



## The Daily Dish

# The Return of Senator Sanders

DOUGLAS HOLTZ-EAKIN | MARCH 19, 2025

At the moment, the Washington, D.C. world is engaged in a fake debate over deficits and controlling spending, with Congress and the administration collectively pretending they will turn from the path of debt accumulation – without touching Social Security, Medicare, Medicaid, and national defense. Bollocks. Social Security and Medicare alone will constitute more than one-half of non-interest federal spending over the next 10 years. That’s where the money is, and that is where attention must be focused, especially because those programs are projected to grow much faster than federal revenue.

The need to reform Medicare (and other health programs) raises a danger, however. If the focus is simply on cutting federal spending, it will be tempting to shift costs to states, or to firms, or undertake damaging changes to the delivery of health care in the United States. The very real need to control federal spending, deficits, and debt has a companion need to undertake high-quality health care reforms.

The bad news is that this same faux budget debate has re-energized one of the key voices for damaging health policy. As Sally Pipes points out in her Forbes [piece](#) “...the Associated Press [proclaimed](#) that Sanders has emerged as one of the leaders of a revived ‘anti-Trump resistance.’ The 83-year-old senator is touring the country, ‘drawing huge crowds’ who come to hear him talk about democracy, education, and health care.”

And what does he want in health care?

*Sanders has [long been](#) the most prominent proponent of adopting Canadian-style socialized health care in the United States. One could even call him the “Pied Piper” of single payer. Abolishing private insurance and replacing it with a government-run, single-payer system was a tentpole of his presidential campaigns—and has remained his cause célèbre ever since.*

This would be a budgetary disaster, with AAF's Center for Health and the Economy [estimating](#) that a Sanders-style reform would raise federal spending by \$44 trillion over the next 10 years. This is a sharp turn in the wrong direction. Worse, it damages care. In comparing Canada and the United States, Pipes notes:

*As of October 2022, American patients had access to 85% of all drugs launched between 2012 and 2021. Canadians had access to just 45% of the drugs launched in that same period. Cutting-edge medicines are hardly the only things Canadian patients have to wait for. According to the Fraser Institute, Canadian patients faced a median wait of 30 weeks in 2024 for treatment from a specialist following referral by a general practitioner. That was up from just over 27 weeks in 2023—and is a 222% increase from 1993.*

And the list of shortcomings she documents goes on and on.

The United States has a health care system with many strengths, but some acknowledged weaknesses, including its expense. The solution to both health care and budget challenges is sensible reforms that reduce costs. Moving toward a single payer is not a reform that accomplishes either goal.