

# Multi-State Comparison of Universal Health Plans

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**Universal Health Plan**  
Governance Board

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# Why a States Comparison

- Vermont
- California
- Washington
- Oregon

# Plan Components Compared

- Enacting Legislation
- Eligibility
- Benefits
- Cost Sharing
- Governance
- Estimated Cost
- Financing

# Enacting Legislation

**Vermont:** H.202 Act 48 (2011)

**California:** AB 1810 (2019) Healthy California for All Commission; SB 770 (2023)

**Washington:** HB 1109 (2019-2020) Universal Health Care Work Group; SB 5399 (2021) Universal Health Care Commission

**Oregon:** SB 770 (2019) Created Task Force; SB 1089 Created Universal Health Plan Governance Board

# Eligibility

**Vermont:** All Vermont residents including out-of-state residents coming into the state for work. Excluded TRICARE and Medicare recipients

**California:** All California residents including individuals without a federally recognized immigration status

**Washington:** All state residents, Medicare, including individuals without a federally recognized immigration status

**Oregon:** All state residents including individuals without a federally recognized immigration status

# Benefits

**Vermont:** Primary, preventive, mental health and chronic care. Hospitalization, rehabilitation, labs, prescription drugs. Dental and vision for children. No dental and vision for adults or long-term care

**California:** Comprehensive: medical, behavioral health, pharmaceutical, dental and vision, which includes primary, preventive and wellness. Including a package for LTSS.

**Washington:** Essential health benefits, plus vision for all participants; Dental and long-term care for Medicaid

**Oregon:** Comprehensive. Includes dental and increased funding for behavioral health. Single drug list. LTSS not included.

# Cost-Sharing

**Vermont:** Minor cost-sharing coverage (94 percent actuarial value insurance)

**California:** No cost-sharing for essential services and treatments covered under the program, including primary, preventive and wellness care services.

**Washington:** No cost sharing

**Oregon:** No cost sharing

# Governance

**Vermont:** Board to oversee a program operated as a public-private partnership between the state and a private sector partner under either a designated public utility or a designated facilitator model

**California:** Undetermined

**Washington:** Undetermined

**Oregon:** Nonprofit public corporation with a board that reports to the legislature and Governor



# Financing

**Vermont:** 11.5% payroll tax, sliding scale “public premium” up to 9.5% Adjusted Gross Income, some cost-sharing, existing state funds and federal waiver funds

**California:** Sliding-scale progressive tax based on income. Federal waivers. Repurposing of current health system expenditures.

**Washington:** Under review by the Commission’s Finance and Technical Advisory Committee

**Oregon:** Payroll tax, a health care income tax on households with income above 200 percent of the federal poverty level.

# Estimated Cost/Population

**Vermont:** \$4.3 billion in the first year (2017);  
Estimated 2017 population: 626,299.

**California:** \$527 billion (No cost-sharing, direct payment to providers, expanding LTSS);  
Estimated 2022 population: 39,028,571

**Washington:** Plan A \$58.9 billion / Plan B \$60.6 billion (2022);  
Estimated 2022 population 2022: 7,564,000

**Oregon:** \$54.62 billion in the first plan year (2026);  
Estimated 2026 population 2026: 4,432,700

# Takeaways

**Vermont's Green Mountain Board.** The Green Mountain Board and its staff have continued to make important policy achievements related to all-payer concepts and Medicare rates.

**California's LTSS decision.** There are compelling policy reasons for UHC to include the LTSS system. It also increases the magnitude and cost of the reform.

**West Coast is a hub of activity:** California, Washington and Oregon are all currently working on universal health care plan design. We can learn from other states in real time.

# Resources

**Vermont:** [Act 48 \(2011\)](#)

[What Other States Can Learn from Vermont's Bold Experiment](#)

**California:** [SB 770 \(2023\)](#)

[Key Design Considerations for a Unified Health Care Financing System in California](#)

**Washington:** [SB 5399 \(2021\)](#)

[Universal Health Care Work Group Final Report](#)

**Oregon:** [SB 1089 \(2023\)](#)

[Joint Task Force on Universal Health Care Final Report and Recommendations](#)



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**Questions?**