



Beware of **fake** single-payer plans.

A majority of Americans support a single-payer **Medicare for All** national health plan, but many lawmakers and think tanks have proposed watered-down, incremental approaches to health reform. They have confusing names like *Medicare X* or *Medicare Extra for All*. What are the differences, and why are they important?

Unless a plan **meets all these requirements**, it is *NOT single payer*:

UNIVERSAL COVERAGE? The plan includes everyone living in the U.S. from day one, and every provider and hospital is "in-network."

MEDICALLY NECESSARY CARE? The plan covers all medically necessary care, including inpatient and outpatient services, prescription drugs, mental health, reproductive health, dental, vision, and long-term care.

COST SHARING? The plan covers 100% of health care costs and does not require premiums, copays or deductibles from patients.

ADMINISTRATIVE EFFICIENCY? The plan maximizes efficiencies with large-scale cost control measures such as global budgeting for hospitals, negotiated fee schedules with physicians, and bulk purchasing of drugs.

NON-PROFIT? The plan does not include a role for private health insurance.

Remember, nothing short of a true single-payer system will achieve the administrative efficiency and cost savings necessary to provide quality health care to everyone. Don't fall for imitations — demand **REAL** single-payer health care!



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