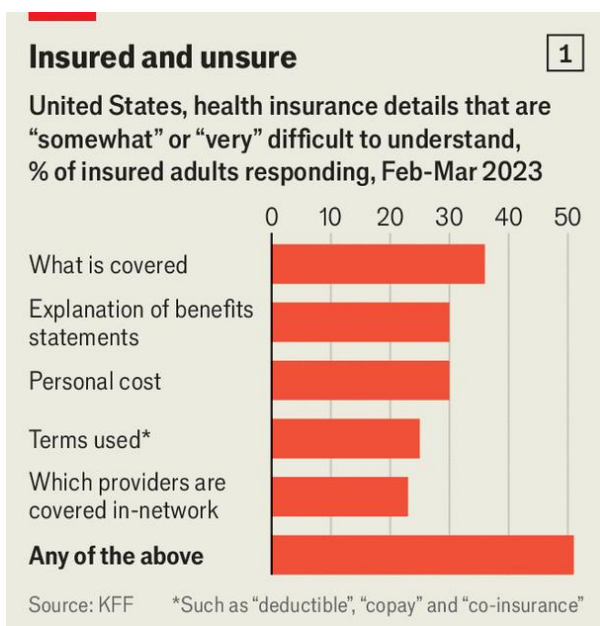


Luigi Mangione's manifesto reveals his hatred of insurance companies (*The Economist*, 12/01/2025)

The man accused of killing Brian Thompson [gets American health care wrong](#)

If his goal was to get America discussing its health-care system, Mr Mangione seems sure to succeed. In the days leading up to his arrest, three words written on the casings of the bullets used to kill Mr Thompson—"deny", "defend" and "depose"—seemingly intended to echo words used by insurance companies while rejecting claims, became a meme. [On TikTok sympathisers made out the then mysterious killer was some sort of superhero](#), with influencers singing ballads to him and getting tattoos of his face.

Certainly frustration with insurers is growing. According to a survey conducted last year by the Kaiser Family Foundation, a health policy think-tank, in the preceding year 18% of Americans were refused care they thought would be covered, and 27% had insurers pay out less than expected. Two-fifths say that they have had to go without health care because of insurance limitations. In recent years denial rates have been rising, while insurers have adopted new tactics (such as the use of artificial intelligence to make determinations) that are deeply unpopular and have produced some shocking errors. Knowing what will be covered or denied is extraordinarily difficult, even for professionals. Around half of Americans say that they are unsure how their coverage works (see chart 1). The other half are overconfident.



The tricky thing is that insurers are hardly the only villains in this story. UnitedHealthcare's net profit margin is about 6%; most insurers make less. Apple, a tech giant, by contrast, makes 25%. Insurers are forced to deny coverage in large part because the firms' resources are limited to what patients pay in premiums, sometimes with the help of federal subsidies. Yet every other part of America's health-care system incentivises providers to overdiagnose, overprescribe and overcharge for treatment, a lot of which is probably unnecessary. Many in-demand doctors refuse to accept insurers' rates, leading to unexpected "out-of-network" charges. Hospitals treat pricing lists like state secrets. America's enormous health administration costs (see chart 2) are bloated by the fact that almost any treatment can lead to a combative negotiation between insurer and provider.

America has fewer doctors per capita than almost all other rich countries, and over one in four doctors earns more than \$425,000. Yet a tight federal cap on residencies stops more being trained. And much treatment offered to Americans (and either paid for or refused by insurers) simply would not be offered at all in more statist countries. Mr Mangione's back surgery is in fact a revealing case in point. The details are unclear, including whether insurance paid for his treatment. But his Reddit account suggests that he shopped around doctors before persuading one to conduct a "spinal fusion" surgery. Elsewhere, the number of such surgeries has declined over the past decade because research shows them to be ineffective compared to simpler treatments. Yet in America the number has continued to rise.

Sadly, changing health-care policy is easier to talk about than to do. And one irony of Mr Mangione's writing is that, while it is true that American health care is expensive and often ineffective, that is not clearly linked to America's lagging life expectancy. Indeed, one notable contributor to shorter lifespans has nothing to do with doctors. That is, the 20,000 or so murders committed each year with guns. ■