

WE NEED YOU TO SUCCEED!

- **Become a member:** Support VPIRG's work to transform our health care system.
- **Organize:** Become a part of our core health care team and help us organize in communities around the state.
- **Stay informed:** Sign up for our e-alerts to stay up to date on what's happening and how you can get involved.
- **Show your support:** Call or email your legislators to tell them why you support Green Mountain Care.
- **Spread the word:** Write a letter to the editor of your local paper to help build support among your friends and neighbors.

For more info on Vermont's plan and how to get involved, visit us on the web at:
www.healthcarevt.org

VPIRG is the largest nonprofit consumer and environmental advocacy organization in Vermont, bringing the voice of average Vermonters to public policy debates on the environment, health care, consumer protection and democracy.



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How Vermont's patient-centered health care overhaul will boost quality and make coverage more affordable for you and your family.



VERMONT'S HEALTH CARE ROAD MAP



GREEN MOUNTAIN CARE
More Choice, Lower Cost, and Better Care

OUR HEALTH CARE SYSTEM IS BROKEN

It costs too much and is unsustainable.

At \$5 billion a year, Vermont's health care costs are already too high—and they're rising fast. At this rate, we'll be spending \$1.6 billion more per year by 2015—that's an additional \$2500 a year for every man, woman, and child in VT.

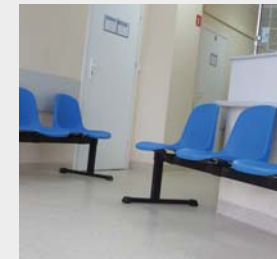


It puts profits over people.

Not only do insurance companies make money by denying you coverage—they also get to decide what treatment you can get and which doctor you can see, regardless of what's best for you.

Too many Vermonters are left out.

47,000 Vermonters have no insurance at all. Thousands more are at risk of losing their coverage if they get sick, change jobs, or lose their spouse. And even those with coverage are going without the care they need because they can't afford their rising co-pays and deductibles.



WE NEED TO PUT THE CARE BACK IN HEALTH CARE

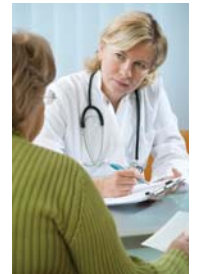
Make it AFFORDABLE

- Eliminate administrative waste, inefficiency, and excess profits.
- Strengthen negotiating power for better care and cheaper prescription drugs.
- Ensure everyone is paying their fair share to support a sustainable system.



Make it about QUALITY CARE

- Simplify payments so doctors spend less time on paperwork and more time with patients.
- Provide access to preventative and primary care from the start.
- Put medical decisions back in the hands of patients and doctors, not insurance companies.



Make it UNIVERSAL

- Everyone pays in and everyone benefits.
- Reliable benefits that cover primary care, hospital services, and mental health.
- Coverage even if you get sick, lose your job, want to go back to school, or start your own business.



WE CAN'T AFFORD TO KEEP WHAT WE HAVE

Right now, even people with coverage can't afford it and are at great risk

- 1 in every 4 Vermonters is struggling to afford out-of-pocket health care costs.
- Unpaid medical bills are the leading cause of bankruptcy—and most of those who file for bankruptcy have private insurance.

The costs are bankrupting our businesses, schools and the state

- Businesses are cutting back on benefits and reducing their workforce to deal with rising health care costs.
- Workers are being forced to contribute more to their premiums and take on higher co-pays and deductibles.
- The budget crisis in our schools and our state is due in large part to the unsustainable growth of health care costs. It's got to stop.

People aren't getting the care they need

- Thousands of Vermonters can't get the treatment they need because profits are the goal, not people.
- Pre-existing conditions often mean higher premiums, unnecessary waiting periods, or worse—being denied any coverage at all.
- High out-of-pocket costs mean people put off seeing the doctor when problems start, relying instead on costly emergency care later for things that could have been prevented.

VERMONT IS ON THE PATH TO A NEW SYSTEM...

The new health care law passed in May 2011 puts Vermont on the path to a new universal and publicly financed health care system called Green Mountain Care (GMC). The law provides a process and a timeline for how we will make the transition to a system that provides health insurance to every Vermonter by 2017.

VPIRG will work to make Green Mountain Care...

Fair & Sustainable

- Everyone pays in and everyone benefits.
- Essential benefits you can count on, whether it's primary care, mental health treatment, or hospital services—you're covered.
- Treat minor problems when they start, rather than needing costly emergency care for things that could have been prevented.
- Cost control and long-term savings we can invest in other priorities like education, infrastructure, and jumpstarting small businesses.

We believe Vermonters must have a say in the process

VPIRG wants to make sure you get to weigh in on what Green Mountain Care looks like. We'll be working to help you have your voice heard throughout the process, especially on big decisions

VPIRG is committed to making sure we succeed!

As Vermont's largest consumer advocacy group, VPIRG is playing a leading role in making sure that Green Mountain Care achieves the goal of quality, affordable health care for all.

Patient-Centered

- Enrollment and coverage that is simple and straightforward.
- Health decisions in the hands of you and your doctor—you choose who you see, and where/when you see them.
- Focus on wellness, prevention, and primary care so Vermonters can stay healthy, which will save money too.
- Less time on paperwork for doctors and hospitals, more time on patient care

like benefits packages and financing. That's why we're signing up thousands of Vermonters right now to be part of our campaign to make GMC the best it can be.



FREQUENTLY ASKED QUESTIONS:

What about federal health reform?

The federal health law is providing Vermont with some of the resources we need to fix health care. This includes the Health Benefit Exchange, which will make shopping for insurance easier and your premiums more affordable while we're building our new system.

What's the Green Mountain Care Board?

A committee of five health care experts that will use their expertise to design common-sense solutions to our biggest challenges—like making coverage affordable, providing fair reimbursement to health care providers, and strengthening our primary care workforce. The board will be accountable to the public, transparent in its decision-making, and make sure that Vermonters get the chance to weigh in.

What happens to my current insurance?

Your current insurance will stay the same until we have built a system that can cover every Vermonter, affordably. If you have federal benefits, like Medicare, you can keep them and will not be asked to pay any more.

TIMELINE

2011

Vermont legislature passed Act 48, laying out the vision and timeline for GMC, creating the GMC Board, and plans for Vermont's health benefit exchange—a requirement of the federal health care law and stepping stone to GMC.

2012

GMC Board begins its work, seeking public input and developing specific plans to improve Vermont's health care system, like reforming hospital budgets, creating reliable reimbursements for providers, and strategies for promoting wellness.

2013

Vermont will decide what the GMC benefit package will look like and how it will be financed. Vermonters will be a part of this decision-making process, there will be plenty of opportunity for public input, and the legislature will vote on the plan.

2014

Vermont's health benefit exchange opens for enrollment to individuals and small businesses. This virtual marketplace will help make comparing plans easier and premiums more affordable during the transition to GMC.

2015-2017

Build on this foundation to design a health care system that is efficient, fair, and affordable for everyone. This includes getting some special permissions from the federal gov't and tightly integrating our system so that it serves the needs of every Vermonter.

