

LWVLA – RUSSIAN PROJECT – 9-9-07

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I have the interesting task of presenting an overview of health reform challenges and what the individual person can do to influence health care policy at the governmental level.

This is particularly timely since we are now in the midst of a continuing struggle in the California Legislature over how to fix our failing health care system.

- I will begin with the story of how the national League of Women Voters developed its health care policy positions, and then focus on the advocacy work of California Leagues working in coalition with Health Care For All and other health reform groups
- Representative democracy does not, by itself, ensure freedom or justice.

Without the organized education and advocacy of ordinary people in homes, in schools, in churches, at work and on the streets, women would still not be able to vote and black Americans would not have their full civil rights.

The League itself grew out of the 70 year fight for women's suffrage.

These struggles required years of individual commitment, sacrifice and organizational skill.

Reform of a system that is supported by major economic interests who use their resources to influence legislators and manipulate the public by advertising or control of the media will never be easy ---- but it **can be done**.

- Why do so many sacrifice so much? What are the roots of active participation in reforming public policies against powerful forces?

They are our fundamental values and our experiences.

The values that support and stimulate reform were articulated in 1776 by Thomas Jefferson in the Declaration of Independence:

“We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain inalienable Rights, that among these are Life, Liberty and the pursuit of Happiness – That to secure these rights, Governments are instituted among Men, deriving their just powers from the consent of the governed.”

Two fundamental values: Respect for the individual **and** responsibility for the common good.

Our experiences of injustice, of harm, of the breakdown of the health care system to care for us, our families or our community is also a major motivator of active participation in the day-to-day work of education, outreach and advocacy.

- The story of the League's involvement with health care reform begins at the national convention in 1988.

Several of us in the Los Angeles League decided to contact other Leagues in California and the U.S. interested in health care reform, in order to organize for passage of a study of the U. S. health system at the convention. The delegates voted for the study but the national League did not fund it.

In 1990 we again lobbied the delegates at the national convention for passage of a study of the health system. The delegates voted for the study and the national League funded a 2- year study.

- In 1991 LWVLA organized a conference at UCLA with the School of Public Health, *In Search of a National Health Care Policy*. Unit meetings were held providing information on the first phase of the health care study: Delivery and Policy Goals. Members responded to policy questions.

All the Leagues throughout the U.S. sent their responses to the national League in Washington D.C.

- At the national convention in 1992, the following health care policy was approved:

The League of Women Voters of the United States believes that a basic level of quality health care at an affordable cost should be available to all U. S. residents. Other U. S. health care policy goals should include the equitable distribution of services, efficient and economical delivery of care, advancement of medical research and technology, and a reasonable total national expenditure level for health care.

Every resident should have access to a basic level of care that includes the prevention of disease, health promotion and education, primary care, acute care, long-term care and mental health care.

- In 1992 Leagues began Phase 2 of the study: *Financing and Administration*

At the local level, meetings were held where members discussed different models of financing and administration and respond to policy questions.

- In 1993 the following position was approved:

The League favors a national health insurance plan financed through general taxes in place of individual insurance premiums.

The League supports increased taxes to finance a basic level of health care for all U.S. residents, provided health care reforms contain effective cost control strategies.

- By 1994 the League was ready to act.

Based on the national position on health care, the League of Women Voters of California joined the coalition of organizations to pass Proposition 186 The California Health Security Act. This initiative provided for comprehensive coverage through a single state insurance fund.

[An initiative is legislation that requires a vote of the people instead of a vote of the Legislature for it to become law. To qualify for a state-wide ballot, the initiative must receive a certain number of valid signatures of registered voters.]

LWVLA and many California Leagues worked hard to pass this initiative. The initiative was attacked by a well-funded opposition and failed by a wide margin.

- One can learn a great deal from failure.

The campaign taught the advocates of the need for a grassroots effort to educate the public about the health care system and the need for an organization devoted to bringing about universal, comprehensive, affordable coverage by means of a single California insurance plan.

Many veterans of the Proposition 186 campaign, including members of several California Leagues, came together in Santa Barbara to begin the work of developing an organization to work towards this goal.

- In 1995 – Health Care For All-California was born.
- In 1998 – Health Care For All-California initiated the first of several legislative attempts to pass a universal, single payer bill in the California Senate. The League supported these efforts.
- The first success came in 2000 with the passage of a senate bill that called for a study of various ways to reach universal coverage. Governor Davis used this bill to apply to the federal government for a grant to fund the study. The grant was approved.
- In 2001 the California Health and Human Services Department created an Advisory Group for the Health Care Options study with representatives from state and local governments, business, providers and health reform advocates. League members participated in this Advisory Group. Nine proposals were approved for the study.

Three proposals were single payer models – including Cal Care from Health Care For All.

This is the only proposal from a grassroots organization.

Six proposals increased coverage through public program expansions, tax credits, or employer mandates.

The Lewin Group was hired to analyze and compare the cost and coverage impacts of the nine proposals using a micro-simulation model. The proposals were also analyzed regarding the quality and access impacts of the proposals.

- In 2002 public symposia were held in five California cities. The authors describe their proposals. The authors use public input to revise their proposals.

The final reports on the cost-benefit analysis and quality are submitted to California Health and Human Services.

At the end of his presentation at the last symposium at the capitol in Sacramento, John Shiels of the Lewin Group made the following statement: *“One of the major claims of the single payer advocates for a long time has been that we could cover more people, for more services, for less money. Our study is showing that, for these very carefully designed plans, that’s true. To the best of our ability to estimate it, that’s true.”*

- With the favorable results in hand, the coalition of health reform groups who have worked together since 1998 decided that the time was right for the introduction of a single payer bill.
- In 2003 Senator Sheila Kuehl introduced SB 921, The Health Care For All Californians Act. A large lobbying campaign helps to get SB 921 through the Senate.
- In 2004 - The Assembly Health Committee passed SB 921. The bill goes no further. More than 500 statewide and local organizations are endorsers.
- Health Care For All raises \$90,000 to hire The Lewin Group to analyze the financial impact of SB 921.
- In 2005 Senator Kuehl released The Lewin Group report. The findings show that the single payer model upon which SB 921 was based can cover every Californian with a comprehensive health plan that reduces costs and controls health cost inflation.
- Senator Kuehl introduces SB 840, The California Health Insurance Reliability Act, which amends SB 921. Advocates garner hundreds of endorsements from organizations, thousands of letters of support from individuals and place opinion articles in many newspapers.

The Senate passes SB 840.

- In 2006 – A huge lobbying campaign by advocacy organizations and unions helps get SB 840 passed by the Assembly and sent to the Governor. But Governor Schwarzenegger vetoes the bill.
- On August 12, 2006 the “365-City Campaign” is launched in Morro Bay. Each following day an event is held in a different city supporting SB 840.
- In 2007 Senator Kuehl reintroduces SB 840, renamed the California Universal Healthcare Act.

At a special Assembly Health Committee educational hearing, Senator Kuehl shows the HCA video, **“The Healthcare Solution”** The hearings are packed with supporters.

In a few minutes you will see this video which was produced by the HCA chapter in the San Fernando Valley.

- Michael Moore’s documentary, “Sicko”, which focuses on the failures of our system to care for Americans begins screenings at movie theaters throughout California.

Wherever SICKO is shown flyers explaining SB 840 are distributed. Each flyer has a postcard with prepaid postage for people to express their support. Over 30,000 postcards are collected in a few weeks.

The Senate passes SB 840. The Assembly Health Committee also passes SB 840 where it is now waiting to move forward in 2008.

- On August 11, 2007 the 365-City Campaign ends with a rally of 3,000 people on the steps of the Los Angeles City Hall.

A Field Poll of August 22 shows that 36% of California voters favor replacing the current employer-based system with one operated by the state – a jump of 12% since December 2006. The poll shows single payer with the most support of all health care proposals.

Now, before my final remarks, we will view the video, “The Healthcare Solution”

[Video to 19:45 - Lt. Gov. Garamendi: “It is our moral obligation to take care of each other.”]

- Well, you may ask, what have you learned through all the years of working for health care reform?

I would like to quote from historian Howard Zinn and the former President of the Czech Republic, Vaclav Havel, whose words beautifully express what I have learned from my experiences as an advocate and a student of our health care system.

“Don’t look for a moment of total triumph. See engagement as an ongoing struggle, with

victories and defeats, but in the long run slow progress. So you need patience and persistence. Understand that even when you don't "win," there is fun and fulfillment in the fact that you have been involved, with other good people, in something worthwhile. You need hope." Howard Zinn And Vaclav Havel writes: "Hope...I understand above all, is a state of mind, not a state of the world. ...it is a dimension of the soul. It is an orientation of the spirit, an orientation of the heart."