VERMONT MEDICAL SOCIETY RESOLUTION

Support of a single-payer, national health program

As adopted at the VMS Annual Meeting on November 7, 2020

BE IT RESOLVED that the Vermont Medical Society express its support for universal access to comprehensive, affordable, high-quality health care through a single-payer national health program; and be it further

RESOLVED that the Vermont Medical Society will support a national health program provided it meets these core criteria and principles:

a) Promotes universal, equitable coverage for all US residents (regardless of immigration status);

b) Provides comprehensive and high quality coverage for all medically necessary or appropriate services, including inpatient and outpatient hospital care, primary and preventive care, long-term care, mental health and substance use disorder treatment, dental, vision, audiology, prescription drug and medical devices, comprehensive reproductive care (including maternity and newborn care, and abortion),

c) Prioritizes affordability for all, including: no cost sharing (no premiums, copays or deductibles), a ban on investor-owned health care facilities, and prescription drug prices to be negotiated directly with manufacturers;

d) Reimburses physicians and health care practitioners in amounts that are sufficient, fair, predictable, transparent and sustainable, while incentivizing primary care;

e) Allows for collective participation by physicians and other practitioners in negotiating rates and program policies;

f) Promotes global operating budgets for hospitals, nursing homes and other providers. Continues to move away from fee-for-service reimbursement models to more flexible payment models that incentivize better outcomes and more coordinated care;

g) Allocates capital funds for hospitals separately from operating budgets;

h) Eliminates the role of private health insurance companies, thereby greatly reducing administrative costs and burdens on clinicians;

i) Allocates funding for graduate medical education that assures adequate supply of generalists and specialists

j) Reforms medical school costs to reduce the amount of debt recent graduates face;

k) Protects the rights of healthcare and insurance workers with guaranteed retraining and job placement;

l) Provides high quality software (EMRs) developed in public sector and provided free to all practitioners;

m) Creates a legal environment that fosters high quality patient care and relieves clinicians from practicing defensive medicine; and

n) Is funded through a publicly financed system, based on combining administrative savings and the current sources of public funding, with modest new taxes based on individual’s ability to pay