

Sample letters to the editor: COVID-19 and frontline health care workers — making the case for Medicare for All

Letters-to-the-editor should be very brief (200 words or fewer), and make one clear point. Letters are strongest when writers use their personal voice, such as writing from the perspective of a doctor or medical student. You can send letters to local or national news outlets, or to the publications of your local medical society or medical specialty society. Review the outlet's submission guidelines, usually found on the "contact us" page; submit letters in the body of an email (no attachments), along with your phone, address, and brief bio. For assistance with editing or placement, contact clare@pnhp.org.

Pots and Pans (from a practicing physician)

Dear Editor:

As a frontline health care worker, I do appreciate the yard signs, pot-banging, and occasional free pizza. But what I really want is a health care system that puts the patients and public health ahead of corporate profits: single-payer Medicare for All.

Under Medicare for All, everyone in the nation would be covered for all medical needs without copays or deductibles. Nobody would lose their health insurance because they lost their job. Nor would they hesitate to seek testing or treatment because of cost. Doctors like me could provide patients with the care they need, when they need it, without having to fight with insurance companies for permission.

If you really want to honor health care workers, call your members of Congress and demand a health system that puts health first — Medicare for All.



Health care workers are left behind

Dear Editor:

These days we call health care workers “heroes” for risking their own health to help others during a pandemic. But this praise rings hollow when we ignore the fact that millions of health workers are at high risk of severe illness or death from COVID-19 because they live in poverty and lack health insurance and paid sick leave.

A recent study [showed](#) that 29% of all patient-contact health workers lack paid sick leave, forcing them to choose between losing their wages or to work while sick. Many health workers also have no health insurance. This is especially concerning for workers in long-term care, where exposure to the virus is highest: [12%](#) of nursing home workers and [15%](#) of home health workers are uninsured, making them less likely to seek testing and treatment for illness. Poverty is a known contributor to poor health, but more than 600,000 American health workers have family incomes below the poverty line.

If we really want to honor frontline care workers, let's make sure they have the basic protections of a living wage, sick time, and health coverage. An important first step is single-payer Medicare for All, where everybody is covered for life for all medical care.

(continued)

Why are health care workers losing their jobs in a pandemic?

Dear Editor:

A pandemic should *increase* the need for health workers. But in the U.S., nearly [10%](#) of health workers lost their jobs in the first month of the COVID-19 crisis, largely because of the way we finance health care.

Most wealthy nations have a universal health system where everybody is covered for life. Nobody loses their coverage because they lose their job, and nobody hesitates to seek care when they are sick.

Other nations also enjoy the administrative simplicity of a unified health program, which can respond rapidly to changing conditions. Despite [record profits](#), U.S. insurance companies are bickering with employers and public health officials about paying for COVID-19 testing and treatment. Most don't adequately cover telehealth appointments that are crucial for continuing care safely. In contrast, Medicare and the Veterans Administration quickly pivoted to telehealth. The VA went from 2,500 daily telehealth sessions in early March to [25,000](#) sessions in June.

If we had Medicare for All, health care spending would be based on health needs, not insurance company profits, and health care workers could care for patients where they are needed most.

Nursing home workers at highest risk for COVID-19

Dear Editor:

The popular image of a health care “hero” during COVID-19 is a doctor or nurse in a hospital. That image ignores the [4.5 million](#) long-term care (LTC) workers in nursing homes and home health care, who come into daily close contact with patients.

These workers are at extremely high risk for COVID-19: More than more than [40%](#) of coronavirus deaths have been linked to nursing homes. As of late May, [34,000](#) nursing home workers have been infected and 400 have died (most certainly an undercount, since only 80% of nursing homes reported this data).

What's worse, LTC workers — who are disproportionately Black and female — are mostly low-wage: Nearly [6 in 10](#) earn less than \$30,000. Despite the risks to workers' health, many nursing homes don't provide health coverage: [12%](#) of LTC workers are uninsured, and 19% are on Medicaid.

We must do better. Under Medicare for All, everybody — regardless of income or job title — would have health coverage for life. And unlike today's profit-oriented health system, Medicare for All would provide adequate funding and support for long-term care, benefiting both patients and the dedicated men and women that care for them.

