



LWVofPWM Proposed Concurrence

At its September Board meeting, LWV of PWM approved holding a meeting to determine whether our League should concur (by consensus) with a portion of LWV of Vermont's Privatization position. The proposed position for concurrence (shortened by 75% to eliminate unneeded commentary and re-sequenced to ensure clarity) is in blue:

The LWV of PWM believes that healthcare, like other programs that provide and protect basic human needs, should be considered a public good. The League favors a system where fiduciary responsibility (for such programs) is to patients and the public.

Because private for-profit corporations have a fiduciary responsibility to their shareholders rather than to patients or public health, the League believes the for-profit business model for healthcare is inappropriate for the common good or to meet the basic needs of the most vulnerable members of society.

In sum, the League opposes further privatization of needed healthcare. Where private entities fail to deliver programs that provide and protect basic human needs, the League supports de-privatizing them.

There is precedent for adopting a partial version of a state's position:

- LWVUS adopted only 46% of the NY Healthcare positions in 2022
- LWVUS adopted only 63% of the CT Digital Equity positions in 2022
- LWVNM adopted (and reworded) CT and TN positions on Media in 2018

Reading materials to learn more are available on the PWM website (Calendar: Nov 14, 2024)

1. Participant's Guide
2. Proposed position to concur with (or not) & FAQ— this document
3. Other relevant League positions (excerpt from Vermont Study Report)
4. Fiduciary Duty (excerpt from Vermont Study Report)
5. LWV NY Healthcare positions
6. LWV US Privatization position
7. Additional news articles, research reports, LWV VT Study Report

What will happen at the November 14 Concurrence Meeting?

League members will be asked to discuss and reach consensus on each of the 3 sections of the position. Discussion of each section will include other League positions that align with it or support it and examples of how it might be applied. These are detailed in the Participant's Guide. The League uses consensus as a process to find common ground, not to stake out individual positions, in an effort to determine the "sense of the group" to move toward action.

LWV of PWM Concurrence with Vermont Privatization Position

FAQ

What does "Concurrence" mean?

It allows a League (in this case LWV PWM) to adopt a position of another League, when that League has studied the issue, reached consensus on the language of the position, and formally adopted the position, all according to League rules — **as Vermont has.**

What is a "position"?

A position is a public policy statement; LWVUS and LWVNY positions are in *Impact on Issues*. Local Leagues use their own, their state, and national League positions to advocate for or against specific legislation and regulations. Positions are not written to support specific bills but to provide principles for supporting or opposing legislation or regulations. Leagues use positions to determine whether to advocate. Having a position allows a League to advocate but does not require a League to advocate. Not having a position precludes a League from advocating on that issue. Sometimes, a new position is needed to clarify an existing position or inconsistent interpretation of a position, as is the case for this concurrence with Vermont.

How would concurring with Vermont change what PWM can advocate for/against?

- 1) **Concurrence would add "healthcare" to PWM's list** of what the US position lists as services essential "to preserve the common good, to protect national or local security or to meet the needs of the most vulnerable members of society."
- 2) **Concurrence would allow PWM advocacy (accountability) if PWM determines that privatized management or ownership of services essential to the common good has not delivered on its promises** (e.g., equal quality and access for lower cost).
- 3) **As a local League, PWM** could only use this position for legislative bodies within its local area, but it could also encourage other NY Leagues, including NYS, to concur, potentially updating the LWV of NYS position in June 2025 or before.

What local issues might this position apply to?

- Current discussions of municipalizing the non-profit LIPA/PSEG might benefit from League [research](#) into Massena Electric (NY), Emerald PUD (OR), Winter Park (FL)
- Similarly, water in Nassau County is owned by public and private companies; research might show profit-seeking reducing sustainability of this essential resource.

What NYS issues might this position be used for, were LWVNY to adopt it?

Legislation such as those bills introduced in recent sessions to

- Prohibit new for-profit hospices, nursing homes, hospitals — evidence associates with higher costs, increased adverse events (e.g., bed sores, falls), and earlier deaths.
- For NYS to reimburse providers of **Medicaid Managed Long-Term Care** services directly (not using for-profit MCC companies as intermediaries): Connecticut deprivatized Medicaid¹ entirely; ten-year benefits include significant savings, improved quality of outcomes, improved accessibility and equity.
- Authorize NYS Dept of Health to license manufacture of generic drugs to provide a stable source of at-cost supply of most prescribed drugs for Medicaid and Essential Care
- Require all healthcare-providing entities to be fully transparent about their ownership, to ensure conforming to current regulations excluding for-profit owners/investors

¹ Connecticut deprivatized Medicaid entirely; 10-yr benefits include savings, improved health outcomes, accessibility and equity: <https://pnhp.org/news/connecticut-medicaid-prospers-post-capitated-managed-care/>