

# PROGRESSIVE MEDIA

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## ***KEY FACTS ON HEALTH CARE***

### **HEALTH CARE COSTS ARE CRUSHING AMERICA'S FAMILIES.**

- [Fourteen thousand](#) Americans are losing coverage every day during this economic crisis.
- [More than half of families have cut back](#) on health care due to skyrocketing costs.
- In 2004, [half of all people filing for bankruptcy](#) cited medical problems as a cause. And in 2008, [half of all people filing for home foreclosure](#) cited medical problems as a cause.

### **HEALTH CARE COSTS ARE CRUSHING AMERICA'S BUSINESSES.**

- Our manufacturers spend [more per hour on health care than their counterparts in Canada, Japan and the UK](#) combined. And American small businesses have seen their health care costs [grow by 30%](#) since 2000.
- Our businesses can't keep up this pace – premiums are expected to rise by 20 percent in less than four years, which would [force 3.5 million layoffs](#).

### **HEALTH CARE COSTS ARE CRUSHING AMERICA'S ECONOMY.**

- Office of Management and Budget Director [Peter Orszag](#) told Congress, “the single most important factor influencing the federal government's long-term fiscal balance is the rate of growth in health care costs.”
- We spend [twice as much per capita](#) on health care as most other industrialized nations.
- Our system [wastes roughly \\$700 billion a year](#) – almost as much as the recovery package – on treatments and procedures that cannot be shown to improve health outcomes.

### **HEALTH CARE REFORM WILL ALLEVIATE THE BURDEN ON AMERICA'S FAMILIES AND BUSINESSES, AND PUT US ON THE ROAD TO RECOVERY.**

- Reform will [alleviate the burden on families](#) by [lowering costs](#), ensuring timely access to affordable, quality health care, making sure everyone has access to preventive care to help keep people healthy, and allowing workers to change jobs without worrying about losing their care.
- Reform will [alleviate the burden on our economy](#) by creating a more efficient insurance and delivery system – which will reduce waste, and allow for a more rational financing system where everyone contributes, instead of shifting costs from some people to others.
- Reform will [alleviate the burden on businesses](#) that is hindering their ability to compete by [lowering the cost](#) of premiums with investments in efficiency and information technology, and reducing the costs for [small businesses](#) to cover their employees' health care.
- We can't afford not to act; [since 1994, the per-person health care cost has more than doubled](#).

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## Q&A

*Won't Comparative Effectiveness Research (CER) let government bureaucrats make my medical decisions for me?*

- **No** – CER will ensure that doctors and patients are getting critical information about what treatments and procedures work and which don't from unbiased, third-party sources – not from drug companies and medical device companies, like they do now.
- Big drug and device corporations can't be trusted to give doctors and patients unbiased information – they're looking out for their profits, and will recommend their newest, most expensive product – even if it's not in the patients' best interest.
- CER will let doctors and patients evaluate which drugs, devices and treatments work best – so that you and your doctor have the information you need to make the medical decisions that are right for you.
- This kind of research has already been shown to save lives:
  - Through independent research, we know that arthroscopic surgery does not help people with arthritis – saving people from undergoing [unnecessary surgery](#).
  - Through [independent research](#), scientists discovered that overuse of heart stents caused thousands of heart attacks and deaths.

*Won't a public health insurance plan lead to socialized medicine?*

- **No** – a public health insurance plan will mean more choice for consumers and more competition for insurance companies.
- Today, just a handful of insurance companies dominate the marketplace – and without competition, they are not offering consumers the best deals.
- Public plans are already working: in more than 30 states, employees are able to choose a public health insurance plan where the state takes on the risk for coverage. Managers like these plan because they provide flexibility to implement performance-driven healthcare, and enable them to develop innovative cost-containment measures, such as aggressive disease management programs and centers of excellence.
- These states' examples show the hysteria from critics is unmerited – when people have the freedom to choose, some choose the public plan, but private insurers haven't imploded.
- Most private plans focus on one thing: profits for shareholders. A public health insurance plan will be accountable to the public, and the public will be able to trust that new innovations will improve cost and quality – as they have done in Medicare and the Veteran's Health administration.