



your
★ **VOTER** ★

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President

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www.lwvbn.org

LWVNYS website

www.lwvny.org

LWVUS website

www.lwv.org

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Proposed New Positions on Healthcare and Healthcare Financing

Join this important State League consensus process!

The League of Women Voters of New York State has proposed updates to its positions on healthcare and healthcare financing. Each local League has been asked to review the changes and respond to the concurrence questions by March 1, 2021.

Program: Healthcare Consensus Education

Date: Tuesday, December 8, 2020

Time: 7:00 p.m.

Dr. Judith B. Esterquest, a member of the Study Committee to Update Healthcare, will present information, lead discussion and answer questions about the State League’s two proposed healthcare positions.

Join Zoom meeting by computer, tablet, or android phone:

[Zoom Link - Healthcare Consensus Education](#)

Meeting ID: 852 3699 9669

Passcode: 219229

Phone number if you need to access by phone: 1 646 558 8656

Program: Healthcare Consensus Meeting

Date: Tuesday, January 19, 2021

Time: 7:00 p.m.

Join Zoom meeting by computer, tablet, or android phone:

[Zoom Link - Healthcare Consensus Meeting](#)

Meeting ID: 870 7466 0787

Passcode: 430817

Phone number if you need to access by phone: 1 646 558 8656

Note: The full text “Update on Healthcare and the Financing of Healthcare (2019-2021) Materials” is available [here](#) and at lwvbn.org. Especially reference pages 31-35 for footnoted proposed positions.

League of Women Voters Mission

The League of Women Voters is a good government organization that encourages informed and active participation in the political process, works to increase understanding of major public policy issues, and influences public policy through education and advocacy. The League never supports political parties or candidates.

President's Report

"The only constant in life is change!" Heraclitus. The Greek philosopher was so correct. When we accept the truth of his words, we can adapt to new and challenging situations more easily and realize that today's changes may be serendipitous as well as challenging. The change to virtual gatherings has made it much easier to plan wardrobe! We can see and hear each other safely and attend many events at little or no cost that take place far from us. Zoom is my new language to help me keep my brain working! It is environmentally friendly too! No carbon-emitting vehicles are needed!

The League is undergoing change also. We have a new office manager. I am excited to announce that Victoria Mueller has accepted the position. She has begun to learn the role, and already is the voice on the phone and the fingers on the keyboard responding to your questions and requests. Barbara Gunderson and she are working together, so that the change will be seamless. I'm certain you will welcome Victoria to the League. Barbara will be able to breathe easier as she will have only Voter Service and Youth Program activities in her portfolio.

As I write this, much of Erie County has been coded orange. It is unfortunate that we still have an appreciable number of people who haven't taken Covid-19 seriously enough to limit their contacts and practice social distancing. That and the need to be indoors much of the time have certainly contributed to the rise in the number of positive cases. This change means the League office will remain officially closed for now for members. If you need something, please use the phone or, better still, email the office at lwvbn@lwvbn.org with your request. Someone will be there at least once each week to check the mail and do anything that cannot be done remotely. Both Barbara and Victoria have a remote connection to the office computer, so they can do most things from home.

One more change that I'd like to note is that there will be only six more issues of the Voter where I'll be writing the president's column. At the 2021 annual meeting, members will elect a new president. We have another option for that. If any member would be willing to step up, our bylaws provide that the board can select a president-elect to serve the remainder of this year on the board solely to learn the role of this League's president and then become president for a two-year term. If you think you might be interested, please contact me at lwvbn@lwvbn.org. We can talk about the role of president and how I am willing to help the incoming president. I will not be a member of the board after my term ends, but I will gladly provide behind-the-scenes assistance as requested and also continue to be an active participant in many League activities.

Terri Parks

How the League Reaches Consensus

Consensus, or membership understanding and agreement, is the basis of the grassroots character and effectiveness of the League of Women Voters. The League is a study and action organization. It is important to have a clear expression of member views to determine what action to take. Consensus-taking is a complex procedure at the local, regional, state, and national levels; it is puzzling to new members and challenging to experienced leaders.

Consensus is a process whereby members participate in a group discussion of an issue. The "consensus" reached by members through group discussion is not a simple majority, nor is it unanimity; rather, it is the overall "sense of the group" as expressed through the exchange of ideas and opinions.

Preparing for the meeting involves extensive membership participation and that members be as well informed as possible on the issue. A resource committee is responsible for preparing a discussion outline based on fact sheets and articles to create interest to members and increase their understanding of the issues involved. The resource committee should not only give needed information but bring in pro and con arguments not covered and make sure all viewpoints are expressed.

Once consensus is agreed by a local league, the results are sent to the appropriate board (State or National League board). Here the results of all local League consensus reports are reviewed and the position is either approved or disapproved.

From the Syracuse November-December 2020 Voter

LWVNY Healthcare Study Materials September 2020

Introduction: The 2019 NYS Convention charged our committee with updating the LWVNY position on Financing Healthcare (which was originally adopted in 1985 and last revised in 1991) with particular consideration of the manner in which single-payer legislation such as the NY Health Act could be fiscally viable; that is, the financial criteria we believe a single-payer system should meet, including the feasibility of implementing single-payer at the NYS level and consideration of how it might impact Medicare.

To meet this charge, we added two new sections to the proposed Position on Financing of Healthcare: Feasibility criteria for single-payer financing in NYS and favored Cost-Control Methods appropriate to guide any healthcare reform. After review, we also updated the LWVNY position on Healthcare to reflect the changes in medical practice and healthcare that have occurred in the 30 years since the positions were first adopted. (The Consensus process will conclude in the first half of 2021.)

We are asking you to make two decisions. In each case, compare the proposed new position to the current position:

1. **Do you accept the new position on Healthcare? YES or NO.**
NO retains the current position; YES accepts the new position.
2. **Do you accept the new position on Financing of Healthcare? YES or NO.**
NO retains the current position; YES accepts the new position.

PROPOSED NEW HEALTHCARE POSITION (2021)

Goals

The League of Women Voters of New York State (LWVNY) believes that everyone should have access to essential physical and behavioral healthcare. New York State has a proper role in the regulation of healthcare and must assure high quality care that is affordable and accessible to all. Resources should be devoted to health promotion and disease prevention so that people can take active responsibility for their own health. People should have opportunities to participate effectively in decisions regarding their personal health and in healthcare policy decisions.

The League believes that New York State's primary role in healthcare is to assure that quality care is available to all New Yorkers. We believe that the state should provide planning and regulations to assure everyone, including the medically indigent, access to an essential level of quality physical and behavioral healthcare. Cost containment should be an important criterion in developing regulations. Such regulation, however, should not compromise the quality of care or its accessibility.

The League supports regulatory incentives to encourage the development of cost-effective alternative ways of delivering and paying for healthcare, appropriate to all areas of NYS, with coordination across regulatory bodies to avoid undue delays and contradictory, duplicative regulations. Delivery programs may take place in a variety of settings, including the home and online, and must provide quality care, meaning consistent with "standard of care" guidelines, by trained and licensed personnel, staffed adequately to ensure their own and patient safety.

Coordination of services is essential to assure that community needs are met. As public health crises increasingly reveal, NYS should protect the health of its most vulnerable populations, urban and rural, in order to protect the health of everyone. In addition, all programs should be evaluated regularly. Provider reimbursement should include incentives for efficiency and for disease prevention and health promotion activities. Public health, environmental health and research activities should be continued.

Decisions on medical procedures that would prolong life should be made jointly by patient, family, and physician. Patient decisions, including those made prior to need, should be respected.

Essential Level of Quality Care

The League supports uniform eligibility and coverage of essential healthcare services, both physical and behavioral, ideally including coverage of services such as vision, dental, hearing, and long-term care, through

public financing. Access to optional insurance coverage for care not covered by public financing should be available. The League has a strong commitment to an emphasis on preventive care, health education, and appropriate use of primary care services.

CURRENT POSITION ON HEALTH CARE (1991)

The League of Women Voters of New York State believes that everyone should have access to basic physical and mental health care. New York State has a proper role in the regulation of health care and must assure high quality care that is affordable and accessible to all. The state should support incentives to foster the development of alternative delivery and payment methods.

More resources should be devoted to health promotion and disease prevention so that consumers can take active responsibility for their own health. Citizens should have more opportunities to participate effectively in decisions regarding their personal health and in health care policy decisions.

The League believes that NEW YORK STATE's primary role in health care is to assure that quality care is available to all New Yorkers. We believe that the state should provide planning and regulations to assure everyone, including the medically indigent, access to a basic level of quality physical and mental health care.

Cost containment should be an important criterion in developing regulations. Such regulation, however, should not compromise the quality of care or its accessibility. We support regionalization of specialized tertiary services as a means of providing access while controlling costs.

There should be coordination among regulatory bodies to avoid undue delays and contradictory, duplicative regulations.

The League supports regulatory incentives to encourage the development of alternative ways of delivering and paying for health care. Delivery programs should provide quality care, be cost effective, and be adaptable to different geographical locations. Services may take place in a variety of settings, including the home, and must be staffed by personnel who meet state standards.

Coordination of services is essential to assure that community needs are met. In addition, all programs should be evaluated regularly. Payment methods should be encouraged which include incentives for efficiency and for disease prevention and health promotion activities. Some alternatives, which should be considered for state regulation, include ambulatory surgery, alternative providers, prepayment plans and the issue of professional liability. Activities should be continued in public health and research.

Decisions on medical procedures that would prolong life should be made jointly by patient, family, and physician. Patient decisions, including those made prior to need, should be respected. To participate in public discussion of health policy and to share effectively in making policy decisions, consumers must be provided with information on the health care system and on the implications of health policy decision.

PROPOSED NEW POSITION ON FINANCING HEALTHCARE (2021)

Financing of Healthcare

As a continuation of the 1985 statement of position on healthcare, a two-year study and consensus on the financing of healthcare was conducted from 1989 to 1991. Following study in 2019-20, this position was updated again in 2021.

The League of Women Voters of New York State believes that any proposed healthcare financing system should provide access to essential healthcare at an affordable cost for all New Yorkers, both patients and taxpayers. The League supports the single-payer concept as a viable and desirable approach to implementing League positions on equitable access, affordability, and financial feasibility. In any proposed healthcare financing system, the League favors funding supported in part by broad-based and progressive state income taxes with health insurance access independent of employment status.

Federal versus State Roles

Although the League prefers a healthcare financing system that includes all residents of the United States,

in the absence of a federal program that achieves the goals of universal, affordable access to essential health services for New Yorkers, the League supports a healthcare program financed by NYS which includes continuation of federal funding.

Feasibility

The League believes the financial feasibility of any single-payer NYS program requires:

- Levels of federal support appropriate for the cost of the program
- Sufficient cost savings to be identified so that estimated overall program cost will approximate the cost of current overall health services (as funded from all sources) or less
- New state funding from individual taxpayers, employees and businesses, that is equitable and progressive to ensure affordability for all
- A healthcare trust fund managed by the state, that operates in a similarly efficient fashion as Social Security or Medicare trust funds.

Cost-Control Methods

To reduce the impact of any tax increases, healthcare reform should contain costs. The League believes that efficient and economical delivery of care can be enhanced by such cost-control methods as:

- Reduction of administrative costs — both for this plan and for providers
- Negotiated volume discounts for pharmaceuticals and durable medical equipment to bring prices closer to international levels — or importing of same to reduce costs
- Regionalization of specialized tertiary services to ensure timely access and quality
- Evidence-based treatment protocols and drug formularies that include cost/benefit assessments of medical value
- Malpractice reforms designed both to compensate patients for medical errors and to avoid future errors by encouraging robust quality improvement processes (at individual and systemic levels) and open communications with patients
- Investment in well-care — such as prevention, family planning, patient education, primary care — to increase health and reduce preventable adverse health events/expenditures
- Investment in maternal/infant and child care, chronic disease care, and behavioral healthcare
- Provision for short-term and long-term home-care services to reduce institutionalization
- Innovative payment and record-keeping

Specific cost-control methods should reflect the most credible, evidence-based research available on how healthcare financing policy affects equitable access to healthcare, overall quality of care for individuals and populations, and total system costs of healthcare and its administration. Methods used should not exacerbate disparities in health outcomes among marginalized New Yorkers.

Public Participation

The League supports public input as integral to the process for determining health care coverage and funding. To participate in public discussion of health policy and to share effectively in making policy decisions, NYS residents must be provided with information on the healthcare system and on the implications of health policy decisions.

CURRENT POSITION ON FINANCING OF HEALTH CARE

As announced by the State Board, November 1991

As a continuation of the 1985 statement of position on health care, a two-year study and consensus on the financing of health care was conducted from 1989 to 1991. Major concerns were the financial limitations on access to health care for the uninsured and the underinsured and the escalating cost of health care.

The current financing system which involves public programs with limited eligibility, and private insurance coverage for selected groups and selected health care treatments, does not meet League criteria for access and equity in health care as stated in the position of 1985.

The League of Women Voters of New York State supports uniform eligibility and coverage of basic health

care costs through public financing. Access to optional insurance coverage for care beyond the basic level of coverage should be available. Assuming that public funds for health care are limited, the League believes that the scope of services contained in basic coverage and the cost/benefit ratio of medical treatments should be considered in efforts to contain costs. The League has a strong commitment to an emphasis on preventive care, health education, and appropriate use of primary care services.

The Federal government should be the primary vehicle for the financing of health care, determining eligibility for health care services, and determining the scope of services to be provided. The State should assume secondary responsibility in these areas.

The League should ensure that public input is an integral part of the process in determining priorities in health care coverage. Cost containment efforts should precede increased taxes or reallocation of funds from other state programs.

The League supports the single payer concept as an acceptable approach to implementing League positions on equitable access and cost containment.

The League supports the establishment of an administrative system for determining patient compensation as a modification of the tort system related to patient injury.

Overall, the League believes that universal access must be balanced by restrictions in the scope of services, and that the scope of services should be determined by knowledgeable professionals and consumers with administrative and legislative oversight.

Welcome Our New Members!

We are pleased to report that we have added five new individuals to our growing membership: Ariella Newman of Tonawanda, Molly Ford of Buffalo, Amy Lachuk of Buffalo, Kathleen Pace of East Amherst, and student member Maria Evancho of Hamburg.

Lori Robinson and Mary Ann Turkla

Great Decisions

The Great Decisions discussion group will meet via Zoom teleconference at 10:00 a.m. on Thursday, December 3. The topic will be "Modern Slavery and Human Trafficking." [The Foreign Policy Association](#) states this about the topic: "Almost every nation has enacted laws criminalizing human trafficking, and international organizations, governments, and NGOs sponsor a large variety of projects to curb trafficking and slavery. Billions of dollars have been allocated to these efforts. What is the international community doing to combat slavery and trafficking? What are the experiences like for those being trafficked?"

This promises to be an interesting and relevant topic. An email link will be sent out to Great Decisions participants a day or two in advance of the December 3 date.

Contact Fran Holmes at lwvbn@lwvbn.org if you have any questions, or wish to be included in this Zoom teleconference call.

Fran Holmes

DEI Committee Update: So, what is DEI?

Diversity. People are not diverse. Groups are diverse by virtue of being composed of people with different attributes. There can be diversity of age, gender, gender identification, sexual orientation, race, religion, culture, ability, education and socioeconomic status, to name a few.

Equity. Simply put, it is leveling the playing field for all participants. It is giving everyone the opportunity to succeed by eliminating barriers. It is different from equality, where all players are provided the same tools, irrespective of needs, abilities or background.

Inclusion. Bringing in people who have previously been excluded from your group and truly listening to them,

understanding their point of view, and sharing the decision-making power with them.

Vernā Meyers, a diversity advocate, has said, “Diversity is being invited to the party. Inclusion is being asked to dance.” If you are interested in learning more, please use the link provided to see her TED talk, “How to overcome our biases? Walk boldly toward them.” She is a very engaging speaker.

[Link to Verna Meyers’ Ted Talk](#)

The hope of the DEI Committee is that we will all look at ourselves personally and organizationally. How do we plan our activities with DEI in mind? Are we able to think unconventionally and do things in a way we have never tried? What do we fear?

Aside from the DEI concept filtering into our GOTV activities, the DEI Committee is collaborating with members of the local NAACP and SANYS (Self Advocacy of Western New York) to present a Zoom round-table discussion on the history of voting in February 2021. How have legislation and subsequent actions of citizens eased or impeded the path to the enfranchisement of women, African Americans, people with developmental disabilities or those who identify with all three? Our planning sessions have been most interesting because we learn from one another. A very exciting comment, to which we all agreed, was that perhaps the planning of this event can lead to future conversations and joint event planning. It is a hopeful start.

Liz Zausmer, Chair

Getting Out the Vote Through a DEI Lens

The GOTV Steering Committee and Voter Services have not been idle. Nor have we been working alone. Throughout this election year we have met, collaborated with and learned from members of several other civic organizations.

Barbara Gunderson, Voter Services Chair, put on her teacher’s hat and taught about the importance of voting at several high schools and colleges. On one occasion she worked with Tyrell Ford of PUSH Buffalo and on another she was accompanied by Muna Munassar of Access Buffalo. The State League awarded Barbara a \$100 grant for her presentations and work with SANYS, an advocacy group for people with developmental disabilities. Linda Koenigsberg has developed relationships with several colleges to increase voter registration and GOTV activities. As a result, she has been asked to join UB Votes, a non-partisan, campus-wide effort charged with increasing voter registration and engagement.

Barbara G. and Liz Zausmer attended a leadership “boot camp” hosted by Voice Buffalo. We were fortunate to meet Nina Lukin, who joined the League and quickly began to volunteer. We met Portland Jackson, a community organizer with NOAH (Niagara Organizing Alliance). We have since collaborated with them at Niagara County Community College and Niagara University. They also provided information to help Alberta Roman promote voting in Tonawanda and other Niagara County locations.

Thirty-two League volunteers wrote and mailed 3,000 postcards to the Lovejoy District, a historically low voter turnout district. Voice Buffalo provided us with the information regarding the addresses. We registered voters in Lovejoy and met someone who connected us to the Jericho Road Community Health Center where they were planning voter registration events. We provided them with voter information and lawn signs.

If you saw an NFTA bus cruising by with a “Your Vote Counts” sign featuring a League logo along with those of the NAACP and PUSH Buffalo, you witnessed another example of interagency collaboration. A combination of funds from our League, private individuals, the NAACP, PUSH Buffalo and a State League grant paid the bill. Thank you, Mary Ann Turkla, for the bus sign idea.

The PUSH Buffalo “Street Team” has worked tirelessly to register and encourage people to vote. The League provided pamphlets and other voter education materials. In turn, they provided us with addresses from their VAN account so that we could distribute several hundred packets of voter information in West Side neighborhoods.

This is not all, but in the interest of space, suffice it to say that we have been successful, reaching thousands of voters; and we are richer for it because we have strengthened our community connections.

Liz Zausmer, Chair



LEAGUE OF WOMEN VOTERS®
OF BUFFALO/NIAGARA

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ADDRESS SERVICE REQUESTED

December 2020

Note: Due to social distancing and stay-at-home practices, meetings are subject to change and may take place via phone or computer. Please contact the committee chair for the latest information.

Tuesday, December 1, 4:00 p.m.
Program, Issues & Events Committee
TBA

Thursday, December 3, 10:00 a.m.
Great Decisions
via Zoom

Tuesday, December 8, 7:00 p.m.
Healthcare Consensus Education
via Zoom

Wednesday, December 9, 2:00 p.m.
Local Government Committee
via Zoom

Thursday, December 10, 11:00 a.m.
Centennial Celebration Committee
via Zoom

Friday, December 18, 1:00 p.m.
Money in Politics Committee
via teleconference

TBA
Diversity, Equity, Inclusion Committee
TBA

**Check the calendar on our website for updates.
Please remember to wear your League badge to all League events.**