

Universal Health Care Commission meeting summary

October 12, 2023

Hybrid meeting held electronically (Zoom) and in-person at the Health Care Authority (HCA)

2–4 p.m.

Note: this meeting was recorded in its entirety. The recording and all materials provided to and considered by the Commission is available on the [Universal Health Care Commission webpage](#).

Members present

Vicki Lowe, Chair
Bidisha Mandal
Dave Iseminger
Senator Emily Randall
Jane Beyer
Joan Altman
Representative Joe Schmick
Representative Marcus Riccelli
Mohamed Shidane

Members absent

Senator Ann Rivers
Estell Williams
Kristin Peterson
Nicole Gomez
Stella Vasquez

Call to order

Vicki Lowe, Commission Chair, called the meeting to order at 2:03 p.m.

Agenda items

Welcoming remarks

Chair Lowe welcomed Commission members to the fourteenth meeting and provided a land acknowledgement.

Meeting summary review from the previous meeting

The Commission members voted by consensus to adopt the August 2023 meeting summary.

Public comment

Chair Lowe called for comments from the public.

Judy D'Amore encouraged the Commission to adopt Whole Washington's proposal for universal health care.

Washington's presentation to the Commission at their August meeting is available [at timestamp 46:10](#).

Cris Currie had audio issues and noted that he would submit his comments in writing.

Ronnie Shure, President, Health Care for All – Washington, advocated that the Commission use resources allocated in the [2023 operating budget](#) to hold monthly meetings that extend to three hours (including FTAC meetings).

Raleigh Watts, volunteer, Health Care for All – Washington, encouraged the Commission to use Whole Washington's proposal for universal health care as a starting point for Washington's new system.

Lori encouraged the Commission and FTAC to add Whole Washington's proposal to their respective upcoming meeting agendas.

FTAC updates: Guidance on Employee Retirement Income Security Act of 1974 (ERISA)

Pam MacEwan, FTAC Liaison

FTAC's assessment of options to include ERISA can be found in the ERISA Memo under Tab 4 of the October meeting materials. FTAC agreed that it's not yet clear the best method of capturing employer contributions and incentivizing them to permit their employees to enroll in the universal system.

Legal challenges may be inevitable which would create delays in implementing a universal system. However, a combination of approaches that includes options that are not likely to be challenged could ensure some aspects of reform could be implemented without delay. FTAC agreed that a combination of voluntary employer participation, providing employers a meaningful alternative to what they may already offer, components of provider incentives/regulation, and a funding mechanism should be part of the new system.

FTAC members agreed that this should be revisited once additional elements of the system, such as the benefits and method(s) of provider reimbursement, have been developed by the Commission.

Commission discussion on FTAC's ERISA guidance

Commission members' questions and comments in response to FTAC's guidance can be found in the audio recording for the October 12, 2023 meeting [here at timestamp 28:40](#).

Adoption of 2023 legislative report

Chair Lowe

The Commission's work in 2023 was captured in the legislative report. Chair Lowe asked for comments and discussion before adopting the final report. The Commission members present voted unanimously to adopt the 2023 report.

Planning for 2024 and continuing transitional solutions discussion

Liz Arjun, Health Management Associates (HMA)

Last year, the Commission outlined three phases of the larger system design. Eligibility (phase one) was selected as the design element of focus in 2023. In 2024, the Commission will build upon this work and continue phase

one development on benefits and services, provider reimbursement and participation, and cost containment. These elements will then help identify cost estimates and financing for the new system.

The 2023 legislature also provided additional resources (through Fiscal Year 2025) to support the work of the Commission and FTAC. The Commission discussed how the new resources should be utilized.

The Commission agreed that a community engagement process should be established once benefits and services are developed. Commission members will revisit discussion on how the additional actuarial/ modeling funds should be used. Commission members determined that extending meetings to three hours under the current meeting cadence would be the most effective use of resources.

Commission members expressed interest in getting more information (including access to presentation recordings) about projects underway that are focused on health care affordability, equitable access, and quality and how they connect to the Commission's transitional solutions. The Commission discussed which categories of transitional solutions should be focused on in 2024. The Commission chose to focus on the following categories in 2024: coverage/enrollment, providers, and purchasing. More from the Commission's discussion can be found [here at timestamp 1:39:08](#).

Adjournment

Meeting adjourned at 3:58 p.m.

Next meeting

December 14, 2023

Meeting to be held on Zoom and in-person at HCA
2-4 p.m.