

Nurses' Campaign to Win Medicare for All Frequently Asked Questions:

"I like my current insurance plan. Why should I give up what I already have for Medicare for All?"

A common argument made among opponents and well-meaning skeptics alike is "I like my current insurance." Yet, when you really get down to it, people don't care about how they are covered, they care about what their care looks like.

- There is a difference between liking your coverage and liking your care. Insurance coverage refers to how services are paid for. Care refers to who provides the services. Insurance plans do not provide services, they pay for them.
- When people say they like their plan, they are really saying they like their nurses
 and doctors and their hospital. People want to see the health professional of their
 choice, go to the hospital of their choice, and get the care they need without their insurer
 getting in the way. People don't care if it's Blue Shield or Aetna paying for their care:
 they care what doctor, nurse, or other practitioner provides it.
- Doctor and hospital choice is NEVER positively impacted by private insurance. In
 the most ideal scenario, your insurance plan will stay out of the way and let you see the
 doctor you want and pay for the care your doctor recommends. This is very rare under
 private insurance, which often restricts the care you can receive and who can provide it
 to limited networks.
- Medicare for All increases freedom and choice where it matters. You can see
 virtually any doctor, go to any hospital, and get the care they recommend with no
 premiums, copayments, or deductibles. Doctors, nurses, and their patients will decide
 what care is appropriate, not insurance company bureaucrats.

