



# Health Care is a **Human Right**



## **WELCOME**

**We know you agree that now is the time to act and create a health care system that allows all of us access to quality, affordable health care.** A campaign is underway that endeavors to create a health system that is guided by human rights principles. It's a provision of the Affordable Care Act and would transform our health care system as we know it.

Welcome to our **November** Health Care is a Human Right newsletter! Every month, we will keep you up to date on the progress of the campaign.

In this issue you will learn about:

- Current Events
- State Spotlight: Colorado
- It Takes a Village
- News Center

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## **Current Events in Health Coverage – State and Federal**

The Patient Protection and Affordable Care Act of 2010 (ACA) has now been essentially fully implemented for almost two years as of late 2015. If the goal is good health care coverage for all Americans, how is it doing?

### **The Good**

- Adult children, ages 18-25, can now be included on their parents' insurance.
- Most severely limited "insurance" policies are no longer allowed to be sold.
- Medicaid expansion in the majority of states is providing coverage to many poor and near-poor adults who couldn't afford insurance before.
- People cannot be denied health coverage because of pre-existing conditions.

### **The Bad**

- Health insurance exchanges, both state and federal, got off to a very bad start, undermining the public's ability to sign up for new health insurance.
- Poor and near-poor adults in states that didn't expand Medicaid still remain uninsured.
- "Affordability" is based solely on the size of the premium compared with the worker's pay. Significant financial hardship remains when the worker's family also needs to be covered, and when deductibles and other cost-sharing methods are not affordable.
- It is acknowledged that at least 25 million people will still remain uninsured under the ACA.
- The hoped-for exchange for policies for small employers to choose for their employees has so far failed to produce any meaningful choices for employers.

### The Ugly

- By design, non-citizens, especially those without proper documents, are excluded entirely from the system.
- Many policies have extremely narrow networks, leaving patients exposed to very large bills if they receive care from someone not in their network.
- Eligibility requirements for subsidies include enormous administrative hurdles for a population ill prepared to handle them. A complex form, in addition to a standard income tax filing, is required. Over a million people have either failed to file any income tax return for 2014, or failed to attach the special form (8962). Considering that somewhere around 8 million people signed up for insurance through the exchanges, and many of these were eligible for Medicaid, the failure rate regarding justifying subsidies is well above 17%.
- Personal bankruptcies triggered mainly by large medical bills, still remain a problem.

This is not an exhaustive list, but does illustrate that the United States still has far to go to achieve anything approaching universal health coverage for all residents.

*Sarah K. Weinberg, MD*



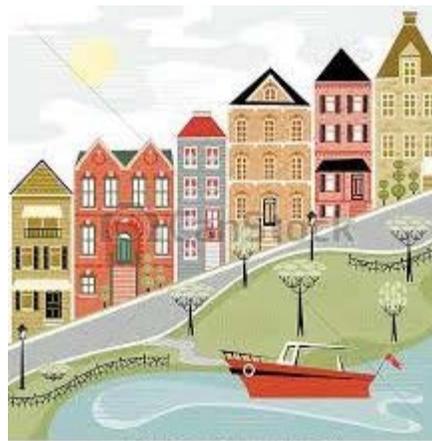
### State Spotlight: *Colorado*

Colorado could become the first state with universal health care. Proponents of a new initiative called [ColoradoCare](#) have turned in enough signatures to pose a question to voters that, if passed, would create a universal health care system. The program would do for Colorado what Medicare does for seniors. It would prevent anyone from going bankrupt or skipping getting the care they need because they cannot afford it.

The campaign envisions a plan that would cover all residents, and stop Coloradans from having to shop for private insurance. Instead, Coloradans would pay for the system through \$25 billion in taxes deducted largely from payrolls. The vote comes next year. If approved, it could go into effect by January of 2018.

## It takes a village

Creating universal health care in Washington state will take the work of many organizations and endorsers. Currently, there are a dozen founding organizations and many more supporting organizations. Every group brings a unique viewpoint to the table and spreads the reach of the movement. New individual members and new organizations are always welcomed and needed as we move down the path towards universal health care. The best way to recruit new members and organizational members is to provide them with the [Handout for Potential Sponsors](#) in the [Activist Toolkit](#).



## News Center

### **Strode: Former Gov. Lamm backs universal health care** *The Colorado Statesman*

Former Colorado Gov. Richard Lamm is playing an active role supporting the proposed Initiative 20, dubbed “ColoradoCare,” the ballot measure to provide universal health care in Colorado. Although he admits it’s an “uphill battle,” Lamm, a Democrat, says he’s solidly behind it. In the first part of a two-part interview with Catherine Strode, Lamm discusses the ballot measure and what he views as needed changes in the U.S. health care system.

[Read more](#)

### **Colorado Pushes for Universal Health Care That’s Governed by the People** *Yes! Magazine*

First pot, now health. In November 2012, Colorado voters approved a ballot initiative that made recreational use of marijuana legal, despite a federal ban. In November of next year, the state will have the opportunity to lead the way again—this time, by opting out of Obamacare and replacing it with ColoradoCare, a universal health care system governed by those who rely on it. Proponents presented far more than the requisite 99,000 signatures required to put the initiative on the 2016 ballot in Denver today, though they must be verified in the coming weeks.

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