

# Pittsburgh Town Hall: Democrats cover for attack on health care

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Over 500 people attended a Town Hall meeting on Saturday, hosted by Mike Doyle, Democrat congressman from Pittsburgh, to voice their opposition to the destruction of health care being pushed through Congress as well as the enormous cuts to social services proposed in the Trump budget.

The overall purpose of the Town Hall was not to mobilize the working class to oppose the Trump administration, but to allow the Democrats to posture as defenders of health care and opponents of the cuts while giving people the chance to let off steam. Doyle is seeking to keep the growing movement against Trump's policies under the control of the Democratic Party and to prevent workers from drawing the conclusion that the defense of health care requires a fight for socialism.

The House Republicans' American Health Care Act (AHCA), the proposed replacement for the Affordable Care Act (ACA), commonly called Obamacare, contains massive cuts to health care. The Republican bill would cut Medicaid by \$880 billion and end the program as an entitlement by converting it to a block grant, drive 24 million people off of health insurance by 2026, including over 1 million in Pennsylvania, while cutting taxes on the rich by over \$600 billion.

At the meeting, Mike Doyle, considered a liberal Democrat, held out the false promise that the measure could be defeated by putting pressure on Republican members of Congress. "There is a 50-50 chance of defeating this bill," Doyle said. "I know a lot of nervous Republicans." He urged those in attendance to call Republicans in Congress and "light up their phones."

In reality, the only Republican opposition to the AHCA is from members of the ultra-conservative Freedom Caucus, who are demanding even deeper cuts to Medicaid and limits on mandates for essential health benefits.

Doyle promoted his sponsorship of House Bill 676, which calls for a single-payer system. Doyle argued not that health care is a right that everyone should have, but that it is less expensive to send someone to a primary care doctor than to the emergency room.

"Individuals are still going to get sick," Doyle said. "They are still going to be involved in accidents. They are still going to end up in the health care system. And those individuals who decide not to buy insurance and find themselves in the health

care system because they were in a car accident or whatever. That becomes like the old days, uncompensated care, and who do you think pays for uncompensated care?"

But Doyle's bill was only introduced in January, when he knew it had no chance of even being voted on, much less passed. From 2006 through 2010, when the Democrats controlled both houses of Congress, the measure was never introduced or voted upon. Doyle backed the ACA, which provided billions to the insurance companies and the health insurance industry, allowed companies to eliminate health coverage for millions of workers, while forcing millions of people into buying insurance that provided only minimal coverage.

Many of the lowest cost bronze plans, which provide the least coverage and are purchased by those who can't afford the more expensive plans, come with a \$6,000 deductible for an individual and a \$12,000 deductible for a family. Even with the substandard coverage, premiums average \$490 a month for someone in their 50s and \$740 for a 60-year-old.

The further cuts to health care proposed by the House Republicans and supported by the Trump administration will have a devastating impact on people. In Pennsylvania alone, abolishing the ACA's expansion of Medicaid and its conversion to a block grant will force nearly 600,000 off of health benefits. Changes to health care tax credits, along with granting insurance companies the freedom to charge even higher premiums for the elderly, will drive millions nationwide and hundreds of thousands in Pennsylvania to drop coverage altogether.

The WSWS spoke with those attending as to why they came to the town hall.

Michael Hogan, a retired federal employee from Wilkesburg, Pennsylvania, explained how the cuts would affect him. "I am adamantly opposed to the overturning of the ACA because the alternative is far worse," he said, "primarily because it eliminates the Medicaid expansion, and favors the rich over the poor.

"I am on both Medicare and Medicaid, and the proposal to make Medicaid a block grant program could affect me directly, because my health care depends on my being eligible for both Medicare and Medicaid." Michael suffers from many heart

conditions and has had four heart attacks in the past few years.

He said, “If I were denied continuous coverage under Medicaid, I would be forced to seek coverage from some other system. I only get \$700 and change from my Social Security Disability Income and Supplemental Security Income a month. That’s even less than the premium I would probably have to pay should the ACA be abolished.

“I’m retired on Social Security Disability Income. I used to be a federal employee. I worked for the Department of Defense. I worked in upstate New York, Boston and Key West, Florida.”

After a WSWS reporter cited a recent report that projects over 3,000 additional annual deaths in Pennsylvania as a result of the Republican proposal, Michael responded, “That wouldn’t be at all surprising. According to the president, Medicare is not being ‘tampered with,’ but Medicaid would be turned into a block grant by the states. There’s talk of having a work requirement for Medicaid, so the prospects for it are dim in my opinion.”

Paul Griffin, a service worker from the former steel mill town of McKeesport, expressed his opposition to the proposed health care cuts. “The prospective number of people that are going to lose coverage over these coming years, I don’t know why they would even consider something like that. If anything, I’d think you would want to be getting more people covered.

“One group of people that are going to get hit hard are those with opioid dependence, and other substance abuse programs, those are going to get hit hard as well. And you know with the crisis you have on that now nationwide, it seems that this is not the type of thing you want to do at this time.

“I’m still working, 30 years going on 31. I’m 62. That’s one thing that’s probably going to keep me working is the health care, because I certainly don’t want to lose the health care that I have. I’ve had a couple of health issues these last few years. I had a prostate cancer diagnosis, and I had to have a hip replacement. Those things fortunately were covered. I have good health care, and I’m grateful for that. I don’t know what I would have done without the health care for that.

“You’ve always got to be cognizant of the way things are now, and the way things are going to be in the future. In a couple of weeks, you’re going to see people graduating from CMU [Carnegie Mellon University] and from Pitt [University of Pittsburgh], and I’m always cognizant of what kind of world we’re leaving them, what kind of progress we’re making on social issues like health care. I’m a ferocious advocate for health care.

“With these deep EPA cuts they want, what kind of environment are we going to be leaving our children and grandchildren? We’ve already seen over these past few years increases in childhood asthma.

“There’s always that question, do you think health care is a right or a privilege? I think it’s a right. They want \$54 billion for defense, and they’re cutting all these entitlements. You don’t do that. You don’t make a smaller safety net in times like this.”

Kathleen explained her situation. “I’m retired. I’m not 65. I don’t have Medicare, don’t have Medicaid. I get my health care through the exchange, and I pay for it.

“I worked at a utility and Westinghouse, so I worked for 37 years total between Westinghouse and the utility. I shouldn’t have to worry about it.”

Asked how she felt about the proposed health care cut, Michelle Boyle replied, “I’m devastated. I’m a home health nurse. I see patients struggling every day.

“I worked down at Allegheny General for 14 years before the Affordable Care Act came in. At that time,” she said, “it’s no exaggeration at all to say that patients were in with their families praying,” because they had no idea how they were going to pay for care. In one of her cases, a roofer fell. “He fell off the ladder. ‘How are we going to keep our house? How are we going to do this?’ You could just see this strain on their faces.

“Also, personally, my mother-in-law lost her job, she lost her insurance, and then a year later she lost her life, and her granddaughters have never met her. We can only tell stories about her. They can only hold her picture, instead of her hand. That’s not the best of what we can be.

“And people are going through worse. My friend cleans houses for a living. Her husband had committed suicide. She was trying to find a job that would let her spend time with her kids, because she’s on her own. She’s working full-time. She was so relieved to get on the expanded

Medicaid program in Pennsylvania.” Michelle said that beforehand “she would have to decide when her daughters hurt themselves, whether to take them to the ER or not. Is it worth losing a payment on the house? She’s terrified right now.

“I have an Iraq veteran who is struggling. For her service in Iraq, they said they would cover the back injury, but not the cancer, because you can’t prove it. She’s struggling to go to school and pay for her health bills, and deal with the third round of cancer, and she’s only 30 years old.”

Asked her thoughts on universal health care, Michelle responded, “Yes! Abso-freaking-lutely! Every other country has managed to do it. They’re not impoverished. It works. It’s not like it’s a big experiment.”



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