

## MISSION

To educate and mobilize League members to work toward legislation and other reforms that enact the goals of our LWVUS health care position, with a strong focus on [expanded and improved Medicare for All](#).

## An Updated Privatization Position: What Can It Help Us Do?

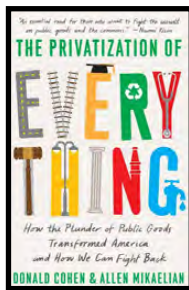
HCR4US recommends adopting the [NY update](#) of the [LWVUS Privatization Position](#) because it adds a strong tool to strengthen our advocacy for Medicare for All. NY's streamlined wording makes it easier than the [VT update](#) for Leagues to decide which policies or legislation this position does or doesn't support.

NY defines what a public good is, enumerates major public goods, and in its first bullet, it specifically clarifies that health care is a public good. We then ask one question of the policy or bill under consideration to decide whether LWV would support it or oppose it: Does it serve the public good or not? If a policy or an organization is not adequately serving the public interest, is the issue that the ownership model is private? Does the responsibility to make a profit compromise its ability to serve the public good?

Many readers of the 2021 book, the [Privatization of Everything](#) (*PoE*), and its ongoing elaboration in [Substack](#), report that the authors explain clearly the urgency and feasibility of fighting against privatization. It helps readers see how central the ownership model (not-for-private profit) is to the ability to create cost-effective and equitable systems for all public goods. Market solutions, the [Substack argues](#), are inappropriate for all public goods, including health care. The LWVNY Privatization Position is unequivocal about this point. In contrast, the LWVUS Health Care Position has many references to public and private ownership that are qualified and combined in the text in ways that keep it from being clear support of one ownership model or another in all circumstances. The NY position is also more direct than Vermont's.

The *PoE* materials clarify that the requirement to generate a profit is contrary to many League principles — democratic governance, transparency, public oversight — and that the profit motive is incompatible with a

public good. Equally important, *PoE* chronicles several decades of [instances of failed privatization](#) of public goods — from the Chicago parking boondoggle, the initial U.S. response to the pandemic, the explosion in privatized prisons among others in its 25 chapters. The *PoE* examples provide a practical basis for understanding applications of the position and identifying de-privatization targets in our own environments as goals for League education and advocacy activity. [PoE's final chapter](#), "Becoming Pro-Public," reminds us, "Because we gave private interests the power [over public goods], we can take it back."



In our campaigns for public Medicare for All, fighting privatization at the federal level would have the broadest impact. If a clarified privatization position is not available to us nationally, its application at the state level would still be very helpful. For example, when private equity firm [Steward Health bought a chain of non-profit hospitals](#) and appealed to the MA Attorney General to let it make them "for-profit," we, the public, needed to object at the outset. However, without this updated position, we didn't have LWV standing to object.

Consider, though, that **local** Leagues in the towns whose hospitals were eventually bankrupted by private equity could have objected — IF the NY update had been available for them. Now that the NY update concurrence IS available, our Amherst MA health care committee, guided by *PoE*, has identified at least two issues the update would open up for League action: 1) responding to repeated [threats of privatization of a nearby VA medical facility](#), and 2) opposing a contract that reduces health care options for staff when it lets a local, public community college privatize its bookstore, an issue raised in a state [Auditor's letter](#). LWV Amherst is using these examples in making the case for our local League to concur with the NY position as soon as possible. Submitted by Barbara Pearson

## Newsletter

## Staff:

Barbara  
Pearson &  
Candy Birch

## Attendees

CA — Jon Li

CO — Elaine Branjord

CO — Linda Mahan

CO — Pam Parks

FL — Candy Birch

IN — Shari Frank

MA — Barbara Pearson

NY — Judy Esterquest

NC — Margaret Villani

VT — MaryAlice Bisbee

VT — Jean Hopkins

VT — Betty Keller

VA — Stephanie Lowenhaupt

WA — Mo Brinck-Lund

WA — Mary Lynne Courtney

**In Case You Missed It**

**Aug 19** — Whole Washington hosted [Let's Make Healthcare Happen! Town Hall.](#)

**Aug. 12** — PNHPNYMetro hosted a panel of experts on "[They Cut Medicaid, What Now?](#)" discussing the OBBB, immigration, & the New York Health Act.

**Aug 7** — Healthcare-NOW hosts researcher Ashley Schultz who discusses the "[Trolls, Bots, and Haters](#)" on the Internet about Medicare for All.

**Aug 1-2** — One Payer States convention centered on "[Reach New Heights for Universal Health Care](#)" at its Denver Convention.

**July 27** — HCR4US meeting [video](#) and [audio](#) and [supplementary materials](#) with Action Links

**Websites****HCR4US Toolkit:**

<https://lwvhealthcarereform.org>

**HCR4US Youtube Channel:**

[https://www.youtube.com/c/  
LWVHealthCareReform](https://www.youtube.com/c/LWVHealthCareReform)

**HCR4US Mtg Minutes:**

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

**HCR4US Web-Contact Form:**

[tinyurl.com/Contact-LWV-HCR-4US](https://tinyurl.com/Contact-LWV-HCR-4US)

**League Update Newsletter Sign Up:**

[https://www.lwv.org/league-management/  
league-update-newsletter-sign](https://www.lwv.org/league-management/league-update-newsletter-sign)

**Networking****One Payer States**

<https://www.onepayerstates.org/>

**National Single Payer**

<https://nationalsinglepayer.com/>

**Healthcare Advocacy on Substack**

[Here's the link.](#)

**Physicians for a National Health Program**

<https://pnhp.org/>

**Students for a Nat'l Health Program**

<https://www.facebook.com/snhp1/>

**Center for Medicare Advocacy**

<https://www.MedicareAvocacy.org>

**National Nurses United**

<https://www.nationalnursesunited.org>

**Poor Peoples Campaign**

<https://www.poorpeoplescampaign.org>

\*\*\*ADD YOUR GROUP HERE\*\*\*

## Summer Internship for Future Leaders Who Will Help Transform the U.S. Health Care System

How much do your doctors know about Single Payer/ Medicare for All? Wouldn't it be wonderful if all providers and people in allied professions had a solid foundation in current health policy in the U.S. and abroad, were familiar with the history and effectiveness of various health policy reforms, and knew about sources of waste in our current medical delivery and pharmaceuti-

cal systems? Wouldn't you also recommend that they hear from star communicators in the health care reform movement like [Wendell Potter](#), [Ed Weisbart](#), and [Walter Tsou](#)?

If so, then thank the Vermont and New Hampshire chapters of Physicians for a National Health Program (PNHP), who designed and just completed teaching the tenth year of the [Northern New England PNHP Summer Internship](#) on these topics. Students of medicine and other health professions receive a \$1500 stipend to participate in a full-time 5-week curriculum including training for advocacy and leadership.

Initially an in-person program in Vermont for medical students in Vermont and New Hampshire, they pivoted to video conference classes in 2020. This has allowed them to work each summer with 10 to 15 interns from across the country, with special efforts to recruit from states where students don't normally have a lot of opportunities to even talk about publicly-funded universal health

care.

One side-benefit of the program is a library of their recordings which they are organizing to make them accessible to students and activists across the country.

**(LWV activist-volunteers to help in this effort would be most appreciated!)**

Program coordinator Betty Keller MD (president of PNHP Vermont, LWVVT Health Care Committee

chair, and member of HCR4US) reminds us that donations are always appreciated for stipends, field trips, and special programming. For example, past interns Simran Arya and Joey Ballard were able to participate in our LWVUS national convention a couple of years ago.

This year, donations could help recent and past interns meet each other in Washington DC for the [PNHP Annual Meeting Nov. 1-3](#). In addition to the value of the meeting itself, its final day will be a "lobby day" which will give the interns the chance to put their advocacy training to use with their Members of Congress (Think Florida! Arizona! Pennsylvania! Michigan! Kentucky!). Donations can be made to <https://pnhp.salsalabs.org/internshipdonation/index.html> (Please email [Betty Keller MD](#) if you wish to specify that the money can be used for travel expenses for meetings or other in-person programming.

Barbara Pearson and Better Keller

*"I learned so much about the details of health policy, but honestly even more than that, I gained so much confidence in my ability to be an advocate."*  
[NNE Intern: India Claflin](#)

## Article Archive

### Recent Articles of Interest Related to Healthcare Reform

*Hold down the CTRL key and click on the hyperlinks to access the articles.*

#### June 27, 2025 [Becker's Payer Issues](#)

##### "Prior Authorization in 2025: What To Know"

By Rylee Wilson

Around 50 insurers pledged their commitment to a set of voluntary actions aimed at simplifying the prior authorization process.

#### June 18, 2025 [The Commonwealth Fund](#)

##### "2025 Scorecard on State Health System Performance"

Massachusetts and Mississippi rank highest and lowest respectively on 50 measures of health care access and affordability, prevention and treatment, avoidable hospital use and costs, health outcomes and healthy behaviors, income disparity, and equity.

#### July 17, 2025 [Wall Street Journal Video](#)

##### "Medicaid Is Huge. Here's Why, and What Trump's Cutting."

Medicaid began as a welfare program, but 60 years later it covers one in five Americans. WSJ explains how it got so big, and how the "Big Beautiful Bill" will change it.

#### July 22, 2025 [The Lever](#)

##### "Private Equity Wants Your Teeth"

By Helen Santoro

With 161 private equity deals in 2024, investors are staking an aggressive claim in the dental industry to the detriment of patients.

#### July 28, 2025 [PNHP Code Wack Podcast](#)

##### "When Doctors Suffer Too: The Hidden Crisis of Moral Injury in U.S. Healthcare "

By Brenda Gazzar

PNHP president Dr. Diljeet Singh discusses "how corporate control and financial pressures are fueling moral injury in medicine—and what it will take to make things right."

#### August 6, 2025 [KFF](#)

##### "How Much and Why ACA Marketplace Premiums Are Going Up in 2026"

By Jared Ortaliza, Matt McGough, Kaitlyn Vu, Imani Telesford, Shameek Rakshit, Emma Wager

"For 2026, across 312 insurers participating in the ACA Marketplaces, this analysis shows a median proposed premium increase of 18%, about 11 percentage points higher than last year.

#### August 12, 2025 [HEALTH CARE un-covered](#)

##### "Big Deal: Lawmakers Sound the Alarm Against CMS's WISer Model"

By Wendell Potter

Legislators warn that the WISer Model "would import one of the worst aspects of Medicare Advantage — aggressive prior authorization run by private, profit-driven contractors — into a program that has long prided itself on letting doctors, not algorithms, decide what's medically necessary."

## Upcoming

Nov 1-2 — Physicians for a National Health Plan will hold its Annual Meeting "Building Community: Building Power" in Washington D.C. Learn more, and register: <https://pnhp.org/2025-annual-meeting/>



Nov 22-23 — The 2025 Medicare for All Strategy Conference will be in person in Rockledge, Florida (30 min from Orlando), cohosted by Healthcare NOW and Medicare for All Florida! [Register](#) by Nov. 7.