

## Who's cashing in on COVID vaccinations? And how did racism help them out?

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**Note:** Parts of this transcript are machine-generated, so it's NOT letter-perfect. Thanks for your patience. We're doing our best! - dw

Hey there--

In Chicago, an essential worker named Jamie Gentry did something a LOT of folks have been doing recently: She opened a gazillion browser tabs and scoured them all to find a COVID vaccine appointment.

**Jamie Gentry, Chicagoan:** it was just this whole series of refreshing, refreshing, refreshing.

**Dan:** All day, into the evening. She finally found one at an urgent care clinic, jumped on it, then realized she'd accidentally booked two spots with them.

She called the clinic to fix it, and THAT's when they told her, OH hey, btw: We'll be doing a, uh, 15-minute consult before your shot. ... and oops, we don't take your insurance, so that consult's gonna be 300 bucks.

OR, they said. You could take advantage of our special...

**Jamie Gentry, Chicagoan:** where it would be \$200 instead of the \$300. But then I would have to pay it up front in order to get the shot.

**Dan:** YEP. Enter Mariah Woelfel, A reporter for WBEZ, the local public-radio station. Mariah got Jamie's story, and she called a state health official, to say: HEY IS THIS EVEN ALLOWED?

The official was like, uh, no. Not really. Providers get the vax for free, and they're supposed to work out any "administration" fees with an insurance company, or the government.

She told Mariah: we've got a hotline to report this kind of thing, OK? Could you let people know? She told Mariah that she'd already gotten 40 to 50 calls-- this is before Mariah and WBEZ put the whole thing on blast.

After Mariah's story came out-- like that same day-- the clinic's medical director emailed Mariah to say they were going to give refunds to the 20 or so OTHER people they'd already charged. She wrote "This was 100 percent our bad."

Great! One down-- how many more to go?

This is An Arm and a Leg--a show about the cost of health care. My name's Dan Weissmann. I'm a reporter, and I like a challenge, so my job on this show is to take one of the most enraging, terrifying, depressing parts of American life-- and I know, we're still in a take-your-pick kind of situation here, but the cost of health care? It definitely looks like a contender-- and bring you a show that is entertaining, empowering, and useful.

And it's time to check in on ... the pandemic. Especially now that vaccinations are really ramping up. COVID vaccines are supposed to be free. But this is Amuricah, so of course we've been wondering, how will people try to make a buck on them?

And how will we find out? Local reporters like Mariah Woefel have been spotting scams here and there. Which is like, YES. Get 'em! I've seen stories in Denver, and New Mexico too. There's just no way of knowing how many more are out there, it's like whack-a-mole.

And then there's Philadelphia. That's one place where the good, the bad, and the ugly have been very much on display, big and bold.

The good is for real, and it's great. We'll be getting to it in the second half of this episode. The ugly is everywhere. We'll get to that too.

And the bad? It comes with the kind of chutzpah we just don't see every day.

Or maybe we do-- this kind of destructive chutzpah is definitely around-- but it does not always get called out the way it did here.

And for THAT-- once again, we've got local reporters to thank.

You may actually have seen the headline on this story-- it made national news:

For a while, a group led by a 22 year-old with NO experience in health care, but WITH a healthy interest in making money-- was the city government's leading partner in its vaccination program.

That's the headline. The details? They are worth a look.

Here's Nina Feldman, a reporter with WHYY, Philadelphia's public radio station.

**Nina Feldman:** I first really heard of the group Philly Fighting COVID for the first time, at an event that they were hosting with the Philadelphia health department. It was billed as Philadelphia's first mass vaccination clinic.

**Dan:** It's at the convention center-- a big site, right in the middle of town. You could vaccinate thousands of people a day there. And the city press release said: This group, Philly Fighting COVID? They're our partner for this whole vaccination effort. You want a vaccine? Hit up their website. This was early January.

**Nina Feldman:** And this was really the first time that anybody, in the general public in Philadelphia was given an option to reserve your spot in line, essentially for the vaccine. So it was a big deal. This event was exciting. And, um, I went to just cover it as a straight ahead news story.

**Dan:** It's a thing. People are getting shots.

The mayor's there. And so is the director of Philly Fighting COVID.

**Nina Feldman:** Andrei Doroshin, who's a 22 year old graduate student at Drexel university here in Philly. Um, was that the mic, you know, talking with the mayor about how great this event was and.

**Dan:** Andrei says, We've been doing a ton of testing, and now we're going to take what we've learned, and do a lot of vaccinating.

**Andrei Doroshin:** And our six months of work has lead us to this day

**Nina Feldman:** I remember thinking that's interesting. I'm a health reporter. I've been covering the pandemic since day one.

**Dan:** And this guy? This group? Not big players. And the city is putting them in charge?

**Nina Feldman:** this was not the natural choice , as far as I knew. So that was the first thing that just sort of surprised me.

**Dan:** And then when everybody's making speeches for the press, Doroshin and his chief science officer make claims that Nina knows from her reporting, are not true-- like that they've done half of the testing in Philadelphia so far.

**Nina Feldman:** that was just very easy. statistic to poke a hole in. And, you know, people do that stuff all the time in press conferences People inflate numbers and, , make grandiose claims. So again, I wasn't ready to say, you know, this guy's a fraud because of that. but it did perk my ears up a little bit.

**Dan:** And then when Nina asked questions, the answers were unusual. Like, she asked the city officials, how much does this cost? They just said, Um, ask Andre.

**Nina Feldman:** And I thought that was kind of odd.

**Dan:** Andrei said, Oh, you know I'm actually funding it right now, along with a couple of friends.

**Andrei Doroshin:** my philanthropy man and cells? My friends. Yeah. Yeah. We got to do good things in bad times.

**Nina Feldman:** And I said, you know, okay, wow, that's impressive. Like how much money are you putting up for this? He said,

**Andrei Doroshin:** Um, I can't actually tell you those specifics. Um, I can tell you it's a really nice Mercedes.

**Dan:** I don't have an intuitive grasp of what that number actually is.

**Nina Feldman:** Well, you know, me either. I have like, I don't really even know the difference between like a crappy Mercedes and a really fancy Mercedes. That's just like not yeah, so that didn't really tell me much...

**Dan:** But it told you a little bit about the frame of reference of the person

**Nina Feldman:** Exactly. his whole tone just struck me as, as, as. Suspicious, frankly.

My initial instinct was to go home and start Googling him and figure out what this guy's deal was, because it didn't make sense to me that the city would work with somebody with so little

**experience, and so many holes in his sort of presentation of what he was doing and what he had done.**

**Those things all stood out to me immediately. I thought to myself, There's a story here.**

So, Nina went home, and filed her straight news story-- hey, they vaccinated people-- and started Googling Andrei Doroshin. It paid off quick.

**Nina Feldman: You know, we didn't have to do that much digging to start figuring out that devotions resume was. Entirely inflated,**

**Dan:** His official bio said Andrei had founded a film department. That turned out to be a club at his high school. While he was a student there.

The bio also said he'd founded a non-profit focused on air quality. Yeah, here's one of the few places online you can find evidence of that project's existence:

**Andrei Doroshin: Hello, Drexel university. I'm Andrei Doroshin. And this is my video resume.**

**Dan:** Yes, that's a college-application video.

nina kept digging, with a couple of colleagues. And meanwhile, people at the vaccination sites started talking about what they were seeing.

And here's where it goes from "this looks like a weird caper" to "this looks really bad." The big revelation came from a nurse who was volunteering, Katrina Lipinsky.

**Katrina Lipinski nurse PFC: It definitely rubbed me the wrong way to watch Andre walk pretty openly from the vaccine area over to his. Um, belongings and packed. I don't know how many vaccines,**

**Dan:** Yep. Doroshin later admitted he'd taken four doses home at the end of the day and jabbed his friends. He told reporters: "We had left-overs! They were gonna go bad otherwise. We'd called everybody we knew!"

Uh-huh. It definitely sounds like they had a lot of left-overs.. One person who was there, described the end of the day-- when they were trying to use up doses, as a "free for all."

**Nina Feldman: A lot of the volunteers were, um, and this is language I'm using from a source running around injecting one another.**

We looked up the full quote later. The source actually said they were running around "like kids." She called it a "fun, let's vaccinate-each-other-type situation."

And this frenzy to use up all these left-over doses sounds especially bad when you consider that other sources told Nina and her colleagues that earlier that day, they'd she'd seen people-- older, vulnerable people-- getting turned away, in tears.

**Jillian Horn PFC witness: there was literally 85 year old, 90 year old people standing there, like with printed appointment confirmation saying, I don't understand why I can't get vaccinated. I'm 85.**

**Dan:** We're talking about 85 year-olds -- in wheelchairs-- who were, let's just say that again: holding printed appointment confirmations.

Doroshin liked to sell his lack of experience in health care as a POSITIVE. He was like, Hey, I'm a disrupter!

This did not sound like the kind of disruption you would want.

ALSO... it turned out that Doroshin's group, Philly Fighting COVID-- remember how he told Nina that it was his philanthropy? Well, by the time he talked with her, they had re-incorporated as a for-profit.

Somebody sent Nina a video of Doroshin giving a PowerPoint slide presentation on the big plan: vaccinate a million people, with the government providing the vaccines for free.

**A Doroshin:** Now this is the juicy slide. How are we getting paid? We're going to be billing insurance companies, \$24 per vaccine. I just told you how many vaccines we want to do. You can do the math in your head.

**Dan:** OK, I just did the math: 24 bucks may not be a ripoff price, but times a million doses that's 24 million bucks. Pretty juicy.

As Nina and her colleagues started reporting what they were finding, the city said it was cutting ties with Doroshin's group, effective immediately

Doroshin said hey: He may have made some mistakes, but his group had administered almost 7 thousand doses. They did the job. They deserved thanks. He'd done nothing wrong.

Others disagreed. The deputy health commissioner, who had been running the whole vaccine program, resigned.

Her boss said. Yeah, sorry. Oops.

**Farley, Philly:** We had a lot of people we wanted to vaccinate quickly. Uh, and we were at an organization that we had worked with that looked like it had the capability of doing that. So I hope people can understand why it is on the surface. It looked like a good thing,

**Dan:** That might have been more convincing if there hadn't been other organizations to turn to.

But Philadelphia has several big medical centers-- like the University of Pennsylvania and Temple University, to name a couple.

AND it has a group that isn't as established but is DEFINITELY the partner you'd look to if you were AT ALL interested in addressing the needs of a city where... white people are not the majority. That's the Black Doctors COVID-19 Consortium, a non-profit group created and led by a board-certified physician, Dr. Ala Stanford. She has been out there addressing needs that other players did not-- and doing it in WAYS that others do not.

In normal times, she's a surgeon. But she has put her practice on hold for almost a year. Last spring, she read the news: Black people in Philadelphia were dying more, and getting tested less. Black people were less likely to have a primary-care doc who could refer them for a test. To go to a drive-up

testing site... you needed a car. Black Philadelphians were less likely to own one. In the early days, people were getting bills for COVID tests.

She went out in her car and started testing people in black neighborhoods for free. Next, she set up pop-up clinics in church parking lots: Meeting people at places they trusted.

She raised money on GoFundMe, brought on volunteers-- medical professionals-- and tested thousands and thousands of people.

**Dr Ala Stanford:** no one asked us to do it. It wasn't our job. It was that African-Americans, their lives were not being valued. And we decided collectively that we were going to change that

**Dan:** But she did not get a heads-up that the city was ready to take on a partner for mass vaccinations -- until suddenly Philly Fighting COVID was that partner.

**Dr Ala Stanford:** Yeah, I found out on the news, like everybody else, I was like, Oh wow, that's interesting. I wonder how that happened.

Dr. Stanford is talking here with the moderator of a town hall the Black Doctors Consortium hosted on Facebook at the end of January.

And really the question, "I wonder how that happened?" It's rhetorical. In a TV interview, she named what she called "the elephant in the room."

**Dr Ala Stanford:** And that's the implicit bias injustice and racism.

**if you look at everything on paper — in terms of the experience, in terms of the earned trust in the community— we exhibited all of those qualities consistently.**

**We're the operation with licensed doctors, nurses, nurse practitioners, physician assistants, all of whom were asked to show their credentials, their resume.**

**We needed letters of recommendation before we could even start. So it's unclear to me how this organization, if they were judged with the same scrutiny, was even ever able to get off the ground**

**I think we have to look, not just in Philadelphia, but at the deep rooted problem that allows you to look at an organization that has been doing the work and overlooks them primarily for another group that's unestablished, younger, not led by a physician, and white.**

**Dan:** It came out that the deputy health commissioner, the one who ended up resigning, had been passing extra information along to Philly Fighting COVID. Information that Dr. Stanford says she was not getting.

Dr. Stanford didn't suggest an explicit, corrupt quid-pro-quo-- or even a deliberate intention to discriminate. Just an outcome that may be shocking, but not necessarily surprising.

**Dr Ala Stanford:** unfortunately I'm not surprised because I'm a black woman in America. I've lived enough years, so I'm not surprised, but I am disappointed.

**Dan:** And she's talking about disappointing results. Including: once Philly Fighting COVID started doing vaccinations, they just dumped commitments they'd made to help community groups with testing.

One woman who runs a neighborhood non-profit told WHYY about an email she got from Philly Fighting COVID about why they were backing out of a testing event. It said.

**Siria Rivera:** **we're going to discontinue testing altogether, you know, sorry about the short notice. Um, the short notice was that they were supposed to be at my site 20 minutes. After that email was sent**

**Dan:** Ouch. They weren't the only group to get ditched like that either. One pastor said, "They just ghosted us.

**Dan:** All of this was exactly the kind of thing Ala Stanford had set out to address: Providing equitable access. Which includes building trust. Choosing a partner like Philly Fighting COVID does NOT do a lot to assure anybody who's wondering if the people running things have their best interest as a priority.

And ugly inequities continue. By late February, Rite Aid pharmacies had done more vaccination than almost any other provider in Philadelphia. Only four percent of those vaccinations have gone to black people. In a city that's more than 40 percent black? .

Now, that's ugly.

But we've gotta talk about the good part. I want to spend the rest of this episode talking about what Dr. Stanford and her colleagues have DONE. Because that? That is definitely good, and it's got lessons for all of us.

That's right after this.

This episode of An Arm and a Leg is produced in partnership with Kaiser Health News. That's a non-profit newsroom covering health care in America. Kaiser Health News is NOT affiliated with the big health care outfit Kaiser Permanente. We'll have some more information about Kaiser Health News at the end of this episode.

We've talked about some of the ways Dr. Stanford made adaptations from the beginning, to meet people where they were, to remove barriers that other players didn't know they were putting up.

Now, with vaccines there were new challenges.

When she was able to start vaccinating people in early January, she went on social media and made her pitch.

**Dr Ala Stanford:** **Black people are dying from Corona virus at a rate three times greater than white Americans in Philadelphia. 90% of the vaccine that has been administered is to non-black people. I understand the hesitancy. I understand the atrocities that black people have endured previously and current day.**

**Dan:** She said, please don't let that stop you from protecting yourself and your loved ones. Here's where to find our registration form. Please, complete it even if you don't know for sure you want the shot.

**Dr Ala Stanford:** **If you know, you want it complete it. And if you know, you don't want it to still complete it and let's keep talking about it**

**Dan:** She ran vaccination events at churches in people's communities, to keep things accessible and intimate. And she kept looking for ways to adjust the process, to have the best shot at vaccinating the folks who needed it most and might miss out.

One thing she quickly stopped doing: Using social media to announce late-breaking vaccination opportunities. That disadvantaged older people-- who are extra vulnerable-- and who may not be on social media so much. It also disadvantaged a lot of essential workers:

**Dr Ala Stanford:** **people who were at work, , but not at a job where they could just say. I'm going to take off. I can go get a vaccine .**

**Dan:** . She also found that scheduling appointments meant older folks in black communities took on extra burdens.

**Dr Ala Stanford:** **if you tell them 10, they come at seven. you know, folks are used to standing in line. And usually when you show up early, that means you have a better chance of getting it.**

**Dan:** She did not like keeping elderly folks-- who are the most vulnerable to COVID-- waiting in the cold, and then seeing other people just showing up at their appointed time and expecting a shot right away.

**Dr Ala Stanford:** **We've got to figure this out, how to do this better.**

**Dan:** So, she switched things up again: she made appointments for a given DAY, not a time of day. Show up on that day, and it's first-come, first served. She allowed folks to register on-site, with a paper form.

She also took to the media to tell people: If you're not FROM this vulnerable community, please don't come here for a shot. Here she is at a bustling vaccination event, breaking it down for WHY?s Nina Feldman:

**Dr Ala Stanford:** **We're saying you see that any black woman right there, she needs it more than anywhere and she's not registered. And she didn't have social media. She filled out this paper form and right now is when she could get a ride**

**Dan:** ...And she's going to get it first because she's more at risk of getting sick and more at risk of dying than you are. And then, Dr. Stanford had another idea: A vax-a-thon. No appointments, just show up.

She did it on a weekend, when more people would have time to come stand in line. Bring ID that shows you're eligible to get the vaccine... and evidence that you live in a ZIP code with a lot of COVID cases, which in Philadelphia meant black and brown neighborhoods.



She got the sports arena for Temple University. The lines went for blocks. She told reporters that she hoped to vaccinate 2,000 people. They did 4,000 before the weekend was done.

Jennie Johnson is 73. She told WHYY's Kenny Cooper that she waited outside, in the cold, for three hours. She had no complaints.

**Jennie Johnson age 73 Philly: I don't know too much about how Philadelphia has handled it, but I knew how to black back to self handle it. Phenomenal.**

**Dan:** And of course there was a reason people were willing to wait for hours in the cold. Here's Dr. Stanford

**Dr Ala Stanford:** Well, it talks about how great the need is. People want to live. They want to get back to a new normal. I personally think it also shows the trust that people have in us, coming out. Um, and that feels good.

**Dan:** This is not 100 percent a feel-good story. The Philadelphia Inquirer later [published an essay](#) from a woman who wrote that she'd stood out in the cold for 12 hours. She called the experience grueling and dehumanizing.

The vax-a-thon, she wrote, was "not a feel-good story" at all. It was a story "about the Black community being left to fend for itself without enough resources."

Dr. Stanford herself said she wouldn't do another similar event without more support from the city.

To date, even with Dr. Stanford's work, Black people are seriously under-represented for COVID vaccinations. They are seriously over-represented for getting COVID, and for dying from it. That's in Philadelphia and around the country..

But still. There's definitely something to celebrate here, and a LOT to learn.

Doctor Stanford and the Black Doctors Consortium did not make time to talk with me. Which I actually support. I mean SHE'S BUSY. She and her group have now vaccinated more than 25,000 people-- and more than 82 percent have been people of color. (I mean, imagine what she could have gotten done by now if the city had made better choices to start with.) She is doing this six days a week, and there have clearly been some late nights. Did I mention she also has three kids? She deserves a break.

A lot of the tape we've used comes from that Facebook Live session she did ~~with Ali Velshi~~. It was two hours long. Toward the end, the moderator asked her: What are the big lessons about our health care system, the ones that'll go beyond the pandemic?

And I want to play you most of her long answer.

**Dr Ala Stanford:** So one it's the caregiver and two it's the person receiving the care. So for the caregiver, as healthcare providers, we all have to acknowledge our own implicit bias. And what I mean by that are the things you do that are sub consciously, potentially doing harm to a patient.

**Dan:** For instance, Black people are often denied appropriate pain medication because of stereotypes that they're strong and can take it, or that they're going to abuse drugs. Not true. And those stereotypes are systemic, baked into our society.

**Dr Ala Stanford:** There's been studies about this that showed that most medical students that come in already have these preconceived notions and myths, quite frankly, about lack patients before they even come in the door. So I think as healthcare professionals and I mean this to my White doctors and nurses and other health professionals as well as Black—White, Black, all of us have our own biases.

And you really have to work on it every single day, every day, because we took an oath to first do no harm.

**Dan:** And failing to care for someone properly because you're allowing those biases to operate on you unchecked? That's harmful.

Next, she's got a prescription for patients.

**Dr Ala Stanford:** You know, either a lot of folks of color don't go to the doctor or when they go, they're already expecting it to be an unpleasant experience. So what I'm saying to the person receiving the care is decide it's going to be different this time.

It's realizing the power that you have. And I know it feels like your power list. When you go to the doctor, what's your really not, you know, and advocating for yourself. So that doc may have 15 minutes when they're in with you, but that's your 15.

So if you're coming for a particular reason, you have your questions written down before you come in, right. You might say to the doc, Hey. Um, how much time do we have doc? Cause I want to make sure I get all my questions and I know how busy you are, but I want to make sure we get everything addressed.

**Dan:** So, number one: Have an agenda. Number two, don't go alone.

**Dr Ala Stanford:** always bring someone with you when you go to the doctor, right? Because sometimes your mind might wander where they say something that's disconcerting and you're not thinking. So you have someone there

**Dan:** She says in a pandemic, when bringing someone in person is a much heavier lift, you do what we've done with everything else: Go virtual.

**Dr Ala Stanford:** you say. do you mind if I call my brother on the phone, call my sister to listen in because I sometimes don't get everything and I just want to make sure I have another pair of ears, right?

That's all advocating, but not saying, "You better treat me the way I deserve to be treated!"

I want to make sure I get everything right. That I'm committed, and you and me are going to make me the healthiest person I can be, right?

I wanted to play all of that for you, for a couple reasons. I mean, first: That advice about HOW to effectively advocate for yourself, in the doctor's office? That's like a bulls-eye for a show that's about practical ways of defending ourselves against the costs of health care.

Ineffective care is expensive: in dollars and cents, and time and suffering.

So, second: Dr. Stanford's description of how our society's racist biases mean the medical system imposes extra costs on people who aren't white? That's an important story for this show too.

Ultimately, the cost of health care amounts to BARRIERS to getting the help we need to take care of ourselves.

Dr. Stanford is telling us-- and showing us, through her work-- what we can do to address those barriers.

And of course she's not the only one. As we were putting this episode together, a doctor and public health advocate named Rhea Boyd published an essay in the New York Times with the headline "Black people need better vaccine access, not better vaccine attitudes."

She pointed to gaps that Dr. Stanford had been working to address, including better access to the vaccine itself, and access to credible information from trusted sources.

And as it happens, Dr. Boyd had just been doing some work on that herself, developing a project called "The Conversation-- between us and about us." It kicked off in early March with a video hosted by comedian and CNN host W Kamau Bell.

**W Kamau Bell:** Hello, Black America— and people who pay attention to what black folks are doing. My name is W. Kamau bell. There's good news out there. There's a COVID-19 vaccine. Yay. But the bad news is as black folks, it's hard to trust what's going on. So what do we do? Well, we turn to people. We can trust black folks, but not just your uncle at the cookout. No, no, no, actually not him at all. I'm talking about black scientists, black doctors and black nurses.

He runs through a quick series of very-direct questions -- with very-direct answers some of those black medical experts:

**W Kamau Bell:** what about side effects?

**Scientists w WK Bell:** Uh, soreness from the injection site?

I had a little bit of arm soreness

**W Kamau Bell:** arm sore. Is that a side effect? My arm's sore right now,

**Scientists w WK Bell:** The common things soreness at the injection site, headache fever, maybe a swollen lymph node failed.

**W Kamau Bell:** Is this like one of those pharmaceutical commercials where at the end, they talk real fast about the side effects. And it's like, "You're also going to get hair from your eyeballs. And vampirism ..."

**Scientists w WK Bell: My sister texted me. Um, the second day, uh, after I got the first vaccine and I remember she was like, are you a zombie yet? And we just laughed. Like, no, no. So the big answer is no.**

And so on. It's great. We'll link to it from wherever you're listening to this episode.

Full disclosure, it's backed by the Kaiser Family Foundation-- the same folks behind our pals at Kaiser Health News. Which I found out when I asked Dr. Boyd for an interview.

We talked! Dr. Boyd says she's been watching Philadelphia's Black Doctor's Consortium for months.

**Rhea Boyd: As a Black health care worker in particular, I related to what they were doing. Like every black healthcare worker that I know has been trying to prop up something in the middle of systems that don't serve black folks.**

**Not just for black folks: for poor folks, for communities of color, generally, for people who are undocumented for people who don't have health insurance. I mean, Black healthcare workers have been sprinting. And to see that they're sprinting too, it just, it kind of lifts you a little bit.**

**It's like, I'm not sprinting alone.**

**Many of us have been trying to prop up things inside those systems that are equitable, that are just, that do think just about the needs of the most marginalized— and get rid of all of the other bureaucratic barriers that separate people from care that they should and are deserving of receiving. So I love watching what they're doing. I, you know, I'm sprinting alongside them and just, I'm so supportive.**

I told you we'd bring you the bad, the ugly and the good this time. I hope we've come through.

I'll catch you soon.

By the way, we are looking at some adjustments to our publishing schedule in the next little bit. To keep posted on what we're doing, you may want to start getting our newsletter—which, I've gotta say, is pretty good. You can sign up at [arm and a leg show dot com, slash newsletter](http://armandalegshow.com/newsletter). That's [arm and a leg show, slash newsletter](http://armandalegshow.com/newsletter).

Till next time, take care of yourself.

This episode of An Arm and a Leg was produced by me, Dan Weissmann, and edited by Marian Wang. Daisy Rosario is our consulting managing producer. Adam Raymonda is our Audio Wizard. our music is from Dave Winer and Blue Dot Sessions.

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This season of an arm and a leg is a co production with Kaiser Health News. That's a nonprofit news service about healthcare in america, an editorially independent program of the Kaiser Family Foundation. Kaiser Health News is not affiliated with Kaiser Permanente, the big healthcare outfit. They share an ancestor. This guy, Henry J Kaiser. He had his hands in a lot of different stuff.

Really different. He paved roads. Built a big chunk of the U.S. cargo fleet for World War II. Made cars- including the Jeep. Made aluminum foil

When he died more than 50 years ago. He left half his money to the foundation that later created Kaiser Health News. You can learn more about him and kaiser health news at arm and a leg show dot com slash kaiser.

Diane Webber is national editor for broadcast and Taunya English is senior editor for broadcast innovation at Kaiser Health News. They are editorial liaisons to this show.

Thanks to Public Narrative -- a chicago-based group that helps journalists and non-profits tell better stories-- for serving as our fiscal sponsor, allowing us to accept tax-exempt donations. You can learn more about public narrative at www dot public narrative dot org.

Finally, thank you to some of the folks who have pitched in at arm and a leg show, dot com slash support. Thanks this time to...

*[Names redacted-- we spell them phonetically in our scripts, which you don't need to see. Also, not everybody wants their name everywhere on the Interwebs.]*