



HEALTHY PEOPLE



HEALTHY DEMOCRACY

December 19, 2022

LWV Health Care Reform for the US Caucus Newsletter

Reaching Out to a Broad Spectrum

December is when HCR4US sets a goal to lay the groundwork for January program planning--much like last year, but this time looking toward state conventions next spring. We recommend reaching out to as many local Leagues as possible to promote program topics within the broad umbrella of healthcare--whether it's reproductive health, mental health, prison health, environmental health, or the alarming corruption in private equity health systems.

A recent [Pew Research Center report](#) based on their "political typology quiz" found that unlike at the ends of the political spectrum, at least a third of participants were ambivalent and held a mix of attitudes on a range of topics drawing from both right- and left-leaning ideals. With this in mind, we added to our online Toolkit several models for "speaking beyond the choir" to a broad audience (3 [surveys](#) and two slide summaries).

In this regard, the survey from Oregon offers an advantage because its author, a retired business executive, positions himself "in the red." He very specifically recruited participants from Congressional districts represented by a Republican and districts represented by a Democrat.

After a warm-up about participants' general attitudes and experience, the survey asked "Do you think universal health care in the U.S. is desirable?" (75% yes). For the critical question of whether the participant would support or oppose a single-payer system, the survey didn't use the term

"Single Payer." Instead, the question *described* a plan like the one envisioned in M4A/Single Payer bills (especially HR1976): a proposal that "would establish full, lifetime health care -- including vision, dental and hearing for every person in <our state>. Under this plan, you would pay no direct medical costs -- that is, no private insurance premiums, co-pays or deductibles. Instead, you would pay a new state health care tax, and a state agency would pay all medical costs."

Before a follow-up question, the survey stated that in <their state>, households and businesses currently spend over \$16 billion per year on health care, compared to the amount raised by the state's income tax, \$6 billion. Then the question: Would you "be inclined to--definitely or probably--support or oppose" paying 2 to 3 times more in taxes for such a system--so everyone in the state would have healthcare--if the tax for a typical household was less than what they were currently paying in total for premiums and health care expenses?

As the Pew study would predict, 22% said they would definitely support and 22% said they would definitely oppose it. However, even with the huge tax hike, the percentage "likely to support" was 64% in the blue districts and 60% in the red districts. Not only were the right-leaning participants willing to entertain questions about a state-funded program of universal care, their support feels stronger because the research can assure us it was not just from one side of the aisle.

- Health Care in Program Planning**
- Reproductive Health
 - Mental Health
 - Environmental Health
 - Prison Health
 - Private Equity Effects on Health

Emphasize the Negative

Giving a talk to an unfamiliar group, it is customary to start with a lame joke and a personal story to create a connection. Then, when we pivot to persuasion, we should take advantage of the deep-seated tendency for people to find bad news more interesting and compelling than good news. Physicians for a National Health Program (PNHP) advocate Dr. Ed Weisbart demonstrates this with an economics [thought-experiment](#): He wants to get you to bet on a coin toss where you lose \$10 for heads. Then asks: "How much do you need to gain on tails for you to play?" [please pause and answer the question]

Weisbart reports [that] the most common answer is twenty dollars. That is, **losses count twice as much as gains**. People don't like to lose what they have more than they want to gain what they don't have. He calls it "loss aversion" and recommends we apply it to find common ground in our [messaging](#).

Gain Centric Messages	Loss Centric Messages
<ul style="list-style-type: none"> • Save money for the other things you want. • See any doctor you want. • Live longer and healthier. 	<ul style="list-style-type: none"> • Stop wasting your money. • Why should insurers pick your doctor? • Don't die younger than you need to.

NEXT MEETING

Sunday, January 8
 8:00 p.m. ET
 5:00 p.m. PT
 Register at
<https://tinyurl.com/HCR4US-Jan8>

Tentative Agenda:
 Intros for New Attendees
 Announcements
 Program Planning
 Education/Advocacy
 Break-out Sessions

In Case You Missed It

<https://youtu.be/TY0X6roEXzs>



A CBS News report (12/6/22) investigates the closure of a community safety-net hospital after its "rescue" by a private equity firm that netted almost a billion dollars in profit in the process.

Jeanne Nicholson, RN, MS: Speaking to Conservatives about Health Care

https://docs.google.com/presentation/d/18Ej0s7jAvTdV4UUEQck_PATi_EORYDLa/edit#slide=id.p1

Websites

HCR4US Youtube Channel:

<https://www.youtube.com/c/LWVHealthCareReform>

HCR4US Web-Contact Form: tinyurl.com/Contact-LWV-HCR-4US

HCR4US Google Drive:

<https://tinyurl.com/HCR4US-Dec4-Minutes>

HCR4US Toolkit:

<https://lwvhealthcarereform.org>



HCR4US: Dedicated to educating and mobilizing League members to work toward legislation that enacts the goals of our LWVUS health care position
Newsletter Committee: Barbara Pearson, Jon Li, Candy Birch, Kathy Yen, Tom Cherry, Jody Disney

Reclaiming the "Public" in Public Health

As a condition of receiving reimbursement for services, US Medicare law requires every hospital to do a Health Needs Assessment to identify significant issues and then create a Health Improvement Plan. In a majority of the 3,000 counties in the US, hospitals have partnered with their county health departments to coordinate the process.

Similarly, State Health Needs Assessments and Health Improvement Plans lay out the current major issues in the state's health politics.

Many of the significant needs that are identified by this self-study process arise because of the limits of hospital-oriented care, which is prioritized by health insurance. As a result, requests for funding by primary care providers are often rejected, while hospitals and medical specialties get two-thirds of the funding. In Europe primary care is awarded half of the funding, a ratio between primary and specialty care that achieves much higher standards of care and better health outcomes, while also managing costs.

Your County Health Department website should be able to introduce you to how the county sees the current health challenges and how you can find out more.

Leagues at Work with Public Health: Delegates at the LWV-WA Biennial Convention voted unanimously to approve the *Public Hospital District (PHD) Civics Education Project*. Understanding the kind of healthcare offered by the 58 existing PHDs in Washington will help identify what the project team will tackle first. Only 44 PHDs have hospitals; however, a PHD may also provide services not being offered by a hospital such as hospice or emergency care. Data about PHD legally-approved services will be collected. Local League awareness of how PHDs are managed will allow Leagues to better provide education to community members regarding what healthcare options are currently being offered and what needs to be improved or added.

The goal of the project, influencing healthcare service decisions through commissioner elections and citizen presence at PHD meetings, fits nicely within LWV's wheelhouse of well-informed citizen voters.

Gun Safety Is Health Care Too!

By 2020, guns surpassed motor vehicle accidents as the leading cause of death in children and youths in the U.S. [Forbes]. Preventable firearm-related injury and death--whether from intentional assault, accident, or suicide--threaten physical and emotional health, with devastating short- and long-term impacts on families, and communities.

LWVUS has joined with many other groups, including the American Academy of Pediatrics, American Women's Medical Association, and the American Nurses Association, in calling for common sense gun safety reform. On June 22, 2022, Congress finally responded with the Federal Bipartisan Safer Communities Act. The new law provides tools for prosecuting gun traffickers and expanding mental health services. Because legislation varies across the states, continued advocacy for gun-related reform is necessary to ensure the health and safety of everyone, especially our children.

