



Building A Healthier Virginia: Ensuring That Every Virginian Has Access to Quality, Affordable Health Care

Virginia successfully implemented Medicaid expansion in 2019 after an onerous and hard-fought battle with Republican legislators. Now, the system is working. With more than 500,000 additional Virginians enrolled, people are seeing doctors, obtaining life-saving prescriptions, and have been treated for cancer, diabetes, high blood pressure and mental health or substance use disorders (SUD).¹ As Virginia's 72nd Governor, Terry was proud to fight for expansion and lay the groundwork by embedding the \$421.7 million estimated savings from expansion into his outgoing budget and securing the critical provider assessment on hospitals to help fund it. Now, it is time for Virginia to build on its record and continue breaking down barriers that prevent people from living healthy lives, especially as we recover from the effects of the COVID-19 pandemic.

Having equitable access to high-quality, affordable health care is not only a basic human right, it is also the only way we are going to be able to rebuild a strong economy, eliminate unjust racial health disparities, and ensure Virginia's children are school-ready and have the best chance for success. Medical and prescription drug costs continue to rise, and paired with the overwhelming prevalence of job loss due to the pandemic, more and more Virginians are suffering and going without care amid a public health emergency. Virginia has made tremendous progress in expanding health care, but this pandemic has laid bare the health care inequities that have existed in our system for too long.

More than 700,000 people in the Commonwealth currently lack health insurance, including 100,000 children,² and we know that Black and Brown communities are more likely to be uninsured than their white counterparts.³ Making matters worse, Black and Brown Americans are significantly more likely to experience health disparities when it comes to heart disease, maternal

¹ "Access Dashboard." Virginia Department of Medical Assistance Services, 1 Mar. 2021, www.dmas.virginia.gov/#/accessdashboard

² "Profile of Virginia's Uninsured." *Virginia Health Care Foundation*, Feb. 2020, www.vhcf.org/data/

³ "Virginia Must Declare Racism As A Public Health Crisis." *Voices for Virginia's Children*, 4 Feb. 2021, vakids.org/our-news/blog/virginia-must-declare-racism-as-a-public-health-crisis-2.

and infant mortality, cancer, diabetes, and more.⁴ Since the pandemic started, we have seen appalling new inequities, as these communities get infected with and die from COVID-19 at a rate one and a half times higher than the rest of the population.⁵ This is not only unacceptable, it is morally wrong, and we have to fix it.

Addressing these inequities and lack of access once and for all is going to require bold leadership. As Virginia's 72nd Governor, Terry fought every single day to ensure that every Virginian had access to health care, with fighting for Medicaid expansion being one of his proudest accomplishments. When Republicans failed to take action, Terry refused to take no for an answer, implementing his "A Healthy Virginia" plan, which extended coverage to tens of thousands of Virginians in need and created a first-of-its-kind program in Virginia that provided free dental care for low-income pregnant women. Terry also made sure Virginia's public health system was well-equipped to respond to future health emergencies. Terry led the Commonwealth's preparation and response to the Ebola outbreak, creating a statewide command group and a \$2 million response fund for the fight against Ebola before a single case even reached Virginia. By the end of his term, Virginia was one of the top three states in the nation in terms of preparedness for future health emergencies.⁶

Terry also stood as a "brick wall" to protect reproductive health care rights when he was governor, fighting fiercely against extreme Republican attacks. He overhauled the anti-choice Board of Health when he took office, and immediately unraveled the harmful regulations they put in place, keeping every reproductive health clinic in Virginia open that Republicans tried to close. Terry also vetoed every anti-reproductive health bill passed by the General Assembly – including multiple bills that would have defunded Planned Parenthood in Virginia. He was proud to sign now-Speaker Filler-Corn's legislation requiring insurance companies to cover a year's supply of birth control pills at one time, the first reproductive rights legislation that had passed in a decade.

Every single Virginian deserves the security and peace of mind that comes from having comprehensive healthcare coverage. It is time for big and bold solutions to ensure that every Virginian has access to high quality, affordable health care, and Terry is ready to get back to work for our Commonwealth. Terry won't stop fighting to ensure that every Virginian has access to the necessary and life-saving health care coverage that programs like Medicaid and the Affordable Care Act (ACA) provide. President Biden, a key architect of the ACA and a good friend of Terry's, intends to expand and strengthen coverage during his presidency. Terry will work with the Biden Administration to make the ACA accessible to more Virginians.

Make Health Care More Accessible and Affordable

During his presidency, Donald Trump worked tirelessly to dismantle the Affordable Care Act (ACA) and destabilize the individual insurance market, and Americans and Virginians paid the price. Additionally, Virginians living in rural communities continue to lack basic access to health

⁴ "African Americans More Likely to Have High Blood Pressure, Diabetes, CDC Says." *AARP*, 2/3/20 1

⁵ "As Pandemic Deaths Add Up, Racial Disparities Persist — And In Some Cases Worsen." *NPR*, 23 Sept. 2020, www.npr.org/sections/health-shots/2020/09/23/914427907/as-pandemic-deaths-add-up-racial-disparities-persist-and-in-some-cases-worsen#states

⁶ "2020 Index." National Health Security Preparedness Index, 2020, nhspi.org/states/virginia/

care and face serious shortages in providers.⁷ We cannot rebuild our post-COVID economy if Virginians do not have access to quality, affordable health care. We must ensure premiums are affordable, consumers are protected, and the insurance marketplace is healthy and competitive. As governor, Terry will:

- **Implement a state reinsurance program.** During the 2021 General Assembly, the legislature took an important step toward creating a reinsurance program by passing enabling legislation. Now we must secure approval of a Section 1332 state innovation waiver under the ACA, which will allow us to access federal funds to support a reinsurance program. Reinsurance helps insurers offset some of the costs of covering enrollees with high medical expenses, which allows insurers to keep premiums lower for the rest of their enrollees. These programs have a proven track record of reducing premiums, increasing insurer participation in the market, and stabilizing the individual market. Every state that has implemented a waiver-funded individual market reinsurance program has seen lower premiums for those ineligible for subsidies as a result. Some states have experienced premium reductions of 30% or more that have continued year after year.⁸ If we are truly going to make healthcare more affordable for Virginians in need, we have to secure a 1332 waiver in Virginia. As our next governor, Terry will work with the Biden administration to get this done.
- **Provide financial assistance to help Virginians afford health care premiums.** A key benefit of standing up a state-based exchange is the ability to offer direct financial support to Virginians to purchase insurance through premium tax credits or subsidies. In fact, about 88% of Virginians who enrolled in a plan through the marketplace have received a tax credit to help pay their premium.⁹ Still, the rise in premiums, deductibles, and copays can make healthcare coverage feel out of reach, especially if families do not qualify for federal assistance. Individuals who make around \$50,000 or \$105,000 for a family of four, have historically not qualified for assistance, leaving them with minimal relief options if their employer does not offer affordable coverage.¹⁰ Virginians have struggled to afford coverage for long enough. President Biden has already begun to address this problem, and as governor, Terry will work with the Biden administration and the General Assembly to secure additional funds and expand access to critical subsidies.
- **Expand opportunities for telehealth and make current flexibilities permanent.** The COVID-19 pandemic has illuminated the many benefits of telemedicine in providing care when individuals might not have the opportunity to visit their provider in person. Additionally, telehealth opportunities save both the patient and the provider time. In fact,

⁷ “Underserved Areas.” *Virginia Health Care Foundation*, www.vhcf.org/who-and-how-we-help/workforce-initiatives/underserved-areas/

⁸ “The Benefits and Limitations of State-Run Individual Market Reinsurance.” *The Commonwealth Fund*, 11 Nov. 2020, www.commonwealthfund.org/publications/issue-briefs/2020/oct/benefits-limitations-state-run-individual-market-reinsurance

⁹ “State Health Care Snapshots: Virginia.” *Kaiser Family Foundation*, 2020, www.kff.org/statedata/election-state-fact-sheets/virginia/

¹⁰ “House Stimulus Bill Would Expand Eligibility for Affordable Care Act Subsidies.” *CNN*, 10 Feb. 2021, www.cnn.com/2021/02/09/politics/aca-subsidies-stimulus-house-democrats/index.html

telemedicine saves patients over 100 minutes of time compared to an in person visit.¹¹ This is especially critical for rural communities that are already more likely to face provider shortages, especially in specialty care, and transportation challenges. Telehealth has been shown to vastly improve outcomes for rural communities.¹² As governor, Terry will work within the flexibility provided by the federal government to maximize virtual care options for those with Medicaid or state-regulated health insurance plans, eliminate unnecessary restrictions on practitioners, expand Virginians' access to specialists, and leverage technology so that every Virginian can benefit from telehealth. He will also work to drastically expand broadband and technology literacy so that every community can not only access telehealth, but can effectively navigate the technology to take advantage of it.

- **Create an Office of Health Insurance Oversight at the State Corporation Commission.** From 2017-2020, Virginians purchasing insurance through the individual market saw a 17.8% increase in premiums, which were among the highest in the nation.¹³ The rising cost of health insurance is crippling for many Virginians who were already struggling to afford healthcare costs. Virginia's families deserve protection from premium gouging and assurance that any rate increase is justified. This is especially critical as Virginia begins implementing a state-based health insurance exchange. The State Corporation Commission has been under-resourced for too long, preventing the agency from effectively serving as a watchdog for Virginia consumers. As governor, Terry will work to create an Office Health Insurance Oversight, solely focused on improving the quality and affordability of health insurance sold in Virginia. This will help ensure that plans sold on the state-based exchange reflect industry best practices to improve the health of Virginians while constraining rising health care costs.
- **Improve health care access and outcomes for rural Virginians.** Over one million Virginians live in a rural community, and for too long they have lacked access to basic health services and have experienced significant health disparities. Nationwide, people who live in rural communities are more likely to die prematurely from every one of the top leading causes of death in America.¹⁴ In Virginia, we know that rural communities do not have enough providers to meet the needs of their residents.¹⁵ This is especially true when it comes to dental care, as some rural communities in Virginia may have only one dentist per 5,000 residents, and no safety-net provider.¹⁶ Terry attended the Remote Area Medical clinic each year when he was governor, which provided free medical and dental clinics in southwest Virginia and saw firsthand that no Virginian should lack access to

¹¹“Four New Statistics That Prove That Telemedicine Isn't Just a Pandemic Fad.” Medical Economics, 8 July 2020, www.medicaleconomics.com/view/four-new-statistics-that-prove-that-telemedicine-isn-t-just-a-pandemic-fad

¹²“What Works? Strategies to Improve Rural Health.” *County Health Rankings & Roadmaps*, www.countyhealthrankings.org/reports/what-works-strategies-improve-rural-health

¹³“Marketplace Premiums and Insurer Participation: 2017 – 2020.” *U.S. Health Report*, Jan. 2020, www.urban.org/sites/default/files/publication/101499/moni_premiumchanges_final.pdf

¹⁴“Telehealth in Rural Communities.” *CDC Center for Disease Control and Prevention*, 18 Aug. 2020, www.cdc.gov/chronicdisease/resources/publications/factsheets/telehealth-in-rural-communities.htm

¹⁵“Underserved Areas.” *Virginia Health Care Foundation*, www.vhcf.org/who-and-how-we-help/workforce-initiatives/underserved-areas/

¹⁶“Dental.” *Virginia Health Care Foundation*, www.vhcf.org/who-and-how-we-help/dental/

necessary care because of whether they live. As governor, Terry will partner with the Biden administration to expand access to coverage and care by increasing the availability of telehealth services, investing in Virginia’s federally qualified health centers (FQHC) that provide care to those most in need, expanding access to basic dental services in schools, improving access to transportation, ensuring medical students get the training they need to support rural populations and developing innovative regional solutions that get Virginians the care they need. He will also work to expand loan repayment programs for medical professionals who stay and work in a rural area.

- **Hold big Pharma accountable to ensure affordable drug prices.** The rising costs of prescription drugs continue to burden families across the nation and in the Commonwealth. One in four Virginians struggle to pay for their prescription medications,¹⁷ and nearly one-third of Americans report that they do not take prescription medications as prescribed by medical professionals because they are too expensive.¹⁸ That is unconscionable. No person should have to choose between taking medically-necessary prescriptions or providing for the basic needs of their families, especially while pharmaceutical companies and other related industries rake in enormous profits and raise the price of drugs. That is why Terry announced his [*Prescription for a Healthier Virginia*](#), which will create a state watchdog for consumers that will set limits for drug prices and keep high-cost drugs affordable, and calls for a Prescription Drug Sunlight Law to give Virginians clear information about drug costs and price increases. Terry is committed to fixing this broken and predatory system and will hold industries accountable for preying on vulnerable Virginians.
- **Improve long-term health care and support aging Virginians.** Older adults are at the greatest risk of developing chronic health conditions that require around-the-clock care, either in long-term healthcare facilities or by home care aides.¹⁹ This is becoming an increasingly serious issue in Virginia, as our elderly population is anticipated to nearly double in size between 2010 and 2030.²⁰ Moreover, the pandemic has highlighted the need to better support older adults, caregivers and Virginia’s institutional long-term care infrastructure. The shocking reality is that 3.2 percent of total COVID-19 cases are found in nursing homes, yet they result in 32 percent of deaths from the entire Commonwealth.²¹ These facilities also continue to experience staffing shortages at alarming rates, making it difficult to ensure the highest quality of care.²² We have to do better for our most vulnerable community members. As governor, Terry will support efforts that allow older adults to age in place by expanding access to in-home care

¹⁷ “State Health Compare.” *Map | Percent Who Made Changes to Medical Drugs Because of Cost in the Past Year by Age | State Health Access Data Assistance Center*, statehealthcompare.shadac.org/map/73/percent-who-made-changes-to-medical-drugs-because-of-cost-in-the-past-year-by-age#13/24/110

¹⁸ Kirzinger, Ashley, et al. “KFF Health Tracking Poll – February 2019: Prescription Drugs.” KFF, 1 Mar. 2019, www.kff.org/health-costs/poll-finding/kff-health-tracking-poll-february-2019-prescription-drugs/

¹⁹ “Long Term Care In Virginia.” AARP, Dec. 2009, assets.aarp.org/rgcenter/health/state_itcb_09_va.pdf

²⁰ Sen, S. (2017, July 05). 1 in 5 Virginians will be over 65 years by 2030. Retrieved March 03, 2021, from <http://statchatva.org/2017/07/05/1-in-5-virginians-will-be-over-65-years-by-2030/>

²¹ “Report Outlines Recommendations to Improve Long-Term Care.” CBS 19, www.cbs19news.com/story/43042011/report-outlines-recommendations-to-improve-longterm-care

²² “Virginia Nursing Home Deaths Reach Record Highs, Staff Shortages Climb.” AARP - States, states.aarp.org/virginia/virginia-nursing-home-deaths-reach-record-highs-staff-shortages-climb

options and exploring opportunities to leverage Medicaid to compensate caregivers that support their loved ones. Additionally, he will partner with our community colleges to provide training for caregivers at no cost. Terry will also work to address employee retention by raising wages for home health care workers and ensuring access to paid sick and family medical leave.

Enhance and Strengthen Virginia Medicaid

As Virginia's 72nd Governor, Terry fought the Republican legislature to expand Medicaid and provide coverage to hundreds of thousands of Virginians in need, and when Republicans refused to act, Terry took action. During his administration, he extended coverage for basic health services, dental care, mental health services, substance use disorder services and more to tens of thousands of Virginians. In fact, the comprehensive substance use disorder treatment and recovery benefit he established through Medicaid has become a model for other states.²³ Still, Terry knows that we can continue to leverage Medicaid to deliver better health for Virginians in need. As governor, Terry will:

- **Streamline and modernize Medicaid enrollment.** In light of the pandemic, it is more important than ever for eligible Virginia families who are uninsured to be able to enroll in Medicaid quickly and easily. Previously, Virginians have struggled with complex, paper-based applications, bureaucratic processes, language barriers, and notoriously long wait times to enroll in Medicaid. In fact, 30 states outrank Virginia in Medicaid application processing times,²⁴ and we rank 30th overall in eligibility and enrollment.²⁵ This is unacceptable. Applicants with serious health conditions should not have to be left waiting and wondering whether they will be able to get the care they need. As governor, Terry will dramatically shorten wait times for Virginians who are awaiting a determination as to whether they qualify or not. Terry will also modernize the Medicaid enrollment process, minimize paperwork by automating more processes, simplify the rules for eligibility, and leverage an individual's eligibility or enrollment in other benefits like SNAP to enroll them into Medicaid.
- **Improve outreach to Medicaid eligible individuals.** Access to affordable coverage has always been critical to ensuring the health of Virginians, and it has become even more important during the COVID-19 pandemic. Many Virginians have lost their jobs and subsequently, their health insurance. As Governor, Terry will mobilize additional resources to reach as many Virginians as possible who might be eligible for Medicaid and encourage them to enroll in coverage. Targeted outreach to Latinx communities and families with children will be a top priority of Terry's to counteract the Trump Administration's harmful anti-immigrant rhetoric and policies over the last several years. Terry will also focus on culturally competent outreach that builds trust and ensures community members are engaged in their own language. No Virginian who is eligible for

²³ "We Really Do Have a Solution to the Opioid Epidemic — and One State Is Showing It Works." *Vox*, 10 May 2018, www.vox.com/policy-and-politics/2018/5/10/17256572/opioid-epidemic-virginia-medicaid-expansion-arts

²⁴ "How Quickly Are States Connecting Applicants to Medicaid and CHIP Coverage?" *Kaiser Family Foundation*, 11 Jan. 2019, www.kff.org/report-section/how-quickly-are-states-connecting-applicants-to-medicaid-and-chip-coverage-findings/

²⁵ "States with the Most and Least Medicaid Coverage." *WalletHub*, 23 Mar. 2020, wallethub.com/edu/states-with-the-most-and-least-medicaid-coverage/71573

coverage should have to go without coverage simply because they aren't aware of the resources available to them.

- **Create a Medicaid “buy-in” option on the exchange.** Virginians who earn less than \$17,775 or \$30,305 for a family of three may qualify for Medicaid,²⁶ but those who make just over that threshold often have trouble paying for out-of-pocket costs such as deductibles and coinsurance, even with federal subsidies to help offset the cost of their premiums. As governor, Terry will leverage Virginia’s Medicaid program infrastructure and purchasing power to create a Medicaid-like plan that would be available on the new state-based exchange for those who do not qualify for Medicaid but are having trouble paying for coverage. This option will help further stabilize the insurance market and expand coverage by offering an affordable insurance plan to those with low incomes.

Promote Health Equity and Eliminate Racial Health Inequities

Dr. Martin Luther King Jr. once said, “Of all the forms of inequality, injustice in health care is the most shocking and inhumane.” For too long, Virginia has tolerated health injustice and failed to take appropriate actions to dismantle it. We cannot continue to accept incremental progress while communities of color struggle with higher rates of high blood pressure, diabetes, and mental illness, higher mortality rates from cancer and heart disease, and increasing challenges accessing quality health care.²⁷ Never has the disparity been so apparent as with the COVID-19 pandemic. Though the Hispanic and Latino communities comprise only 9% of Virginia's population, they account for 17% of Virginia’s COVID-19 cases and 19% of hospitalizations.²⁸ Black Virginians also make up a disproportionate percentage of COVID-19 cases hospitalizations, and they are 1.7 times more likely to die from COVID-19 than white Virginians.²⁹ Enough is enough. As Virginia's 72nd Governor, Terry worked tirelessly to expand Medicaid to hundreds of thousands of Virginians and expanded coverage through his “A Healthy Virginia Plan”. As our next governor, he will continue to fight for every single Virginian and break down racial health inequities once and for all. Terry will:

- **Address maternal mortality for Black women.** Black women, regardless of income, die at an alarming rate during or after childbirth compared to white women. In fact, in Virginia, Black women are three times more likely to die from pregnancy complications than white women.³⁰ This is beyond unacceptable -- it is negligent. Governor Northam and his administration have prioritized this issue, working to secure doula coverage under Medicaid and extend coverage for a full year for postpartum women. As governor, Terry will build on these efforts and continue to break down these disparities. Research

²⁶ “Medicaid/FAMIS (Virginia's State Sponsored Health Insurance Program).” *Virginia Health Care Foundation*, www.vhcf.org/looking-for-help/health-insurance/state-sponsored-health-insurance-the-famis-programs-and-medicaid/.

²⁷ “Health Disparities by Race and Ethnicity.” *Center for American Progress*, 7 May 2020, www.americanprogress.org/issues/race/reports/2020/05/07/484742/health-disparities-race-ethnicity/

²⁸ “Race And Ethnicity Data By State, Virginia.” *The COVID Tracking Project, The Atlantic*, updated 3/2/21, <https://covidtracking.com/race/dashboard#state-va>

²⁹ “COVID-19 Maintains Deadly Grip On Black People In DC.” *WJLA*, 11/1/20, <https://wjla.com/news/local/covid-19-maintains-deadly-grip-on-black-people-in-dc>

³⁰ “Lawmakers Act to Correct Racial Disparity in Maternal Mortality Rates.” *VPM: NPR*, 3 Mar. 2020, vpm.org/news/articles/11186/lawmakers-act-to-correct-racial-disparity-in-maternal-mortality-rates

suggests that the continued expansion of Medicaid is associated with lower rates of maternal mortality.³¹ This expanded coverage will include better maternity care, essential home visiting programs for new mothers that increase access to support and education, mandatory mental health screenings during and after pregnancy, and ensuring every woman has access to lactation support and counseling.

- **Require consistent, standardized reporting on health data by race and ethnicity.** In order to eliminate health disparities, we need consistent, frequent reporting of health data by race and ethnicity, including by subpopulations. The COVID-19 pandemic revealed glaring gaps in racial health data collection in Virginia, especially in settings like nursing homes. Without collecting this data, it will be difficult, if not impossible, to uncover existing disparities, target resources appropriately, and measure progress against our goals to eliminate them. Terry will use this data to publish an annual Virginia Health Equity Scorecard, clearly reporting on priority health measures and disparities that the Commonwealth can track over time. Terry will also use this data to focus resources and attention on communities in Virginia with the greatest need and disparities.
- **Expand and diversify the health care workforce.** Eliminating health inequities will require an expansion and evolution of the current health care workforce in the Commonwealth and improving trust between health care professionals and Black and Brown communities. Historically racist and discriminatory practices have understandably led these communities to distrust health care professionals, which has further exacerbated disparities by preventing care-seeking behavior or compliance with care plans.³² One way to improve trust is to diversify our workforce. In Virginia, the number of Black and Latinx physicians in practice remains strikingly low, making up 19% and 9% of physicians in Virginia respectively.³³ Virginia needs a broad array of health care workers who come from the communities they serve and as Governor, Terry will explore opportunities like loan repayment programs and the creation of new residency slots specifically for students in underrepresented health professions who commit to practicing in Virginia. Building a diverse and broad workforce of physicians, nurses, and allied health professionals is a critical step in Virginia being able to eliminate health inequities for good. Terry will also improve cultural competency and bias training for medical professionals.
- **Address social factors that hinder good health for communities of color.** Individual health is determined by more than one's access to health care, and is heavily influenced by social factors like access to nutritious food, stable housing, a safe physical environment, and economic stability. Communities of color face barriers to good health

³¹ "Adoption of Medicaid Expansion Is Associated with Lower Maternal Mortality." *Women's Health Issues*, 25 Feb. 2020, [www.whijournal.com/article/S1049-3867\(20\)30005-0/fulltext](http://www.whijournal.com/article/S1049-3867(20)30005-0/fulltext)

³² "A Legacy of Mistrust: African Americans and the US Healthcare System." *Proceedings of UCLA Health*, 2020, proceedings.med.ucla.edu/wp-content/uploads/2020/06/Wells-A200421LW-rko-Wells-Lindsay-M.D.-BLM-formatted.pdf

³³ "Virginia's Physician Workforce: 2018." *Healthcare Workforce Data Center*, Jan. 2019, www.dhp.virginia.gov/media/dhpweb/docs/hwdc/medicine/0101Physician2018revised.pdf

in many of these dimensions.³⁴ Far too many people of color experience poor health due to lack of access to healthy food options, safe and stable housing, and clean outdoor environments.³⁵ As governor, Terry will work with the Biden administration to obtain a waiver from Centers for Medicare and Medicaid Services, allowing Virginia to invest more resources in addressing these social determinants of health in communities of color. Terry will leverage these funds as well as community partnerships to improve the health of these communities to ensure every Virginian has a shot at a healthy life.

- **Establish a statewide social determinants of health coordinator at the Virginia Department of Health.** In December, Governor Northam directed \$10 million in federal CARES funding to support the implementation of a statewide screening and referral system through Unite Us. This important investment will allow Virginia to truly move the needle on social determinants of health and better coordinate systems of care to provide for Virginians. Innovation is already occurring across the public and private sectors, but there are concrete steps the Commonwealth can take to accelerate progress and ensure more equitable outcomes. Terry will establish a statewide position under the Commissioner of Health dedicated to supporting social determinant screening and referral systems, including capacity building for community service providers and statewide data analysis to assess gaps in services and program effectiveness.
- **Provide all Virginia’s children a chance at good health.** Terry has already committed to ensuring every child in Virginia has access to a world-class education, but to make the most of this opportunity, all children, regardless of their background, also need a healthy start in life. Sadly, health disparities among children of color persist across the healthcare spectrum including in mortality, care access and quality, and preventative care. Terry will work to eliminate these disparities with a holistic approach by addressing the risk factors and root causes of poor health and by expanding Virginia’s FAMIS program. No child should be at a greater risk of poor health because of the color of their skin, and Terry will ensure all children have every possible chance at a healthy life.

Protect Reproductive Freedom

Republican politicians have been fighting day in and day out for decades to dismantle reproductive freedoms and impose new barriers to care. Now that we are living with a partisan, Republican-controlled United States Supreme Court, reproductive freedoms are under attack more than ever, and right-wing extremists nationwide are chomping at the bit to eliminate a person’s right to choose. These extremists have even used the pandemic to further their agenda, and in eleven states they have used COVID-19 emergency orders to try to limit access to care or impose a ban on abortion.³⁶ This is shameful, and it’s clear it’s time to take the politics out of

³⁴ “Advancing Health Equity by Addressing the Social Determinants of Health in Family Medicine (Position Paper).” *AAFP*, Apr. 2019, www.aafp.org/about/policies/all/social-determinants-health-family-medicine.html

³⁵ “Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity.” *Kaiser Family Foundation*, 10 May 2018, www.kff.org/racial-equity-and-health-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/.

³⁶ “State Action to Limit Abortion Access During the COVID-19 Pandemic.” *Kaiser Family Foundation*, 10 August 2020, <https://www.kff.org/coronavirus-covid-19/issue-brief/state-action-to-limit-abortion-access-during-the-covid-19-pandemic/>

reproductive health care. President Biden has been clear that he will protect reproductive freedoms and repeal laws that impede access to care. Virginians can count on Terry to partner with the Biden administration and continue to draw down federal dollars, improve protections under the ACA and more. As our next governor, Terry will continue the fight to make sure that every Virginian has access to critical health and reproductive health care they need. Terry will:

- **Enshrine *Roe v. Wade* in Virginia’s constitution.** For years, Republicans, including former President Donald Trump, have worked tirelessly to overturn and undermine the monumental and essential *Roe v. Wade*. The decision, which guarantees the right to a safe, legal abortion for every American, is supported by close to 80% of Americans.³⁷ Now more than ever, we have to take every step possible to protect the freedoms provided by this landmark case, and that includes amending Virginia’s constitution to include these protections. As governor, Terry will work with the General Assembly to pass the necessary resolutions and obtain approval from Virginia voters to permanently enshrine *Roe v. Wade* in our constitution.
- **Increase abortion access and coverage.** While every Virginian is entitled to a safe, legal abortion, 93% of counties in Virginia have no clinics that provide abortion services, making it difficult or impossible for Virginians to access this medical service.³⁸ As Virginia’s 72nd Governor, Terry was a brick wall against every attack attempted at a person’s right to make her own healthcare decisions, and he aggressively fought attempts that would further minimize a person’s ability to access care. Since then, Governor Northam and Virginia Democrats have worked to expand reproductive freedoms and protect the right to choose. As our next governor, Terry will continue to stand firm against any attack, and break down barriers so that every Virginian has access to the reproductive health care they need.
- **Ensure every Virginian has access to the contraceptives they need.** Nearly all women will use contraception at some point during their lives, and two-thirds of women in America use some form of contraceptive on any given day whether for pregnancy prevention or treatment of a medical condition.³⁹ Unfortunately, nearly half a million women in Virginia live in contraceptive deserts, which means they do not have access to a full range of contraceptive options or cannot simply go to an appointment to get the care they need.⁴⁰ Making matters worse, pharmacies in Virginia are not required to fill or dispense prescribed contraceptives, which can further impede access. Terry believes that Virginians should be in charge of their own reproductive health decisions. As Virginia’s next governor, Terry will enable Virginians to receive contraceptive care via telehealth, ensure that state-regulated health plans are required to cover any FDA-approved form of

³⁷ “Poll: Majority Want To Keep Abortion Legal, But They Also Want Restrictions.” *NPR*, 6/7/19
<https://www.npr.org/2019/06/07/730183531/poll-majority-want-to-keep-abortion-legal-but-they-also-want-restrictions>

³⁸ “State Facts About Abortion: Virginia.” *Guttmacher Institute*, Jan. 2021, www.guttmacher.org/fact-sheet/state-facts-about-abortion-virginia#1.

³⁹ “Current Contraceptive Status Among Women Aged 15–49: United States, 2015–2017.” *CDC: Centers for Disease Control and Prevention*, www.cdc.gov/nchs/products/databriefs/db327.htm

⁴⁰ “Lack of Access = Lack of Power To Decide.” *Power To Decide*, powertodecide.org/what-we-do/access/birth-control-access

contraception, including over-the-counter contraceptives, and join eight other states in requiring pharmacies to dispense them.⁴¹

- **Prohibit discrimination based on reproductive health decisions.** Virginians should be entitled to make their own reproductive health care decisions, and our laws should ensure that no person is discriminated against because of these decisions. Nationwide, there are disturbing examples of employees being fired from their jobs or penalized for things like taking birth control, accessing fertility treatments, having sex or becoming pregnant outside of marriage, or having an abortion.⁴² And this happens here in Virginia too. In recent years, a Henrico County woman lost her job at a church daycare after getting pregnant without yet being married to her fiancé.⁴³ No person should be penalized for exercising their reproductive freedoms, and national polling indicates that more than 80% of Americans agree.⁴⁴ As our next governor, Terry will protect Virginians and ban discrimination based on reproductive health decisions.

Modernize Virginia's Public Health System

The COVID-19 pandemic has demonstrated that we can never be too prepared, and that our public health system could be put to the test at any moment. Virginians' safety and lives depend on our ability to quickly and effectively respond during a health emergency. Governor Northam's administration has done a tremendous job responding to this pandemic, and as we emerge from this crisis, we must continue to build a robust and modern public health infrastructure. This will be essential to protecting Virginians' future health and economic security. Being proactive in preventing disease and promoting wellness also includes addressing the factors which affect health, such as food, housing, and the environment. As governor, Terry will:

- **Ensure health departments are prepared in times of crisis.** Virginia's local and regional health departments continue to be under-funded, partly due to restrictive funding mechanisms that can prevent them from responding nimbly in an emergency. The COVID-19 pandemic has further highlighted the negative consequences of underinvestment in these agencies. Outside of a pandemic, our state and local health departments are working diligently behind the scenes to prevent public health emergencies, yet Virginia has lost over 52,000 state and local jobs since the start of the pandemic.⁴⁵ As governor, Terry will work with the Biden Administration to draw down additional funds for Virginia's health departments and will work with localities in

⁴¹ "Can a Pharmacist Legally Deny a Patient a Prescription? It Depends." NBC News, 28 July 2018, www.nbcnews.com/news/us-news/can-pharmacist-legally-deny-patient-prescription-it-depends-n894871

⁴² "States Take Action To Stop Discrimination Against Women For Their Reproductive Health Care Decisions." *National Women's Law Center*, Aug. 2019, nwlc.org/wp-content/uploads/2019/09/FS_BossBill.pdf.

⁴³ "Pregnant Mother Pressured by Church to Get Married or Get Fired: Va. News." *Patch*, 1/14/15, <https://patch.com/virginia/fredericksburg/pregnant-mother-pressured-church-get-married-or-get-fired-va-news-0>

⁴⁴ "Voters' Priorities for the New Congress." *GBA Strategies*, 14 Mar. 2019, nwlc.org/wp-content/uploads/2019/05/NWLC-Polling-Memo.pdf.

⁴⁵ "State and local governments have lost 1.5 million jobs since February." *Economic Policy Institute*, 7/29/20, <https://www.epi.org/blog/state-and-local-governments-have-lost-1-5-million-jobs-since-february-federal-aid-to-states-and-localities-is-necessary-for-a-strong-economic-recovery/>

allocating funds to specifically address emergency preparedness as well as racial health inequities. We must also ensure the structure of our local health departments is designed to best serve local communities and equitably meet their day-to-day needs. Preparing for the next emergency begins now, and as governor, Terry will also invest in recruitment, retention, and training of our public health workforce so that Virginians are receiving quality care regardless of their zip codes.

- **Modernize the public health technology infrastructure.** Outdated technology infrastructure and the lack of ability to exchange data -- such as test results, hospital bed capacity, and staffing availability -- in a timely manner can present challenges during normal times but can be debilitating during a pandemic or other health emergency. Governor Northam has shown strong leadership despite these challenges, and our next governor will have to continue his legacy and build upon it. As governor, Terry will invest in the needed infrastructure to create a 21st century public health system that can work seamlessly with the private sector in times of crisis as well as to improve the health of their communities. He will also mandate the standardized and consistent collection racial and ethnic health data needed to track our progress and focus our resources on eliminating inequities.
- **Establish standing regional public-private coalitions.** Private sector partnerships are essential to the public sector response during emergencies. These partnerships can open up critical resources, support communities in need and provide vital insights to inform our public sector response. Despite also being impacted by the pandemic, business, academic, nonprofit and faith-based organizations have shown resilience over the past year and continue to give back to those in need throughout their communities. We must continue to work closely and collaboratively with private sector partners. Terry will invigorate existing regional public-private coalitions and build new ones so that together, we can react swiftly and in a coordinated fashion for the next emergency.

Prioritize Care for Mental Health and Substance Use Disorders

Prior to the COVID-19 pandemic, Virginians were in dire need of access to mental health care and SUD treatment, and the spread of this virus and the measures required to combat it have demonstrated a growing need to invest in our behavioral health system. Over a million adults in Virginia have a mental illness and approximately 300,000 have a serious mental illness that needs immediate attention.⁴⁶ As Governor, Terry expanded health care coverage to nearly 20,000 Virginians experiencing serious mental illness, but there is still work to be done. It's time to focus on improving and allocating more funding for these critical treatments and embracing a "no-wrong-door" approach that ensures we are able to meet someone in need of services where they are, no matter where they seek help. President Biden has set out to expand access to behavioral health care and as Virginia's next governor, Terry will partner with the Biden Administration to ensure that proper funding is allocated to the Commonwealth. Terry's plan will:

⁴⁶ "General Statistics About Mental Illness In Virginia." National Alliance of Mental Illness, namivirginia.org/virginia-statistics/statistics-about-mental-illness-in-virginia/

- **Increase funding for the Virginia Mental Health Access Project (VMAP).** Virginia has faced critical shortages in child psychologists and psychiatrists for many years, and that shortage has only been exacerbated by the effects of COVID-19 that are leaving more children in need of access to services. This is especially true for low-income and minority children. This program, established under Governor Northam, provides essential training to pediatricians and creates regional teams of mental health providers to serve our children.⁴⁷ It is critical that we expand this program to all regions of the state, and expand it to cover children under the age of five, postpartum women, and young adults up to age 26.
- **Allocate new funding for substance use disorder prevention, harm reduction and treatment.** Virginia and states across the nation have been fighting the opioid and addiction epidemic for years, but psychostimulant deaths are on the rise and the COVID-19 pandemic has upended years of progress. People with substance use disorders have been at increased risk during this pandemic due to lack of treatment availability, economic strains and the impacts of isolation and social distancing. In fact, the Virginia Department of Health reported a 66% increase in overdose deaths in 2020, projecting it to be the worst year on record with more than 2,000 deaths.⁴⁸ During his administration Terry championed efforts to address the opioid and addiction epidemic, creating the Governor’s Task Force on Prescription Drug and Heroin Abuse, declaring the opioid overdose epidemic a public health emergency, hosting a multi-state summit, adopting numerous bills to reduce over-prescribing and increase accountability, and securing millions in funding. As our next governor, Terry will continue to invest in new funding for prevention and treatment services, and he will fight to expand evidence-based comprehensive harm reduction strategies like syringe access programs and naloxone distribution. Terry will also break down barriers to employment and housing for people in recovery, ensuring that recovery-friendly services are prioritized.
- **Leverage federal dollars to support permanent supportive housing.** Having access to safe, stable housing is a fundamental need for every human being, and we know that securing and maintaining housing for individuals experiencing mental illness or a substance use disorder can be particularly challenging. In fact, studies demonstrate that 25% of people experiencing homelessness have a serious mental illness, and nearly half have any kind of mental illness.⁴⁹ In addition to increasing access to affordable housing, we must invest in wraparound services that help vulnerable populations maintain stable housing. Permanent supportive housing is an evidence-based, cost-effective model that merges affordable housing with wraparound services to support people experiencing mental illness, substance use disorders, disabilities, and chronic illnesses. We know that Medicaid covers these wraparound services, so we must build on current efforts to draw

⁴⁷ “FAQs: Virginia Mental Health Access Program.” *VMAP*, www.vmap.org/faqs

⁴⁸ “Fatal Drug Overdose Quarterly Report: 2nd Quarter 2020.” *Virginia Department of Health*, Oct. 2020, www.vdh.virginia.gov/content/uploads/sites/18/2020/10/Quarterly-Drug-Death-Report-FINAL-Q2-2020.pdf.

⁴⁹ “250,000 Mentally Ill Are Homeless. 140,000 Seriously Mentally Ill Are Homeless Read More at: <https://MentalIllnessPolicy.org/Consequences/Homeless-Mentally-Ill.html>.” *Mental Illness Policy*, mentalillnesspolicy.org/consequences/homeless-mentally-ill.html.

down every federal dollar available to Virginia and provide this critical service during and after this pandemic.

- **Focus mental health resources on early intervention, crisis prevention and supporting Virginians across the lifespan.** For too many years, Virginia’s mental health system has been underfunded and our community members have paid the price. Under Terry’s leadership, Virginia adopted and began implementing STEP-VA, which is a comprehensive plan to reform our public mental health system and ensure quality, consistent care throughout the Commonwealth. Through STEP-VA, we have increased capacity within our Community Services Boards (CSBs) and ensured that every person has same-day access to being seen. However, Virginia still ranks 37th when it comes to access to care, meaning too many Virginians lack access to care and the services they need.⁵⁰ That is shameful given that Virginia is the 9th wealthiest state in the nation. We must continue building upon the work that has been done to implement STEP-VA and the Behavioral Health Redesign to ensure that every Virginian has access to the care they need. That includes investing in prevention and early intervention services to provide care before a person begins experiencing a behavioral health crisis. We must also ensure that we are leveraging every federal dollar available to Virginia through Medicaid.

⁵⁰ “The State of Mental Health in America.” Mental Health America, 2019, mhanational.org/sites/default/files/State%20of%20Mental%20Health%20in%20America%20-%202020_0.pdf