

Date: March 24, 2025
To: House Health Care Committee
From: Universal Health Care Caucus
Re: S.126

Dear Committee Members:

We, the undersigned members of the informal Universal Health Care Caucus have been meeting every month or so since last biennium in the Statehouse cafeteria. The Caucus consists of legislators and citizens who share a commitment to advancing universal publicly funded health care at the state level.

We offer the following comments on S.126, An Act Relating to Health Care Payment and Delivery System Reform:

1. We agree with the testimony of Elliott Fisher, MD, MPH, who suggested that your committee add a universal primary care component to S.126. (Please see the YouTube recording of Dr. Fisher's testimony on March 18, 2025 at approximately 1 hour five minutes.)
2. We also agree with Dr. Fisher's testimony that, given the alarming crises we face with access, affordability, and hospital sustainability, and given the threat of massive federal cuts in Medicaid funding and ACA subsidies, we need a plan to maintain health services for all Vermonters, and this plan must be put in place well before 2029.
3. In addition to preserving access to health care by enacting universal primary care, we believe that adding a universal hospital care component to the bill will save our rural hospitals. The Canadian province of Saskatchewan started its universal health system by enacting universal hospital care in 1947. Ten years later the Canadian Parliament followed the Saskatchewan example and enacted universal hospital care nationally by a unanimous vote.
4. We understand that adding these components in full detail may be well beyond the scope of what the committee can handle in the remaining weeks of the session. However, we view S.126 as the vehicle by which the groundwork for universal care can be set in motion. The bill could specify that the Health Delivery Plan fleshes out one or more universal care scenarios and report back to the Legislature with a recommendation.
5. You have three universal health care bills already referred to your committee from which language could be extracted and added to S.126. These three bills are H.185, H.267, and H.433.
6. We believe that it is no longer enough to tinker around the edges of the health care issue. Too much is at stake right now—looming hospital bankruptcies, possible massive cuts in federal funding, possible insolvency of commercial insurance companies.
7. Vermont has some of the highest health care costs in the U.S. and these costs are driving our education funding crisis. We support all payer rate-setting referenced to Medicare, and we support other measures in S.126 that attempt to control costs, increase transparency and improve care. But given the magnitude of the crisis, they are not enough. We need a plan to emerge from the worst-case scenario with a functional health care system that meets the needs of Vermonters.

8. Ever since Act 48 of 2011 was paused by former Governor Shumlin, we have heard that there is no political will to work on universal health care, even in increments. Within a few short months, we believe that perception has radically changed. We are witnessing a surge of public opinion in support of universal health care at the state level ever since it became clear that the Trump administration is set on eroding or destroying many public programs that Vermonters rely upon.
9. As members of the Universal Health Care Caucus, we stand ready to support you when you step up with courage and imagination to fill these gaps. Chair Black asked Dr. Fisher for names of people who could testify on S.126 and we are happy to supply you a list of names of people, from both within the state and from outside, who can help you make wise decisions in this all important matter.

Thank you for your consideration.

Sincerely,
Members of the Universal Health Care Caucus

Linda Andrews
Sandra Bettis
Johanna Brakeley, MD
Mary Alice Bisbee
Anna Carey, MD
Walter Carpenter
Robin Chestnut-Tangerman
Rep. Esme Cole
Susan A. Comerford
Liz Curry
Susan Leigh Deppe, MD
G. Richard Dundas, MD
Jane Katz Field
Mark Gibson
Linda Gravell

Huck Gutman
Jean Hopkins
Amalia Kane, MD
Jason Kelley, MD
Jaimie Lynn Kessell
Alice Leeds
Melinda Moulton
Robert Oeser
Ellen Oxfeld
Ethan Parke
Deb Richter, MD
Ann Schroeder
Jeanne Shea
Edward Siqueira
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