

Alt-Hampshire Gazette

Read Globally, Act Locally

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GOVERNOR HEALEY HANDS MA PATIENTS OVER TO GENOCIDERS



Dr. Hussam Abu Safiya, walking toward Israeli tanks through the ruins of Kamal Adwan Hospital, northern Gaza, on December 27, 2024, the end of an 80-day siege of the hospital. During the siege, the Israeli forces murdered Dr. Safiya's 15-year-old son and many others. Dr. Safiya remains in Israeli torture prisons, held without charge. Take urgent action to free Dr. Safiya through 'Doctors Against Genocide': <https://tinyurl.com/d4s4s4cn>



Boston press conference: Governor Maura Healey, flanked on her left by Dr. Yitshak Kreiss, director general of Israel's Sheba Medical Center, announces a partnership between MA and Sheba Medical Center during a news conference at the State House in Boston, May 7, 2025. (John L. Micek, MassLive)

By Nick Mottern, Ann Sullivan, and Jennifer Scarlott

Early in July 2026, a horrific UN report was issued detailing Israel's relentless physical and mental torture of Dr. Hussam Abu Safiya. Dr. Safiya, a Gazan pediatrician and neonatologist, has been held without charge in Sde Teiman, Ofer, and now the Rakevet underground prison since December 27, 2024. Safiya's offense: his courageous leadership as director of the Kamal Adwan Hospital in northern Gaza, defying Israel's ferocious genocidal siege of the hospital in the fall of 2024.

Many hospital staff and patients were killed by the Israel Defense Forces (IDF) in this siege, including Dr. Safiya's 15-year-old son, Ibrahim, who was murdered by a drone at the doorway to the hospital. After holding out against Israeli bombardment, tank fire, and drone attacks for 80 days, and with the hospital emptied and in flaming ruins, Dr. Safiya obeyed a command from a loudspeaker mounted on an Israeli tank and walked, still in his white coat, through mounds of rubble to his waiting captors.

Governor Healey welcomes Israel's Sheba Medical Center

A few months after Dr. Safiya's kidnapping, at a press conference in Boston on May 7th, 2025, MA Governor Maura Healey, surrounded by her staff, state officials, and Israeli medical and business figures, gave a warm welcome to Dr. Yitshak Kreiss, the director of Israel's Sheba Medical Center, the largest medical facility in the Middle East. Sheba Medical Center is named for Chaim Sheba, formerly Scheiber, born in Romania. In 1935, Scheiber joined the Haganah, the main Zionist paramilitary organization fighting Palestinians during the British Mandate. He commanded the Medical Corps of the IDF from 1948-50. Kreiss has been surgeon general of the IDF and served in the IDF for 25 years, reaching the rank of Brigadier General.

The press conference was called to announce and celebrate Sheba's penetration of the Bay State's healthcare system through an arm of Sheba called Sheba ARC, an entity designed to enable Israeli businesses connected to the Sheba Center to establish themselves in other countries.

ARC stands for "Accelerate, Redesign and Collaborate." In Massachusetts, Sheba ARC has created "ARC Landing Boston" as the action center for getting Israeli healthcare firms profitably established in Massachusetts and the U.S.

The contrast between the images of Dr. Safiya being taken prisoner by the IDF amid

the ruins of his hospital in Gaza, and the posh surroundings of the Boston press conference welcoming Dr. Kreiss and his hospital, with all their interlocking relationships with the IDF, is a stark one. During the press conference — <https://tinyurl.com/yuj8zvtv> — Dr. Kreiss made strenuous efforts to 'virtue-wash' Israel's genocide via florid descriptions of Sheba Medical Center's treatment of soldiers and its humanitarian work around the world.

Healey lauded Sheba as the "largest and most comprehensive hospital system in the Middle East." And Kreiss told State House

News Service that he represented a "hospital of peace," adding that he hoped the Israel-Massachusetts collaboration would ease antisemitic sentiments in the state "by showing the beautiful face of the state of Israel."

As part of Healey's support for Sheba's presence in the state, the Massachusetts Life Sciences Center said in a letter dated March 17, 2025, that it "will commit to award Sheba ARC's associated for-profit companies... \$20,000 in incentive tax credits per net new, permanent, full-time equivalent job created in the calendar years 2026-2030, and retained for three years, up

to 250 jobs. Total Public Investment: \$5 million."

Ignoring Israeli medical apartheid

Healey and her business partners failed to mention the Israeli government's decades-long enforcement of medical apartheid against the Palestinian people. In 2019, the United Nations Committee on the Elimination of Racial Discrimination (CERD) acknowledged the inequalities in healthcare access and outcomes for Palestinians who live within Israel and Palestinians in the Occupied Territories. This slow-motion Israeli genocide accelerated with the massive, targeted destruction of the healthcare system in Gaza after October 7, 2023, which included intentional killing of healthcare workers and ambulance drivers, and the imprisonment of medical staff like Dr. Safiya.

Nothing was said, either, about why the governor feels compelled to encourage Israeli businesses to enter Massachusetts at all, given the wealth of high-tech medical research, innovation, and expertise of healthcare professionals in the state.

Follow the money: the law firm of WilmerHale

Healey worked from September 1999 to February 2007 in the Boston office of the law firm of WilmerHale, rising to become a junior partner. WilmerHale has represented firms doing business in Israel, including, for example, Medtronic and PerkinElmer (Revvity), both of which have relationships with Sheba. Other medical firms with connections to Sheba that have been represented by WilmerHale include: Zoll Medical, Roche Pharmaceutical, Exelixis, Character Biosciences, Curis Inc., CytomX, BridgeBio, and Sonoma Biotherapeutics.

From 2019 to 2024, according to Open Secrets, WilmerHale contributed a total of \$75,592 to Healey's campaign funds when she was attorney general and then when she ran for governor. The largest sum was \$34,745 in 2022, when she was running for governor. Until 2024, WilmerHale was the largest individual donor to Healey; in that year, the firm skipped to 19th largest with a contribution of \$2,500.

While WilmerHale's contributions represent a tiny portion of the \$18.6 million raised to advance Healey's political career from 2019 to 2024, its contributions are nonetheless a reminder of WilmerHale's prominence as an international law firm that employs 1,100 in

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EDITORIAL: TELL ME, DOCTOR, DO I HAVE GENOCIDE?

In this issue of the *Alt-Hampshire Gazette*, we find that Massachusetts Governor Maura Healey, much of the Massachusetts political establishment, and the managers of the state's largest healthcare businesses, are choosing to ignore, in the interest of profit, the sufferings of Palestinians, and by inference the suffering of Iranians and Lebanese, at the hands of their U.S. and Israeli attackers.

In this issue, we find, too, that Healey has little concern about the sufferings of her constituents as she continues to contribute to slow-walking efforts to establish Medicare for All in Massachusetts and enthusiastically enables the healthcare of millions of Massachusetts citizens to be profoundly influenced by Israel's Sheba Medical Center.

What does this mean for patients and medical staff at Cooley Dickinson Hospital in Northampton, which is owned by one of Sheba's apparent collaborators, Massachusetts

General Brigham (MGB)? MGB has on its Board of Trustees the prominent genocider James Taiclet, chairman and CEO of Lockheed Martin Corporation, which manufactures F-35s used by the U.S. and Israel in their illegal assaults in the Middle East.

It is clear that Healey, state politicians, and medical big shots feel free to ignore the dismal plight of those of us who do not have the level of political power and wealth that they respect; that includes Palestinians, MA healthcare workers, and MA patients.

This type of cruel, irresponsible behavior can, of course, be expected in an economic system that encourages public speculation on human suffering by even allowing the sale of stock in corporate weapons-makers and in corporations that profit from providing healthcare and so-called health insurance.

(Written by Nick Mottern, *Alt-Hampshire Gazette*)

Politics At Home — A Periodic Alt-HG Column

The Alt-Hampshire Gazette editors believe it is important that we report from time to time on domestic political goals that would improve the well-being of all. The article below is the first in this series.

Healthcare is a Necessity and a Right: We Demand Medicare for All in MA

by Dr. Shelly Berkowitz

We in the U.S. spend \$15,000 per person annually for healthcare (the highest per capita in the world), yet why are so many people in this country unable to access medical care even if they have health insurance?

Why are we the only country in the world where people go bankrupt due to medical debt (a leading cause of homelessness)?

Why does the U.S. have a significantly

higher infant and maternal mortality rate — much higher than in poor countries that spend far less for healthcare (Cuba, for example)?

Why has the lifespan in the U.S. gone down (77 currently versus 84 in Japan)?

Why does Massachusetts have the highest family health insurance premiums in the country, according to the Massachusetts Health Policy Commission?

Continued on page 2...

Gov. Healey Continued...

12 offices in the U.S. and Europe. It is also a lucrative landing pad for politicians upon their retirement from politics. Apparently, it was a launch pad as well, in Healey’s case.

Editors’ Note:

On August 5, 2026, the editors of the *Alt-Hampshire Gazette* (a newspaper of River Valley for Palestine) sent an email message to each of the following individuals asking them to send any comments that they might have with respect to the accuracy of our reporting in this article. To date, we have no response from any of these individuals.

- Jacqueline Manning, Press Secretary, Governor Maura Healey
- Felicia Ellsworth, Partner in Charge, WilmerHale Boston office
- Dr. Eyal Zimlichman, Chief Transformation Officer and Chief Innovation Officer, Sheba Medical Center and Director and Founder, ARC Innovation
- Dr. Anne Klibanski, President and CEO, Mass General Brigham
- Dr. Benjamin Ebert, President and CEO, Dana Farber Cancer Center

In Massachusetts, it’s hard to separate healthcare, weapons manufacture, and Israeli business interests

It’s worth noting that WilmerHale also has represented major U.S. weapons makers, including Boeing, BAE Systems, Lockheed Martin, Northrup Grumman, RTX (formerly Raytheon), and L3Harris Technologies, all of which have facilities in Massachusetts. All make massive profits supplying weapons to Israel for use in its genocide against the Palestinian people.

In another shocking link between Massachusetts’s healthcare establishment and the genocide in Gaza, a look at the Board of Trustees of Massachusetts General Brigham (MGB) reveals the presence of James Taiclet, Lockheed Martin CEO and Chairman of the Board. Lockheed manufactures, among other weapons systems, the F-35s that have laid waste to Gaza and taken countless lives. (See <https://afsc.org/gaza-genocide-companies>)

In October 2025, Healey announced the creation of the \$47 million Massachusetts Strategic Hub for Innovation, Exchange and Leadership in Defense (SHIELD) project. Through SHIELD, Massachusetts taxpayers indirectly subsidize weapons makers in Massachusetts profiting from the Israeli-U.S. genocide in Gaza.

“Our defense sector is a cornerstone of our economy, supporting thousands of jobs and generating billions in economic impact,” said Healey. “Today, in partnership with defense sector leaders from across the state, I’m taking action to strengthen our national security leadership, expand advanced manufacturing, and create more high-quality jobs for

Massachusetts workers.”

Again, no mention by Healey of the Israeli genocide.

Sheba’s love affair with AI

Getting back to Sheba ARC, it is important to note that Sheba Medical Center has been at the forefront of using artificial intelligence (AI) in its healthcare system. Sheba ARC will be permitted, via its agreement with the state, to allow its companies in MA to have access to a variety of patients and hospitals on whom and for which they can test and sell their medical products.

The emphasis on AI alone is concerning, given the questions about human ability to control AI, its uncertain accuracy, ambiguous confidentiality, and security. Another concern is the potential danger to the jobs of countless doctors and nurses within the Massachusetts healthcare system, and the rising environmental cost of the technology.

And, it appears, Masschusetts’s Sheba firms’ patients might be considered medical guinea pigs. Yahoo Finance reports:

“Professor Eyal Zimlichman — who serves as deputy director general, chief medical officer,

chief innovation officer, and ARC co-founder at Sheba Medical Center — told MassLive that patients in Massachusetts will have the opportunity to experience the technologies before the rest of the world, as the companies will need to test and deploy their work with local hospitals and providers.”

Northampton’s Cooley Dickinson Hospital

Mass General Brigham, which owns Northampton’s Cooley Dickinson Hospital, is connected with Sheba ARC through MGB physician Dr. Yonatan Keschner. Keschner heads Sheba’s ARC Landing Boston, which opened early this year and, as noted earlier, is intended to provide a promotional base for Sheba-promoted firms.

In July 2026, Sheba’s ARC Landing Boston signed a memorandum of understanding with Boston’s Dana Farber Cancer Institute “to evaluate potential joint initiatives in AI-enabled cancer care, digital health technologies, and other areas of shared interest.”

Sheba’s work with MGB and Dana Farber, alone, might provide it with access to detailed

health information of about 3 million Massachusetts patients, 2.6 million from MGB.

Sheba Out of MA

Because of many of the issues noted above, “Sheba Out of MA” was launched in 2025 by Boston Democratic Socialists of America (DSA), Healthcare Workers for Palestine, Jewish Voice for Peace Boston, Massachusetts Peace Action (MAPA), and others. (See <https://shebaoutofma.com>) The coalition’s website says:

“Sheba ARC’s presence in Massachusetts and partnership with the Healey administration deepen the Commonwealth’s financial and institutional ties with Israel, intentionally laundering Israel’s reputation and bolstering its economy while it starves and slaughters Palestinians en masse... **Greater Boston and Massachusetts should be divesting from, not investing in, the genocidal state of Israel.**” (DSA’s emphasis)

Additionally, Healey opposes the Boycott, Divestment, and Sanctions (BDS) movement that provides information to the public on retailers and other firms doing business with Israel. This is in contrast to U.N. Special Rapporteur for the Palestinian Territories Francesca Albanese, who, in a 2025 UN report, urged “trade unions, lawyers, civil society, and ordinary citizens to press for boycotts, divestments, sanctions, justice for Palestine, and accountability at international and domestic levels; together we can end these unspeakable crimes.”

It is telling that the Massachusetts-Sheba collaboration is also occurring in the context of the largest nursing strike in Massachusetts history, where MGB nurses went on strike (returning to work, without a contract, on July 15, 2026) to demand better wages, affordable insurance, and better patient care. And notably, Governor Healey is hardly an avid advocate of Medicare for All (see article by Dr. Shelly Berkowitz).

Instead of directing funds to essential workers and to patients, Healey is focused on giving tax breaks to Israeli innovation companies positioned to take highly profitable advantage of the profoundly corrupt, high-cost U.S. healthcare system.

This is happening within the national context in which the U.S. Senate is preparing to vote on Section 1217 of the National Defense Authorization Act (NDAA); it would “expand and accelerate bilateral defense technology research, development, testing, evaluation, integration, and industrial cooperation” between the United States and Israel.

Meanwhile, Dr. Safiya and many other Palestinian healthcare workers are imprisoned and tortured, without charge, in the wretched, very separate world of Israeli occupation prisons.

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Boston DSA (Democratic Socialists of America) 'Sheba out of MA' campaign protest (<https://shebaoutofma.com>), MA State House, Boston. (Photo: Boston DSA)

Medicare for All Continued...

The answer: The U.S. does not have universal healthcare – also known as single payer. We don’t have Medicare for All. The U.S. is the only high GDP country that does not provide some form of universal health care to its citizens.

How does this relate to the U.S. (and Massachusetts as well) spending so much on healthcare? ANSWER: corporate greed.

Every year in the Massachusetts Legislature, the Medicare for All bill (H.1405/S.860) has been prevented from passing out of committee. It is sent instead “for further study,” the euphemism for killing a bill.

This year, however, there has been a slight bit of progress, with the July 23, 2026, referral of the Medicare for All bill from the House Committee on Health Care Financing to the House Ways & Means Committee. It has been redrafted to establish a special commission to investigate single-payer models, feasibility, and system costs. Northampton’s State Representative Lindsay Sabadosa, a member of both Health Care Financing and Ways &

Means, was a major force in advancing the bill.

Supporters of the bill would have had to win passage in Ways & Means and then in the legislature, however, the bill’s progress stopped with the end of the legislative session on July 31, 2026. The bill will be back at step 1 of the process next year. Rep. Sabadosa said the progress this year may help clear hurdles next year.

Supportive legislators must continue to fight against the buckets of healthcare industry money donated to powerful legislative leaders in return for their appointing compliant committee heads. Those committee heads block needed legislation while passing corporate “band aid” bills that will not solve our healthcare system implosion. There is currently a major fight in Massachusetts to fulfill the complete audit of the legislature (which 72% of Massachusetts voted for).

Massachusetts Governor Maura Healey, who has opposed Medicare for All, took a reluctant baby step toward shifting her position in a July 29, 2026, radio interview. In answer to a question, Healey said: “I support a universal health care model,” and then said: “It’s not the model that we have in this country.”

“She then pivoted,” the Boston Globe reported, “to well-worn talking points about the measures she’s taken to temper the state’s rising healthcare costs, touting her support for ‘universal health care’ and underscoring the goal without embracing the slogan that’s more of a political lightning rod.” That slogan: “Medicare for All.”

During 2022, when Healey was running for her first term as governor, according to Open Secrets, various healthcare insurance and other lobbying groups contributed a total of \$224,010 to her campaign. Her total campaign contributions in 2022 came to \$12.3 million.

In Massachusetts, a sound financial analysis of the proposed Medicare for All bill (H.1405/S.860) shows that the Massachusetts Healthcare Trust Fund, plus a payroll tax, would cost far less than the current premiums, deductibles, copayments, and cost-sharing that individuals and employers currently pay without being able to access or afford actual healthcare!

If the MA Medicare for All bill passed, EVERY Massachusetts resident would have wraparound medical care – hospital and

outpatient, skilled nursing facility, labs, x-rays, vision, hearing, and dental – without prior authorizations, pre-existing conditions, limiting provider or hospital networks, and regardless of employment or retirement status.

MA Medicare for All would not require the support of the federal government. It would significantly help relieve the primary care physician shortage by eliminating most of the onerous administrative burdens of prior authorizations and inefficient multi-corporation billing requirements, as well as enabling a faster, more equitable, and consistent physician single payment structure.

The city of Northampton would save \$7.5 million annually on healthcare for its employees and retirees if the state passed Medicare for All, not including the savings to individuals or businesses spent on healthcare. In June 2025, the Northampton City Council unanimously passed a resolution that I wrote in support of passing Medicare for All in Massachusetts. If Medicare for All passed, Northampton could then use the money saved for crucial services for all its residents – services that are currently underfunded, including our public schools.