



Podcast Transcript

When Lawmakers Fail to Act: Taking Single Payer to the People

*Featuring Georgia Davenport
Founder & Operations Director, Whole Washington*

Dispatcher: 911, what's your emergency?

*Caller: America's healthcare system is broken and people are dying!
(ambulance siren)*

Welcome to **Code WACK!**, where we shine a light on our callous healthcare system, how it hurts us and what we can do about it. I'm your host, **Brenda Gazzar**. This time on **Code WACK! What are the most significant roadblocks in achieving single payer in Washington state? What strategies is the movement implementing as a result?** We recently spoke to **Whole Washington** founder and operations director, **Georgia Davenport**, who has helped lead the all-volunteer initiative effort for universal health care in the state. She also ran for Washington state House of Representatives in 2020.

(5-second stinger)

Welcome back to Code WACK! Georgia!

[\(00:51\)](#):

Davenport: Thank you so much for this opportunity to talk to you.

[\(00:54\)](#):

Q: *Can you talk about the connections and interplay between healthcare disparities and other disparities in your state?*

[\(01:00\)](#):

Davenport: Yeah. I just went to Seattle over New Year's and driving, it's just horrifying – driving from here to there seeing the way the conditions people are living in and I don't have the numbers off the top of my head but a lot of bankruptcy and homelessness is actually a result of people not being able to afford their medical care. A few years back, there was a big news story in Bellingham about a woman – two seniors – who committed suicide because they couldn't afford the pills for the wife – things like that are happening all across our state, but we don't really hear much about it right now. There's a lot more happening in the news, but it's getting worse and worse out there. Seattle, you just see tons of tents and, you know, the issue that I also see is like when somebody goes to the emergency room, they've been out in the cold and they don't have health insurance, the taxpayers are paying for that.

[\(02:12\)](#):

So if we had a system where we just, we didn't have any of those holes...the funding for the Whole Washington Health Trust would cover all of that. It's got really great funding mechanisms. We have 14 billion or sorry, 14 billionaires – not 14 billion billionaires. We have 14 billionaires who live in Washington state, and that's not a coincidence. We don't have an income tax in Washington state so there's a reason why they choose Washington state to live in and we need to tax them. They're, you know, making so much money off our system and we need to ensure that they're paying their fair share. So part of the funding mechanisms for the Wole Washington Health Trust is a capital gains tax and that would help with like catching all those people who are falling through the cracks right now and ensuring that we have funding so that we can reimburse the providers who are giving care, unfortunately not preventative care, which is one of the things that people really need.

[\(03:20\)](#):

You know, I always like to give the example of somebody who has a little, you know, skin tag or growth that might be cancerous, but they don't want to go to see the doctor because who knows how much copays or deductibles they have and so it grows and

grows and grows and what could have been like a hundred dollar visit initially ends up being cancer and maybe they have to go through chemotherapy at that point and then it's tens of thousands of dollars. So really the savings are astronomical when you think about it with universal health care, just for the preventative care alone.

[\(03:59\)](#):

Q: Right. That is such an important point. I'm so glad you made it. Thank you. Let's talk a bit about the politics of healthcare reform in your state of Washington. Last year, a Washington state Senator introduced Senate Bill 5204, which would create a healthcare trust allowing everyone in the state to access affordable health, vision, dental and mental health care. Your coalition helped draft the bill. What happened to it?

[\(04:22\)](#):

Davenport: Yeah, so it never got a hearing and it never made it out of committee. This is one of the reasons why I really like the initiative process. If you go to the PDC (Public Disclosure Commission) website, which is the public campaign disclosure website here in Washington state, every single campaign and candidate has to file with the PDC, any time they get a donation or an expenditure. Well, you can see that the two chairs of the Senate and House Healthcare Committees get tens of thousands of dollars from health insurance PACs (Political Action Committees) and pharmaceutical PACs. Again, I don't think it's any coincidence that these bills never make it out of committee when you look at the campaign donations to some of these leaders...What you can do, like for example, Senator Annette Cleveland, who is the chair of the Senate Healthcare Committee in Washington state, you can just Google Senator Annette Cleveland PDC, and it'll pop up with all of her campaign donations and just so many health PACs and Pharma PACS have maxed out on their donations to her and she's the one who refuses to even give our bill a hearing,

[\(05:26\)](#):

Q: It sounds like Whole Washington is focusing its efforts on the upcoming ballot initiative. Is that right?

[\(05:31\)](#):

Davenport: Yeah. I mean, we do try to still lobby our representatives for (SB) 5204 because that would be the easiest way. You know, we don't want to have to go collect 400,000 signatures and then do a 'get out the vote' campaign for a year. That's two

years that people are continuing to die. People are continuing to ration insulin. They're not able to pay their medical bills so they end up homeless. I mean, that's two extra years of organizing while this system continues and so it would be really nice if our representatives would just pass the bills so that we could save some Washingtonians' lives, but I'm pretty cynical on whether or not they're going to make any movement in the next few years, despite the fact that this pandemic has really demonstrated that we need a different system.

[\(06:28\)](#):

Q: Right, now is the bill still active or does it need to be reintroduced?

[\(06:33\)](#):

Davenport: So we have a two-year session essentially here in Washington state. So it's introduced the first year and then it's live for two years. So it's still able to get passed but it's a shorter session – the second session so that's always their excuse to not do anything substantial that 'they don't have the time.'

[\(06:58\)](#):

Q: So what do you think then is the more likely possibility for getting single payer in Washington? Do you think it is the legislative route or is it the ballot initiative route at this point?

[\(07:10\)](#):

Davenport: I think it's going to have to be a ballot initiative. It's just clear to me that, you know, after a certain amount of time of lobbying that I've done. Actually, when I've gone to Olympia to lobby, I've gotten some pretty honest answers sometimes when I've talked to representatives, basically (they are) letting me know that the health insurance lobby is super, super strong, that they're always in the office of these representatives and they're maxing out their campaign donations so who are they going to listen to? I mean, I can't go to Olympia and lobby full-time like these insurance companies can. I have a child. I have a day job. I'm also, you know, north of Spokane so it's a bit of a drive, but these insurance lobbyists, that's their job. Their job is to go in and make sure that the representatives are hearing their cause, not our cause.

[\(08:04\)](#):

Q: Right. So what do you think then is absolutely essential for the initiative to succeed?

[\(08:10\)](#):

Davenport: Yeah, we need a lot of volunteers. Again, we need 400,000 signatures. So our goal is to get 800 signature captains and like I said we are about at 60 so we need a significant amount more. Also it's kind of expensive to print petitions. I think last year it cost us about \$22,000 because they're big, they're big pieces of paper. Because of Washington state law, you actually have to print the entire bill on the back of each petition so it's pretty expensive to print them. So donations, if you're, if you're in a different state and you're thinking, well, this would be amazing if one state did it, you know, I feel like it's a domino effect. This is how it happened in Canada, too. Saskatchewan passed it and then the rest of the provinces were like, 'Hey, that's working really well. We want it too.'

[\(08:59\)](#):

So I feel like if Washington goes first or California goes first or New York's really close too with their bill, I think that's just inevitable that other states will follow and then we can use that as like an example of why we need it nationally for Medicare for All, which I support wholeheartedly. I actually went to the Medicare for All hearings, but yeah. We have these beautiful Red Berets on our website you can purchase. The executive director of Red Berets for Medicare for All started Red Berets for Medicare for All a few years ago. It's just a great symbol of solidarity. You can put your buttons on it. Oh see, I'm mirrored here. (laughter)

[\(09:41\)](#):

So if you ever go to marches, actually, they're really warm. I just wear them in the winter here. It's great. But you can purchase a red beret from our website to show solidarity with our campaign. There's also Red Berets organizations in a bunch of different states now. I know New York has one, California has one so you can join one of their organizations and find out how you can get involved in a state campaign. But yeah, if somebody out there is listening and you want to donate to help us 'open the floodgates' is what we say on Twitter, we're going to open the floodgates so that more states can follow our example.

[\(10:17\)](#):

Q: *I love it. When are you trying to get it on the ballot?*

[\(10:20\)](#):

Davenport: So it would be on the ballot in 2023. What happens is you collect signatures, so we would start in about April of 2022. We can file in March. We start in

April, 2022. We collect all the way to December 2022 and then we turn in the signatures and then it would be on the ballot in 2023. But if we don't get on the ballot, we're just going to keep trying. I mean, this system is unsustainable and inhumane. So we just, if we fail, we're just going to keep trying. We can't fail and give up.

[\(10:53\)](#):

Q: Right. And what would it mean for you to win single payer in the state of Washington?

[\(10:58\)](#):

Davenport: It would mean I have 49 more states to help with and the national effort, of course. So you know, I do also really believe that we need to address climate change so I'll work on that too, but I'm not going to just sit back and say 'we did it. Yay!' because there are so many people suffering in this country.

[\(11:22\)](#):

Thank you, Georgia Davenport. Whole Washington is set to file its single payer ballot initiative this month in March and will start collecting signatures for the effort in April.

[\(11:32\)](#):

Do you have a personal story you'd like to share about our 'wack' healthcare system? Contact us through our website at heal-ca.org.

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