

**These four elements of the PWM Update seek to clarify state and local League confusions about the LWVUS position and to make explicit associated interpretations of the position that LWVUS has used in its federal advocacy:**

<b>PWM Update Element</b>	<b>US Interpretation</b>	<b>Comments</b>
1. Adds "healthcare" to the list of public (or common) goods (whose access is essential to "protect and provide basic human needs"). <sup>1</sup>	LWVUS staff: healthcare is a public good (6/24) Impact on Issues, pp. 82-83 & 90-91, 170, defines HC as a basic human need where lack of access harms vulnerable and marginalized populations	Q: What does "HC" entail? A: Review the LWVUS Health Care position.
2. Makes accountability for "failure to perform" explicit, up to and including "de-privatization."	LWVUS staff: accountability is implicit in every position (6/24)	Q: Does this mean the League must advocate to de-privatize a private entity that fails to perform? A: No. Having a position allows advocacy; it does not require advocacy.
3. Adds "fiduciary responsibility" as a standard for determining "failure to perform."	LWVUS signed onto a letter to the FTC, DOJ, and HHS on June 4, 2024, regarding the consolidation of healthcare markets, writing that "maximizing profits above all" is "incompatible" with <i>"The essence of health care — an ethical commitment by autonomous, highly trained professionals to the improvement and well-being of their patients and clients"</i> <sup>2</sup>	The primary duty of private for-profit corporations is to maximize returns for their investors. When private entities take on management and/or delivery of public goods, that duty to investors must be constrained by <b>fiduciary duty</b> to the public; e.g., constraints may include more <b>transparency and public oversight</b> than what's legally required for private entities and/or <b>profit caps</b> could be <b>agreed in advance</b> by the controlling public jurisdiction. <sup>3</sup>
4. Adds "opposes further privatization of needed healthcare."	LWVUS signed onto a letter to the FTC, DOJ, and HHS, June 4, 2024, writing: <i>The health care system functions best when everyone has adequate access to care and decisions are made in the best interest of patients and communities, rather than owners and investors seeking to maximize financial return.</i> <sup>4</sup>	Healthcare is currently <b>the most privatized</b> of American public goods. Public funds (that is, taxes) are increasingly siphoned into corporate profits (and operations) and away from delivery of healthcare. Unlike every other developed country, which all provide universal healthcare, Americans <b>pay more in taxes</b> for HC despite having less access and far more out-of-pocket costs (premiums, co-pays, deductibles, etc.).

<sup>1</sup> Privatization position (2nd ¶) in LWV Impact on Issues 2024-26, p. 76): [www.lwv.org/sites/default/files/2024-12/ImpactOnIssues\\_2024-FINAL-DIGITAL.pdf](http://www.lwv.org/sites/default/files/2024-12/ImpactOnIssues_2024-FINAL-DIGITAL.pdf)

<sup>2</sup> Found at [www.lwv.org/health-care-reform/league-joins-comments-regarding-consolidation-healthcare-markets](http://www.lwv.org/health-care-reform/league-joins-comments-regarding-consolidation-healthcare-markets).

<sup>3</sup> See, for example, bullets 6,8,9,10 & 11 on p.76 of Impact on Issues, [www.lwv.org/sites/default/files/2024-12/ImpactOnIssues\\_2024-FINAL-DIGITAL.pdf](http://www.lwv.org/sites/default/files/2024-12/ImpactOnIssues_2024-FINAL-DIGITAL.pdf)

<sup>4</sup> Found at [www.lwv.org/health-care-reform/league-joins-comments-regarding-consolidation-healthcare-markets](http://www.lwv.org/health-care-reform/league-joins-comments-regarding-consolidation-healthcare-markets).