

At a Special Convention on December 14, 2023, the League of Women Voters of Vermont (LWVVT) adopted a new position on privatization with the key statements: *“The League of Women Voters of Vermont believes that healthcare, like other programs that provide and protect basic human needs, should be considered a public good,”* and *“where private entities fail to deliver, the League supports de-privatizing.”* The full text of the new position, listed below, can be found at <https://lwvofvt.org/positions/position-on-privatization>.

Chapter 1

VERMONT POSITION ON PRIVATIZATION

The League of Women Voters of Vermont believes that health care, like other programs that provide and protect basic human needs, should be considered a public good. The LWVVT 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.

LWVVT 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 LWVVT 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 LWVVT 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 LWVVT 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 LWVVT 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.

Adopted at Special Convention, December 14, 2023