

## The League and Health Care Reform

In her June 4 letter for League leaders, LWVUS President Mary Wilson reaffirmed that the LWVUS health care position as stated in *Impact on Issues* has not changed. Arrived at after a two-year study and consensus in April 1993, the position reads, in brief: **Promote a health care system for the United States that provides access to a basic level of quality care for all U.S. residents and controls costs.** That is essentially where we are today.

In May of 1993, The League of Women Voters of Florida adopted the program, **“Support measures to implement Florida health care reform in a manner consistent with LWVUS positions on health care reform.”** (See *Study and Action*)

Although competing groups seem to want the same end, access to health care for all and controlled costs, it is hard to predict the outcome this year. President Obama, calling on Congress to pass comprehensive legislation by the end of this year, has said reform must ensure a public health option alongside private plans, a reduction in basic costs, and assurance that no one is denied insurance.

The League favors **universal health care through a national health insurance plan financed through general taxes in place of individual insurance premiums.** Commonly known as the “single payer” approach, League’s position is however, more expansive than the currently proposed plans, according to Mary Wilson. Even when the position was adopted in 1993, League members stated that “it could take several phases before we reached a single payer system and that **meanwhile, an employer-based system of health care reform that provides universal access is acceptable to the League.**

The Obama Administration does not support moving to single payer at the present time. Therefore, in order to bring the League to the table, the LWVUS Board wants to advocate for those parts of our position that will lay the foundation for single payer in the future. LWVUS supports coverage for everyone that **includes the prevention of disease, primary care, acute care, long term care, mental health care, and prescription drug coverage, and allows for pre-existing conditions, computerization of medical records, a system-wide program to coordinate information and establish best practices, including providing comparative data on treatments and medical outcomes; cost containment measures and so on.**

Several state Leagues are calling on National to change its stance and come out in support of single payer, arguing that the position arrived at in 1993 allows for that. However, since single payer has not been on the table in congressional committees working on health care reform, LWVUS is taking the approach of advocating for the important, basic elements of our position. To try to follow the action as it begins to heat up is not a simple task. The internet and national talk shows are busy with arguments from all sides, but, primarily the issues are government health insurance versus private health insurance and how to pay for it in either case.

LWVUS has an informative Health Reform Education site accessible from [www.LWVUS.org](http://www.LWVUS.org). The subject is discussed on the LWV Topics listserve and in a LWV Health Care Digest which has a running commentary on current activities (both of these exist for members to share opinions). Opposing views can be found on several websites. The New York Times has an informative page that has so many links, it can keep one busy for hours. One of the most comprehensive web pages is that of the Henry J. Kaiser Family Foundation, [www.kff.org](http://www.kff.org). Click on *Health Reform* and find an excellent side-by-side chart of major health care reform proposals.

President Obama considers bipartisan support essential to achieving the goal of health care reform this year. He has not addressed any of the alternative proposals on Capitol Hill specifically, but he is appealing for cooperation between Republicans and Democrats to ensure that health care reform doesn’t die on the vine. Details to be worked out are not minor: what

would a “public option” look like?; will tax deductions for the wealthiest families be rolled back to help pay for the estimated \$1.5 trillion cost to provide care to the (also estimated) 45-50 Americans who are currently uninsured?; will a portion of employer-sponsored health care benefits be taxed?; will there be cuts in funding to Medicare and Medicaid? One touchy subject is an “Individual Mandate”, a concept that supporters say is necessary to achieve universal health care.

Meanwhile, LWVUS is communicating with the relevant legislative committees and sending action alerts to members urging them as individuals to contact their own congressmen to ask for support of the stated components of League position. Stay tuned.

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