care system.

"I believe that every-

one has a health care story — whether it's you or your family — or will have a health care story," said Matthew Covington, who helped organize the teach-in. "This is a very critical key important issue that affects everyone. What do you do, especially in Iowa, where we're facing a health care crisis? We have to address this at a multitude of levels, at the federal level, at the state level."

Javier Miranda, 23, of Ames, attended Wednesday's event, and said that hearing data about the cost of health care struck home for him.

"I'm still on my parents' health insurance, and I can barely cover rent a lot of

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the time," Miranda said. "So I don't know how I'll be able to pay for health insurance on my own. I'm a very healthy guy, but accidents can happen. You can just get appendicitis or a dental infection, and that can be a huge threat to your health and cost thousands of dollars. That can happen."

Multiple health care system models exist under the single payer model in different countries, Lighty said, including single payer (a publicly financed national or state health insurance program where one public entity, the government, collects all health care fees and pays for all costs), socialized

medicine (when the government owns and operates health care facilities, employs providers and pays for services), universal health coverage (ensures every citizen has health insurance, and financially protects them and provides a standard set of benefits) and Medicare for all (a proposal by Sen. Bernie Sanders that seeks to expand the current Medicare system to cover every citizen).

Key areas Lighty cited as necessary to be addressed included no longer having health insurance tied to employment, not allowing standards of care to be determined by the type of insurance someone has and not

allowing insurance companies to make decisions over whether someone will receive treatment or not.

"We do not need affordable health care, we need universal health care," Lighty said. "Because (in our system) affordable means if you can't afford it, you don't get it. I'm asking you to join our nurses to transform our health care system, to build a system of justice and equality. We're at a moment of justice, justice denied and justice that we can win. That's why I'm so happy to be here in Iowa."

Covington said health care must be made an election issue at all levels heading into 2018, specifi-

cally in the gubernatorial election. Based on her "bold, progressive" campaign and push for accessible health care for all Iowans, Iowa CCI endorsed Cathy Glasson for governor.

"I thought the crowd was engaged, people (talked), people obviously care about the issue," Covington said of the teach-in. "If they didn't care, they wouldn't have taken time out of their day. We all know people outside of Ames, we all know people that maybe we haven't talked to about health care yet. It doesn't matter where you're at, you've got to continue building community if we're going to see the change we need on these issues."