

LWV Health Care Reform for the US Newsletter

Healthcare medical debt causes, prolongs homelessness

Homelessness and healthcare are deeply intertwined. Because the healthcare system in the US is particularly cruel, it too often plays a part in people losing their homes. It allows those unfortunate enough to become seriously ill and then to become bankrupt because they

lack insurance or cannot afford steep deductibles and copays. Even folks who have plenty of good insurance end up in bankruptcy. Of 35 industrialized peer nations the <u>United States is the</u> <u>only one</u> that forces bankruptcy upon families who have become ill.

A 2020 study in Seattle, WA found that

more than half with medical debt incurred this debt while they were covered under insurance. People who had trouble paying medical bills experienced a more recent episode of homelessness 2 years longer than those who did not have such trouble, even after controlling for race, education, age, gender, and health status. People of color who had trouble paying medical bills reported almost 1 year more homelessness than whites.

Many patients put copays and deductibles on credit cards because some providers demand up front payment before treatment begins. Hospitals and medical networks <u>force patients to sign</u> financing contracts before they agree to treat them and then aggressively pursue collecting these debts which often results in bankruptcy and loss of housing.

Non-profit hospital systems are granted huge tax breaks for supposedly operating in the public good, including providing charity care. But Senator Sanders of Vermont just released a <u>report</u> showing that 12 of the 16 largest non-profit hospital systems [whose individual CEOs make millions] provide 2% or less of their revenue in charity care. According to the

One-third believed medical debt was in part responsible for their current housing situation. Sanders <u>report</u>, nonprofit health systems often deny treatment to patients with <u>unpaid hospital bills</u> and using <u>aggressive debt collection</u> tactics, like <u>garnishing wages</u>.

Growing evidence that credit scores are depressed by medical debt, threaten people's access to housing, and fuel

homelessness has prompted the Biden administration to <u>announce</u> an initiative to bar unpaid medical bills from affecting patients' credit scores.

Some healthcare activists support charities like <u>RIP</u> <u>Medical Debt</u> that buys medical debt for a penny on the dollar to close accounts.

<u>Housing First</u> gets people into housing – without demanding sobriety or other conditions before they get shelter. This incredibly effective technique allows people to feel safe and secure in a place where they can get regular sleep, food, shelter, and community – and actually focus on putting their lives together.

Universal health care is the badly-needed safety net to get our unhoused neighbors the care they need and to keep our neighbors today and in the future, from becoming homeless due to bad luck in health, in housing, or in household finances. We can do this. *Submitted by Alan Unell*

NEXT HCR4US MTG Sunday, Dec.3 8:00 p.m. ET 5:00 PT

Register at https://tinyurl.com/ <u>HCR4US-Dec3</u> Agenda: New Attendees Announcements Program Planning Education/Advocacy Break-out Sessions

League members host healthcare radio show

Karen Green Stone, a professional potter, and <u>Dr. Rob Stone</u>, a palliative care physician, have hosted a monthly 15-minute healthcare radio segment on community radio station <u>WFHB</u> since early in the pandemic. Both are members of the <u>Bloomington - Monroe County LWV</u> and <u>Medicare for All Indiana</u>.



With technical help from WFHB volunteers and a local musician, <u>Prescription for</u> <u>Healthcare</u> connects with a larger audience about the crisis and complexities of the US health system. Each interview ends with "What is your prescription for healthcare?"

Producing a show with no editing or Zoom experience has had its challenges. After one lively conversation with TR Reid whose 2008 PBS documentary *Sick Around the World* looked at the healthcare systems of 5 countries, they realized that the record button had not been activated and had to be redone! "It's fun for us to interview amazing people from all over the US working to turn this ship around!" *Submitted by Karen Green Stone*



In Case You Missed It

Nov. 3 Prescription for Healthcare hosts PNHP's Dr. Ed Weisbart on Medicare DisAdvantage

May 3 Plunder: Private Equity's Plan to Pillage America Brendan Ballou discusses the growing <u>harm-</u> ful role of private equity in the US

June 2023 NY Times: "Going Bankrupt in the Name of Efficiency"

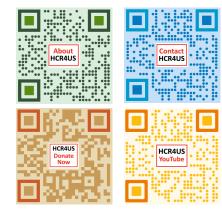
Upcoming Events

Dec. 4 8:00 p.m. ET "Is Medicare Advantage Preying on People of Color?" Zoom webinar with Dr. Claudia Fegan presented by the Puget Sound Advocates for Retirement Action Register <u>here</u>.

Dec. 12 8:00 p.m. ET "The Path to US Universal Health Care!" Zoom webinar presented by One Payer States. Register <u>here</u>.

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-Minutes-etc 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, MaryLynne Courtney, Jody Disney

Abortion pill access rose after Dobbs. Thank an army of activists.

Did you know that post-Roe, despite anti-choice extremists creating more and tighter bans on it, medication abortion is more accessible in <u>all 50</u> <u>states</u> than ever before? It is inspiring to learn that the national supply networks which make alternative avenues cheaper, easier, and safer are the product of <u>creative action by reproductive</u> <u>activists</u>--outside the formal health care system. In addition to many thousands of pills, the networks also provide <u>confidential support</u> <u>services</u> for "<u>Plan C</u>"--<u>Miscarriage + Abortion</u> <u>Hotline</u> with medical professionals and other Healthlines offering free emotional, logistical, and legal support.



NATIONAL **ABORTION** HOTLINE

Abortion pills are <u>98% effective (before 12</u> <u>weeks) and safer</u> than Tylenol, but before COVID were more heavily regulated than opioids. During Covid, <u>activists challenged</u> the restrictions in court so FDA policies now allow interstate telemedicine abortion services and community support networks. Several states have passed telemedicine abortion provider "shield laws" that permit clinicians licensed in their state to provide telemedicine abortion to people living in any state. According to Smith College professor Carrie Baker, between COVID and Dobbs, "decades of political and medical red tape" have been ripped away and the pills are finally "the moral property of women, not just the property of a drug company." *Submitted by Barbara Pearson*

Which Came First, the Chicken, the Egg, Or Both?

It is no secret that many <u>houseless people</u> suffer from mental illness. However, as we focus on one problem, we often lose sight of other, intersecting issues. In the real world, problems exist in a complex matrix of interactions, often with reciprocal negative effects.

The co-occurrence of lack of housing and mental illness is one such example. In a webinar, <u>Housing Is Health</u>, presented by <u>Washington</u> <u>Physicians for Social Responsibility</u>, Aimee Svendsen stated that 'the relationship between housing and health is a direct relationship. The life expectancy of a person experiencing homelessness is only about 48 years.

Lack of stable housing, food, hygiene, health care, and income make it nearly impossible to be unhoused and also be healthy. The literature shows us that, even as the only intervention, becoming housed will make you healthier, use less drugs, alcohol, and a lot less government resources."

The article, <u>Homelessness, Housing Instability and Mental Health</u>, noted the bidirectionality of the problem. Severe mental illness or substance abuse can lead to homelessness, but homelessness also can result in mental health problems. *Submitted by MaryLynne Courtney*