



## **Healthcare Is a Human Right Campaign renews call for legislature to move forward, not backward, on healthcare reform**

*March 1, 2013*

The Healthcare Is a Human Right Campaign calls on our legislators to fulfill their obligation to protect access to healthcare for all people in Vermont. “First, do no harm” should guide our legislators’ actions at a time when low-income people are forced into the federally-mandated health insurance “exchange” marketplace. Nobody should have to suffer from reduced access to healthcare because of the federal reform requirements.

We are deeply disappointed that the House Health Care Committee has failed to improve on the Governor’s inadequate health insurance subsidies proposal, which will reduce access to care for low-income people. The failure to protect people who are forced into the exchange violates human rights standards in two ways.

1. First, it violates the responsibility of government to make continuous progress toward improving the human rights of all people in Vermont. Forcing people into a private marketplace where they have to pay even more for healthcare than they do now is a step backward not forward in the transition to universal healthcare. It puts people’s health at risk.
2. Second, the failure to provide adequate support to low-income people violates the principle of equity, because it increases obstacles to low-income people receiving the healthcare that they need, and it fails to ensure payment levels that are based on ability to pay. When forced from Catamount or VHAP into the exchange, low-income people will face sharp cost increases — especially in their deductibles and co-pays — which will make it harder for them to get the care they need. At the same time as people with low incomes have to pay more, businesses and insurance companies will pay less under the House Health Care Committee’s proposal, while payments to healthcare providers will increase.

The effect of these decisions is that this stage of healthcare “reform” will be funded on the backs of the most vulnerable among us and will reduce their access to care — which is not reform at all. The Committee lets employers off the hook for financing our healthcare system and protects insurance companies from tax increases, yet it imposes

a regressive soda tax, which patronizes and punishes poor people.

For these reasons, the Healthcare Is a Human Right Campaign rejects the proposed funding changes to healthcare, which will shift costs from businesses, insurance companies and providers to people with low incomes and to those who get sick. We call on our elected representatives to reverse the disturbing trend of raising revenue in an inequitable way that burdens poor and low-income people the most.

Vermont already has the money needed to protect people's access in the exchange. Catamount and VHAP are fully funded, and there is no reason not to continue supporting access to care for low-income people. Channeling money away from Catamount and VHAP participants to businesses and providers puts special interests above people's needs. This redirection of funds decreases equity and threatens people's dignity, in violation of the intent of Vermont statute, which calls for a state budget that advances dignity and equity.

Finally, the Healthcare Is a Human Right Campaign strongly objects to the Governor's and House Health Care Committee's neglect of the impact of deductibles and co-pays on access to care. In order to maximize federal matching funds, they have prioritized the subsidizing of premiums while allowing user fees to increase dramatically. This decision forces people to purchase health insurance that they may not be able to use once they get sick — in effect subsidizing insurance companies, rather than providing healthcare to those who need it. Instead of more corporate subsidies, what Vermont needs is support for people's access to healthcare when they need it, and that means eliminating user fees. We need health care not health insurance. Coverage is not care.

We call on our elected representatives to stop shifting costs to sick and low-income people and move forward, not backward, on the path toward realizing our human right to healthcare.