

Realizing the Human Right to Health Care: The Role of Single Payer Proposals

Health care reform efforts are making headlines, yet our elected representatives are no closer to treating health care as a right rather than a commodity. Despite a growing movement for protecting health care as a human right, the proposals that come closest to achieving this goal among the current options, the popular single payer plans, are being undemocratically excluded.

Our representatives have an obligation to protect our human rights, including the right to health care. Therefore, the National Economic and Social Rights Initiative carried out a series of assessments of health reform proposals. These show that single payer plans are superior to market-based proposals because they go further towards creating a system that is universal, equitable and accountable to the people.

What is the human right to health care?

All people have a right to the health care they need. This is recognized in the Universal Declaration of Human Rights.

- ▶ **Universality:** Everyone must have access to equal high-quality and comprehensive health care.
- ▶ **Equity:** Costs and resources must be shared equitably, with everyone getting what they need and contributing what they can.
- ▶ **Accountability:** The people oversee whether public and private sector protect our health and deliver care as a public good.

What is “Single Payer”?

- ▶ National health insurance system
- ▶ Guarantees access to medically necessary health care for all
- ▶ Collects and administers funds through a single public agency
- ▶ Delivers care through private and public hospitals and doctors

Setting a human rights example: HR 676 - the ‘Expanded and Improved Medicare for All’ bill

- ▶ Entitles everyone to the best quality standard of care, free at the point of access.
- ▶ Includes everyone living in the United States.
- ▶ Financed through taxes and delivered by private doctors and non-profit or public hospitals and clinics.

Single-payer or market-based health care - which best protects our human rights?

| Key rights issues | Single payer / national health care plan | Market-based |
|--------------------------------------|---|--|
| Is health care protected as a right? | People are entitled to receive the care they need. | Health care is a commodity that most people have to buy. |
| Universal | Most single payer proposals include everyone in a national health plan. | Different groups get different coverage, and some may not be covered at all. |
| Affordable | Everyone contributes according to their means, through income tax or social insurance contributions. Care is free at the point of access. | People who can afford it buy insurance, others get subsidies or public coverage, yet others go into debt or forgo care altogether. |
| Equitable | Everyone is entitled to get the care they need, regardless of their ability to pay or any other factors. | Some people get better care than others, for example if they can pay more or are younger. |
| Comprehensive | All medically necessary and appropriate services are covered by the national health plan. | Insurance companies determine what they will cover, subject to regulation. |
| Available | Resources are allocated based on needs, with a view to improving the availability of primary care for all. | Resources are predominately available in communities where health care services are profitable. |
| High quality | Quality standards are set by the national health plan and good health outcomes are rewarded. | Market incentives tend to reward quantity of service or technology use, not health outcomes. |
| Accountable | Public agencies and governance boards are accountable to Congress, the President and the people. | Insurance companies are accountable only to their shareholders. |

Human rights aspects of single payer financing strategies

- ▶ **Focused on health:** Eliminates market incentives, profit motives and all other factors that could take precedence over protecting people's health.
- ▶ **Universal and unified:** Establishes a single source of funding that enables reduced and streamlined administration and ensures that everyone can use the system in the same way.
- ▶ **Public:** Makes the collection and administration of health care funds fully public, so that health care becomes a public good to which all contribute according to their means.
- ▶ **Free at the point of use:** Nobody pays when they visit a doctor or use any other health care service.
- ▶ **Equitable:** Pays for health care through income taxes or social insurance contributions, which ensures that no one pays more than they can afford.
- ▶ **Centered on care:** Confers an entitlement to health care through social insurance coverage that is based on income and risk solidarity, not individual wealth, health status, age, or any other factor.
- ▶ **Responsive to needs:** Sends resources to wherever they are most needed, not just to those people and places that can afford them.
- ▶ **Rewarding quality:** Requires doctors and hospitals to meet quality standards, using health outcomes as an important measurement.
- ▶ **Cost effective:** Distributes funds according to health needs, not profit interests; funds derive from a single source, thus reducing administration costs.
- ▶ **Accountable:** Administers health financing publicly through agencies that are directly accountable to democratically elected representatives; enables people to take part in and challenge decisions relevant to their health services.

The struggle for universal health care: a human rights movement

If health care reformers believe that we have a right to health care, then they must give careful consideration to single payer proposals, which meet most human rights principles.

If reformers are serious about developing a system that is universal, equitable and accountable, they should note that single payer plans are far superior to market-based plans when assessed against these principles. The best single payer plans seek to entitle everyone to equal high-quality care. They treat health care as a public good to which people contribute according to their ability and which they use according to their needs.

It is time that single payer proposals are taken seriously by our elected representatives. Until they are, advocates will continue to demand the inclusion of single payer proposals in the democratic process, as part of the ongoing and growing struggle for our human right to health care.

For further information

Visit www.nesri.org, where you can find the following resources:

- ▶ Human Rights Assessment of Single Payer Plans
- ▶ Human Rights Assessment of Democratic and Republican Health Care Plans
- ▶ Human Rights Principles for Financing Health Care
- ▶ Basic information on the human right to health care

The logo for NESRI, consisting of the letters "NESRI" in a bold, orange, sans-serif font.