

Now is the Time for Green Mountain Care

An Open Letter to Governor Shumlin and the Vermont Legislature from National Advocates for Universal, Publicly Financed Healthcare

In 2011, the Vermont Legislature passed and Governor Shumlin signed into law Act 48, which provided the roadmap for the creation and implementation of a universal, publicly financed healthcare system, Green Mountain Care. The national healthcare justice movement was inspired and energized by this action and vowed to support and promote the country's first healthcare system designed to provide healthcare as a public good through a single-payer financing reform. The victory in Vermont served as a model for organizers in dozens of states and a rallying point to rebuild national momentum for healthcare for all. We were therefore quite concerned to hear that, due to recent political developments in Vermont, Green Mountain Care's continued progress may be interrupted or altered in such a way that it will no longer serve its intended purpose to provide healthcare for all Vermonters as a public good and a matter of right, without financial barriers.

[The struggle to win Act 48 was hard fought](#) by the people of Vermont through public outreach, events and actions, direct interactions with elected officials, and a powerful grassroots [Healthcare Is a Human Right](#) campaign that engaged many thousands of Vermonters in speaking out about their need for healthcare and their readiness to struggle for their rights.

Nurses, teachers, laborers, students, people of various faiths, the undocumented, and so many others joined together to make certain that Vermont's healthcare system would reflect its values of universality and equity. They were supported by a broad coalition united around a vision to advance Green Mountain Care ([click here for more information](#)). Of particular note are the working class Vermonters who told their stories [at a series of public hearings hosted by the Vermont Workers' Center](#), and those same working Vermonters who gave elected officials the political space and courage to advance single-payer public financing. It was an impressive effort that provided an example of real democracy in action not only in Vermont but for the country.

Yet for the next few years, Vermonters were kept waiting as the Administration delayed plans for financing the new health care system. The Legislature was finally scheduled to pass a financing plan for Green Mountain Care in 2015, when on December 17, 2014, instead of presenting his recommendations, [Governor Shumlin announced](#), "In my judgment, now is not the right time to ask our Legislature to take the step of passing a financial plan for Green Mountain Care."

This was a crushing blow to those who had remained loyal to his efforts and had worked to ensure he would finish that work. Just a few, short months earlier during the election season, [Governor Shumlin said](#), "We are moving forward on the nation's first single-payer health care system that contains costs, takes the burden off of employers and simplifies the system for all Vermonters. I was elected to get tough things done, and this may well be the toughest. But I will not rest until it is done."

According to the governor, this dramatic turn of events was brought about by financial challenges in raising the public funds to pay for Green Mountain Care. But Vermonters are already paying for their healthcare. Like everyone else in the United States, they pay nearly twice as much as the OECD average for worse outcomes in an unequal system that denies access to many and pushes many more into financial catastrophe. The challenge is not to find new money, but to share our payments for healthcare in a more equitable, cost-effective way.

Certainly the development of a public, equitable financing plan will require difficult choices and engagement with entrenched interests that do not want to pay their fair share. But study after study has shown that public financing of healthcare would be not only feasible but also optimal for Vermont's residents and businesses. We remain confident that Vermont can and will find the public funding mechanism that supports the full and equitable implementation of Green Mountain Care and reaffirms the democratic process that so convincingly created it.

Governor Shumlin's announcement is a blow not only for the determined people of Vermont but also for those who looked with hope and renewed energy at the successful effort to advance publicly financed, single-payer healthcare and to create a more just society. The blow dealt to Green Mountain Care reached far beyond Vermont's borders and far deeper than the disappointment in one elected official's lack of vision and commitment.

Now is not the time to give up or give in. One decision shall not determine the fate of a right fought for by many. The people of Vermont can and will have the final say in how to establish and pay for a healthcare system that will serve all of their needs, rather than the profits of a few.

We urge the governor and the legislature to redouble their efforts to develop and agree on a public financing plan that advances equity and realizes Vermonters' right to healthcare, respecting the will of the people as expressed in Act 48. Nationally, we vow to redouble our efforts to win healthcare justice in Vermont and throughout the United States.

Signed by

January 8, 2015

1. Amalgated Transit Union
2. Amnesty International USA
3. California Latinas for Reproductive Justice
4. California School Employees Association (CA)
5. Campaign for a Healthy California
6. Center for Popular Democracy
7. Center for Reproductive Rights
8. Colorado Organization for Latina Opportunity and Reproductive Rights
9. Co-operate Colorado
10. FREE! Families Rally for Emancipation and Empowerment
11. Grassroots Global Justice Alliance
12. Health Care for All Colorado
13. Health Care for All Oregon
14. Health Care for All - Washington
15. Healthcare Is a Human Right – Maryland
16. Healthcare For All - South Carolina
17. Healthcare for All Pennsylvania
18. Healthcare NOW
19. Hunger Action Network of New York State
20. Illinois Single-Payer Coalition
21. Jewish Labor Committee (CA)
22. Jobs with Justice
23. The Kairos Center for Religions, Rights, and Social Justice, and Poverty Initiative at Union Theological Seminary
24. Labor Campaign for Single Payer
25. Labor United for Universal Healthcare (CA)
26. Local One IATSE
27. Maine AFL-CIO
28. Maine AllCare
29. Maine State Nurses Association
30. Maine People's Alliance
31. MassCare
32. Media Mobilizing Project
33. Medicare for All – New Jersey
34. Migrant Justice (VT)
35. Ms. Foundation for Women
36. National Economic and Social Rights Initiative
37. National Healthcare for the Homeless Council
38. National Health Law Program
39. National Latina Institute for Reproductive Health
40. National Nurses United
41. National People's Action
42. New Jersey Tenants Organization
43. New York State Nurses Association
44. Northern New Jersey Chapter, National Organization of Women
45. Northwest Health Law Advocates
46. Pennsylvania Association of Staff Nurses and Allied Practitioners
47. Pennsylvania Federation BMWED-Teamsters
48. The People's Press Project
49. Physicians for a National Health Program Western Washington
50. Pride @ Work, AFL-CIO
51. Progressive Democrats of America
52. Public Employees Federation (NY)
53. Public Citizen
54. Put People First – Pennsylvania
55. Reproductive Justice Collective (WI)
56. Resource Generation
57. Sage Community Health Collective (IL)
58. Single Payer Action Network - Ohio
59. Solidarity
60. Southern Maine Labor Council
61. Southern Maine Workers' Center
62. SPARK Reproductive Justice NOW!
63. UAW Local 2322
64. UAW Region 9A
65. United Electrical Workers (UE)
66. UE Northeast Region
67. United for Single Payer (Washington)
68. US Human Rights Network
69. Washington Community Action Network
70. Washington State AFL-CIO