



The League of Women Voters of Vermont (LWVVT) would like your League to support our request to have a discussion of our privatization position on the recommended agenda for the LWV National Convention in Washington, DC, this June.

The League of Women Voters of Vermont believes that the national position on privatization is not sufficient to support the advocacy needed to protect our health care resources.

The LWVUS position does not include health care as a public good, even though:

- health care for the elderly and disabled, children, and the poor has been generally recognized as a public good for decades
- an unfunded federal mandate requires hospitals to provide emergency care, regardless of ability to pay, which places the burden of payment on the rest of the public, and
- the LWVUS *Meeting Basic Human Needs* position includes health care as a basic human need for which government should bear the financial responsibility for those unable to afford it themselves.

In addition, though Vermont found the criteria for choosing whether to privatize a public good to be well-crafted, the LWVUS position did not address what should be done if a private entity providing a public good failed to meet those criteria.

Further, the national position was created in 2012. Much has changed and much has been learned since then. So we felt the need for a fresh study of privatization and, perhaps, a new state position to supplement the national position.

After months of study and a consensus meeting, the League of Women Voters of Vermont Board of Directors approved a new position. Then, at a special convention, members voted unanimously to adopt the position.

Our state position allows us to not just educate but also advocate at the local and state levels. However, we still cannot adequately address the privatization of Medicare because it is a federal program, and advocacy at the national level requires a national position.

For this reason, and also to allow League members across the country to benefit from the work of our study, we would like to propose an [update](#) to the national privatization position by adding the language of our state position via concurrence. We would like your help getting this proposal on the agenda for the June convention as a recommended item. On a separate sheet, or at this [webpage](#), you will find instructions on how you can support updating the LWVUS privatization position. Please contact us at [lww.vt.update@gmail.com](mailto:lww.vt.update@gmail.com) with questions and comments.

Sue Racanelli, President  
League of Women Voters of Vermont

[lww.vt.update@gmail.com](mailto:lww.vt.update@gmail.com)



## PROPOSED VERMONT CONCURRENCE STATEMENT

### LWVVT Update to LWVUS Position on Privatization<sup>1</sup>

The League of Women Voters of the United States believes that health care, like other programs that provide and protect basic human needs, should be considered a public good. The League believes that public funding, oversight, and delivery of essential health care services (including tests, treatments, facilities, etc.) are necessary to optimize equity and access (including for racially, economically, geographically, and other underserved populations). Similarly, quality, transparency, accountability, and affordability are critically necessary for effective administration. Further, the League supports public oversight of all aspects of health care from policy-making to administration to accountability, and public participation in policy-making and accountability, as essential.

The League believes the current private-enterprise, for-profit business model for providing health care is inappropriate for the common good, or to meet the basic needs of the most vulnerable members of society. It is not working for most Americans, their providers, or their communities in the following ways:

- Private for-profit corporations have a fiduciary responsibility to their *shareholders* rather than to patients or public health. The League favors a system where fiduciary responsibility is to patients.
- Health care is not discretionary spending where consumers can choose what product or service, which brand, and how much to purchase. Patients do not have perfect information, and they are usually not able to make decisions and seek care based on comparison shopping. The League favors a system that ensures that patients needing health care have those needs assessed based on “standards of care,” offered equitably and constrained by public policy rather than the patient’s ability to pay.
- Lack of a profitable market for providers can create health-care deserts in poor or low-population areas. The League favors a system where all communities have access to quality basic health care because this will improve both individual and public health.
- Free market principles require that anyone who benefits from a service must pay for it, and anyone who does not pay for it should not benefit from it. The League favors a system where health care needs are met regardless of a patient’s ability to pay because this will improve our longevity, and general welfare.
- People do not consume health care on a supply-demand curve. A person without a disease has no interest in purchasing treatment for that disease even if it is free. A person whose child’s life depends upon a standard treatment should not have to forego their child’s care because its purchase price is beyond their means. In addition, patients cannot legally vary the amount of a prescribed product they purchase based on price, nor would such variation typically serve their health.

In addition, the League supports health care as a public good for fiscal reasons. Our current multi-payer, multi-layered system contains significant financial waste, including excessive administrative costs and misdirected marketing costs that create additional barriers to care.

Therefore, where private entities fail to deliver, the League supports de-privatizing.

In sum, the League opposes further privatization of needed health care and favors de-privatization of services and facilities that are currently owned, managed or financed by for-profit corporations.

<sup>1</sup> Black text has been excerpted exactly from LWVVT position. References to VT have been generalized, with adjusted wording in blue.

## How to Support Updating the US Privatization Position by Adding the LWV Vermont Concurrence Statement

Please share the Vermont Concurrence Statement with your LWV Board as well as the two “asks” regarding how to fill in the LWVUS Program Planning survey.

**1. First Ask: Agree to publicly support putting the [Vermont Concurrence on the 2024 LWVUS Convention Agenda](#)** — so we can add your League to the supporting Leagues on our [Vermont Concurrence Webpage](#). If your board passes it, use this email, [lww.vt.update@gmail.com](mailto:lww.vt.update@gmail.com), to inform LWVVT.

**2. Second Ask: Put your support into the LWVUS Program Planning Survey** (due by March 10) — Note: Your recommendation to put the concurrence on the Convention agenda does NOT commit your delegates to vote in favor of the concurrence. They will be offered education on the concurrence before and during the Convention so they can make up their own minds. Should you want to review pros/cons, study materials, and rationale being offered to LWVUS, they will all be available on our [Vermont Concurrence Webpage](#) soon.

### Here’s more detail on the second ask — be sure to read instructions!

If your League decides to support discussion of this at the Convention, please complete the online-only LWVUS Program Planning Survey using ALL the specific language in the box so they know exactly what you are recommending and why.

#### Option A:

Question 9: Yes

Question 10: Social Policy

We support putting “[Concurrence at LWVUS Convention: Update the US Privatization position by adding the Vermont position](#)” on the agenda for discussion and voting.

Concurring with this LWVVT language at Convention will update the LWVUS position without requiring any outlay of resources by either local Leagues or LWVUS. It will support our DEI efforts by allowing Leagues to support reforms to our health care and other systems that will benefit racially, economically, geographically, and other underserved populations. Affordable access and public control over health care services is a concern for a majority of Americans.

#### Option B:

Question 16: [Use the exact language in the box above to type into the question box].

#### Critical Instructions:

Each League may complete the LWVUS survey once. It must be completed in one sitting and, once started, it cannot be edited —and **IT MAY TIME OUT** while you are filling it in. Only completed surveys will have any answers considered. Because of these issues, the LWVUS [2024 Instructions](#) advise Leagues to draft all answers in a Word document in advance to allow rapid copy/pasting into the online form. To facilitate this advance drafting, LWVUS offers a [PDF version](#) to use for drafting answers, before you open the online survey.

**Submission deadline: March 10, 2022.** Email questions: [progplan@lww.org](mailto:progplan@lww.org).