

**Vermont Workers' Center
Healthcare Is a Human Right Campaign
Testimony to House Committee on Health Care
25 February 2011**

I am Mari Cordes, President of the Vermont Federation of Nurses & Health Professionals, a union of more than two thousand healthcare professionals. I am here today as a member of the Healthcare Is a Human Right campaign of the Vermont Workers' Center, to present the campaign's thoughts and recommendations on Governor Shumlin's healthcare reform roadmap generally and its embodiment, H.202, specifically. Joining me, to help answer questions, are Peg Franzen, President of the Vermont Workers' Center and David Kreindler.

I honor the pivotal work that this committee is doing, know that you have heard opposing and supporting testimony, and am grateful for your strength and clarity of vision, qualities that I am confident will serve Vermont well by shaping bold and intelligent healthcare policy. We anticipated the voices of opposition and are committed to continuing to work with you and to give you the political support that you need for creating clear plans for a universal, equitable healthcare system.

About the Vermont Workers' Center and the Healthcare Is a Human Right Campaign

The Vermont Workers' Center is a democratic, member-run organization committed to taking action on the full range of issues of concern to working people. We are not a special interest; we are an organization of ordinary Vermonters working together to accomplish our goal of social justice.

The Healthcare is a Human Right campaign is the Vermont Workers' Center's effort to change what is politically possible in healthcare reform. The campaign is a statewide, grassroots movement of Vermonters organized around the desire to have healthcare recognized (in law) as the human right that it is and embodied in a healthcare system that satisfies human-rights standards and treats our healthcare system as a public good.

The Healthcare is a Human Right campaign began about three years ago, with a statewide survey of more than twelve hundred Vermonters. The results of this survey were released on the sixtieth anniversary of the Universal Declaration of Human Rights in our report, *Voices of the Vermont Healthcare Crisis*. This report detailed some of the suffering of Vermonters who lack health insurance, who lack adequate health insurance or who are unable to use what health insurance they have, along with many other aspects of the current healthcare crisis in Vermont. These other aspects include crippling medical debt, homelessness, domestic violence and many other ways in which Vermonters currently suffer in this crisis.

The release of this first human rights report was followed by a series of public hearings around the state, in which Vermonters told their stories about their experiences under our current healthcare system. As Vermonters heard the stories of others and began to realize both that they were not alone in their suffering and that their suffering was not their own fault, the Healthcare is a Human Right campaign began to grow. Our first May Day rally, in 2009, brought more than a thousand Vermonters to the Statehouse lawn in the largest workday rally in recent memory, in support of healthcare as a human right. We repeated that event last year, and we will repeat it again this year, to demonstrate the growth of this social movement seeking — demanding — healthcare as a human right.

We have held local legislative forums in every corner of the state allowing thousands of Vermonters to have participated directly in dialogue with their elected leaders about health care reform.

In addition to the many thousands of individuals that have joined our campaign, more than a hundred organizations and businesses have endorsed the Healthcare is a Human Right campaign and its principles.

Healthcare Is a Human Right Campaign Principles

The work of Dr. Hsiao and his team confirmed that our healthcare system is fundamentally broken and needs comprehensive, system-wide reform. That work also confirmed our belief that a universal, equitable healthcare system is possible, if government upholds its responsibility to treat our healthcare system as a public good.

The Healthcare is a Human Right campaign's support of any healthcare reform legislation depends on our assessment of whether the legislation satisfies human rights standards. It is as simple as that. We wish to see the human right to healthcare embodied in law.

Last year, despite legislative leaders warning us that the economic crisis would make work on healthcare reform legislation impossible, we nevertheless sought passage of S.88, which became Act 128. Act 128 embodied and upheld the human-rights principles of universality, equity, accountability, transparency and participation, and it is these principles that we believe must be embodied in H202.

In other words (quoting Act 128):

- All Vermonters must have access to comprehensive, quality health care.
- Systemic barriers must not prevent people from accessing necessary healthcare.
- The financing of health care must be sufficient, fair, sustainable, and shared equitably.
- The healthcare system must be transparent in design, efficient in operation, and accountable to the people it serves.
- The state must ensure public participation in the design, implementation, evaluation, and accountability mechanisms in the health care system.
- Healthcare is a public good for all Vermonters.

While most of these principles have a very defined meaning in international human rights law, they need to be operationalized in order to offer specific policy guidance. Therefore, the Healthcare Is a Human Right campaign has developed a set of detailed human rights standards for healthcare systems (attached), which frame these human rights principles as specific policy questions. These questions promote consistency in policy analysis, and their use increases the possibility of logical continuity through the process begun with the passage of Act 128. It is these detailed standards with which we assessed H.202, and we urge you to use these standards as a way of promoting consistency and continuity in this process.

We want to emphasize that our assessment is purely the result of the application of human rights principles. It is not the result of political calculations or of “special interest” considerations.

Assessment of H.202

We are pleased that H.202 intends to create a healthcare system, Green Mountain Care, that would “provide comprehensive, affordable, high-quality health care coverage for all Vermont residents in a seamless manner.”

We are pleased that Green Mountain Care would provide healthcare for every person “regardless of income, assets [or] health status.”

We are pleased that Green Mountain Care, as well as the transition process to Green Mountain Care, would be overseen by an independent board representing patients, providers and employers.

Overall, we are pleased that H.202 recognizes the state’s responsibility to ensure all Vermonters have healthcare.

Yet our detailed human rights analysis of H.202 has also led us to the conclusion that this bill will need some changes, if it is to result in a healthcare system that is universal, equitable, transparent and accountable to the people of Vermont.

We are well aware that fundamental systemic change can take some time, and that the human right to healthcare is unlikely to be fully realized overnight. But any proposed time frame must be justified in relation to our human rights obligations. We urge this committee to recognize this healthcare crisis for what it is: a human rights crisis. And we urge you to recognize the state’s obligation to use the maximum available resources to restore and protect human rights. In particular, it is imperative that the needs of vulnerable groups, such as low-income Vermonters, are prioritized, and that they are not left without access to healthcare until 2014 or even 2017. There is also a clear human rights imperative that no Vermonter face a backsliding in terms of the affordability or comprehensiveness of their access to healthcare. We now see this problem emerging with regard to the proposed Catamount/VHAP merger and the potential increase in deductibles and lowering of benefits. This change is not acceptable, because there is no rational justification that would override human rights concerns.

At the same time that we find H.202 in its initial form less than completely satisfactory, we understand that it has been designated as the legislative vehicle for much-needed health reform, and we therefore seek to help change it so that it does satisfy human rights standards and creates a healthcare system that serves the needs of all Vermonters.

General recommendations

We strongly urge you to improve the bill in the following five key ways. (You can think of these as putting snow tires on the vehicle, to make sure it gets us to where we want to go.)

1. The primary goal of a healthcare system must be to preserve and protect health and therefore to provide healthcare as a public good. Controlling the system’s costs is a means to that end, but H.202 currently has these goals reversed by prioritizing cost containment.

2. The principles expressed in the bill must become the guiding, mandatory and enforceable operational rules of the healthcare system that it creates.
3. The legislation passed this year must establish our new healthcare system, not merely create a federally-mandated health insurance exchange.
4. Our healthcare system must be designed to work as independently as possible of decisions by the federal government over which we have no control.
5. The bill should lay out a concrete and detailed plan for establishing a state-based universal healthcare system that starts enrolling Vermonters at the earliest possible date. Access to care for Vermonters must not be delayed to coincide with, or depend upon, potential federal funding, but should be made possible through equitable, public financing from the state.

Specific amendments

Our full list of recommendations is available as a separate handout, and Peg and David are happy to dive into these details with you shortly, but I want to emphasize five areas.

1. **To satisfy human rights standards more generally:** Incorporate principles into statutory section, including in GMC purpose section and in Board objectives
2. **Universality:** Plan B: a state-based public financing scenario to achieve universal coverage as an alternative to ACA financing
3. **Equity:** Devise an equitable financing mechanism for GMC
4. **Accountability & participation:** Board composition and public input process
5. **Public good:** Limit the role of subcontractors; no function shall be subcontracted that entails decision-making about a patient's access to care, including approving or denying payment for care already received or to be received.

Conclusion

We all agree that merely adopting the requirements of the ACA will not result in a healthcare system that is universal, equitable, transparent and accountable to the people of Vermont. With H.202, the Vermont legislature has an opportunity to move beyond a market-based healthcare system to one that satisfies the needs of Vermonters.

While there may be some loud voices of opposition, the vast majority of Vermonters support moving in this direction.

To accomplish our goal, H.202 needs changes. Those changes must be guided by our human rights obligations to each other, to our community, to every Vermonter. What some see only as a financial crisis is primarily a deeply human crisis, causing needless human suffering. We know that you are committed, as we are, to ending this crisis. We are confident that you can make these changes to H.202, and we are committed to working with you to do so.