

SOCIAL POLICY

HEALTH CARE POSITION STATEMENT

The League of Women Voters of Vermont believes that, until such time as a basic level of quality health care is available to all United States residents at an affordable level of cost, a state program can and should provide such health care to the residents of Vermont.

The League of Women Voters of Vermont supports:

A publicly-funded, single-payer, comprehensive, universal, equitable health care system. Funding should be separated from employment status, supported by broad-based taxes on earned and unearned income.

Increased access to primary health care facilities through community-based health centers, including existing space in schools and senior centers, mobile treatment units, and telemedicine.

Addressing the shortage in professional personnel by forgiveness of tuition loans for new doctors, dentists and nurses practicing in underserved areas in Vermont, and greater use of nurse practitioners and physician's assistants.

Covering all medically necessary services, using evidence-based best practices. This should include preventive, chronic, psychiatric, dental, home care and licensed alternative care.

The establishment of mechanisms to adequately control total system expenditures for health services while maintaining standards of quality care.

The League believes that the rate of increase in medical spending can be controlled through savings in administrative costs inherent in a single payer system; efficiencies provided through information technology, emphasis on preventive care, price negotiation for pharmaceuticals, and global budgeting for hospitals.

Making the necessary up-front investment in order to take advantage of the benefits of a coordinated, statewide information technology system.

All the proposed solutions for Vermont's health care crisis include coordinated health care information technology. The state's Health Resource Allocation Plan lists the following priorities: electronic health/patient records; chronic disease registry; bar-coded medication administration systems; computerized physician order entry; clinical decision support; telemedicine; picture archiving and communications systems. Technology also has a role to play in billing and purchasing and personnel records, etc. The Veterans Administration has found their IT system has reduced medical error rates and duplication of care.

Education and incentives for healthy lifestyles.

Healthy lifestyles can and should be encouraged through, for example, school-based programs including universal physical education; good nutrition in school lunch programs; workplace incentives for exercise; use of advertising as has been done to cut down on the use of tobacco.

Oversight by a citizen board or commission.

Oversight of the state health care system should be independent of the government. Membership on such a board should include representatives of all stakeholders: providers, consumers (balanced demographically and geographically), the legislature and the executive branch.

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