What's the difference between the public option and single-payer healthcare?

One big difference is that single-payer is off the table. The "powers that be" have decided it is way too radical for America. It is not under serious discussion by the so-called realists in the beltway, including President Obama (although he has said on several occasions that if he were starting from scratch, he would institute a single-payer system.)

The single-payer proposal in the Senate, sponsored by Sen. Bernie Sanders, the progressive from Vermont, has only one sponsor: himself. This being the case, it is clear that single-payer doesn't have a snowball's chance in hell of passing anytime soon.

But that does not mean we should stop advocating for it. Let's return to our original question so that we can understand the merits of single-payer and why there is so much opposition to it from healthcare profiteers like Big Pharma and the insurance lobbies and their Congressional minions.

A single-payer system is, according to activist Dr. Aaron M. Roland, "a program of publicly funded, truly universal privately delivered healthcare that would be used by all residents of the country; it is essentially an improved Medicare for all." Many envision it would eliminate the 20 percent copayment required by Medicare.

People could enhance their coverage with private insurance, and everyone could choose their own doctors. It would be financed through taxes without adding to the nation's overall healthcare costs and would provide universal care. Taxes and direct government spending would go up, but this cost would be offset by a reduction in business and personal medical expenditures.

It would do away with the wasteful administrative costs of the USA's current system by eliminating advertising, marketing, product development, redundant corporate bureaucracies, and the outrageous salaries and bonuses paid to CEOs. It would also eliminate the need for government programs such as SCHIP (State Children's Health Insurance Program), Medicare, and Medicaid because everyone would be covered.

Unfortunately, all the healthcare reforms currently on the table include a prominent role for the private insurance industry, including some versions of the public option. This is why the insurance lobbyists are spending $1.4 million a day lobbying members of Congress to pass their preferred version of healthcare reform. Under many of these proposals, they stand to make a bundle. The public option is not single-payer. It was originally envisioned as an alternative that would compete with private insurance. However, some have proposed that government set up an insurance company of its own. This would fail to contain out-of-control healthcare costs because it would keep intact an outmoded administrative bureaucracy.

Other proposals want to cripple the public option by requiring that it receive the same level of subsidies that private plans receive. Private companies are subsidized because they get to take a tax deduction for advertising, marketing, and the cost of providing employee health insurance. If the public option receives a government subsidy at the same level as private industry, it will be at a real competitive disadvantage and likely fail in its mission to provide comprehensive coverage for more people while bringing down costs.

Conservatives glorify competition, the supposed strength of the free-market system. If private insurance is really superior, as they claim, then why worry about a government-run public option? People will make their choices and prove them right or wrong. The real underlying fear is that the public option will succeed and lead eventually to a single-payer system.

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