In Brief

As the U.S. healthcare system shifts toward value-based services and support that address drivers of health outside the traditional scope of health care programs, Medicaid, Medicare and the Affordable Care Act could lead the way in addressing economic, social, equitable issues by reconnecting the water infrastructure to public health issues, which will safeguard clean water access for all Americans.

The Center for Disease Control and Prevention attributes the disinfection and treatment of water as “the greatest health achievement of the 20th century” by increasing life expectancy by 29.5 years, virtually eliminating water borne diseases in the US and by cutting mortality rates in half over the past century by increasing life expectancy by 29.5 years, virtually eliminated water borne diseases in the US and cut mortality rates in half over the past century1. The World Health Organization estimates that implementing universal access to basic water and sanitation program would create $4 of economic benefit for every $1 invested2.

The Problem

Safe and reliable water isn’t free. The collection, storage, treatment, and delivery of water requires substantial investment and care before we can use a single drop.

Even so, water is life. Clean water is the most essential human provision -- not only for drinking needs but also for cooking, sanitation, and cleansing, including the hand-washing required to prevent the spread of disease.

American’s water infrastructure is aging, resulting in an annual (and growing) financing gap of tens of billions of dollars.3 Even with new federal appropriations,4 many water utilities struggle to keep the water flowing safely. As a result, stressed water utilities have been forced to raise rates on American consumers.5 In turn, the economic turmoil of 2020 has made it even more difficult for Americans to pay their water bill, amplifying nationwide equity concerns about water shut-offs.6 Shut-offs also create barriers to following hygiene recommendations that prevent the spread of COVID-19, creating an immediate risk to the health of low-income families.7

Before today’s pandemic, two million Americans do not have running water in their homes. Water services in some communities are worsening, and poor water access disproportionately impacts American communities of color.8

While generally wealthier and whiter communities are well served by water services, communities of color bear the brunt of lower quality service9 and are more likely to fall victim to water shut-offs.10

Today’s Solutions Are Insufficient

A patchwork of national, state, and local programs provide assistance to Americans and public utilities to ensure affordable and reliable access to clean water. Appropriations for assistance programs can ebb and flow with political winds at all levels of government. Even when funded, these assistance programs reinforce hierarchies that allow those in positions of power to decide if American families on the edge will live in water poverty.

1 The US Center for Disease Control, 2016
2 The World Health Organization, 2012
3 American Society of Civil Engineers, 2016; American Society of Civil Engineers, 2011.
Public health crises from Flint to Newark and water poverty in Detroit and in native lands in the West are clear evidence that the current methods are not working. Is there another way? Reliable access to safe water is not simply a utility service issue, it is a public health issue.

**Universal Basic Right to Water** is a collection of approaches that guarantee the necessary amount of safe water to everyone in the United States for the minimal purpose of ensuring personal and public health.

**Policy Concept**

*Can health care payers and providers that serve Medicaid and Medicare enrollees cover a minimum monthly allocation of clean drinking water for all enrollees?*

The concept may help achieve many goals at once: helping Americans pay their most important utility bill, curtailing water shut-offs, dismantling traditional power structures that can be weaponized against the poor, providing reliable funds to water utilities, and affirming that clean water is a basic, inalienable right.

Medicaid provides health care for one in five Americans, covering more than 72 million of the most vulnerable Americans. This includes more than 12 million dually eligible Medicare enrollees who are seniors and people with disabilities. These same families are at the highest risk of water shut-offs that put health in jeopardy while utilities struggle to recoup rising costs. Many programs exist to help American families pay their water bills and, separately, to provide critical funding for water utilities.

**Gallons and Cents**

By definition, Medicaid enrollees are low-income, making them the most vulnerable to rising water rates or to other hardship that may make it impossible to pay the water bill.

In emergency response efforts, public health experts recommend approximately 5 gallons of potable water per person per day. The World Health Organization finds that 12 gallons per day can cover basic needs for drinking, cooking, personal washing, sanitation and waste disposal.

The average American consumes about 120 gallons of water each day. Household needs include drinking, cooking, bathing, and flushing toilets. A fair and equitable bare-minimum daily provision of water for Americans may be closer to 20 gallons.

While indoor water consumption patterns are fairly consistent, outdoor consumption patterns vary across the country primarily due to irrigation. Water pricing also varies due to rate structures and the cost of water services. 20 gallons per day will cost between 5¢ - 25¢ or between $1.50 and $7.50 per month for an average of $4.50 per person per month.

The result is a monthly healthy water allocation of $54 per year for 75 million of the poorest Americans, or about $4 billion per year. This approach can simplify and improve the reach and effectiveness of many similarly-intended public assistance programs while providing stable minimum funds for cash-strapped water utilities.

A similar calculus could be made for the 75 million Americans on Medicare, after first adjusting for people with dual eligibility. These policies could build buy-in for truly Universal Basic Water.

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14 [World Health Organization, 2011](https://www.who.int/submission/2011)


17 Estimates calculated from: Circle of Blue, 2016; Circle of Blue, 2010

More research is needed to unlock the full potential of this concept. Ultimately, a constitutional amendment may be needed to forever guarantee the right of all citizens to universal basic water access.

**A Community of Support**
Polling data consistently show Americans support investing in clean water, however other policy priorities tend to take center stage, leaving America’s many water issues unresolved.

Public interest and advocacy groups are demanding action from Congress and state governments to address a long list of issues: infrastructure, affordable health care, poverty alleviation, safe and reliable water services, racial equity, environmental justice, and much more. What if there were a concept to align these interests?

When access to potable water is reframed as a core tenet of a minimum living standard, Universal Basic Water may galvanize the support of a diverse coalition, providing a key opportunity for consensus, momentum, and a morally just policy victory for all.

**Contact**
This concept was inspired by [We the People of Detroit](http://www.wethepeopleofdetroit.com), and contributions by [Planet Sigmon, LLC](http://www.planetsigmon.com).

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19 Metz and Weigel, 2018: WaterPolls.org.