

Advocacy Campaign Contact: Chuck Pennacchio, PhD
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Dear Congressman:

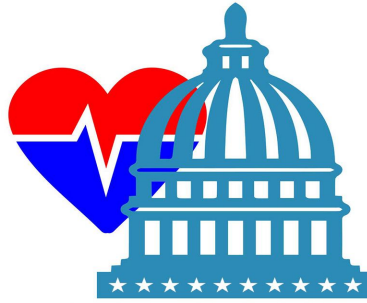
We, the undersigned, urge you to sign on as an original co-sponsor of Rep. Ro Khanna's State Based Universal Healthcare Act by the deadline of May 13th, 2021. Covid 19 has shone a bright light on the inequities, frailties, and unsustainability of our current fractured healthcare system, and it is time that we as a nation take significant steps to address these inadequacies.

As we work towards a universal national plan that works for all residents of our nation, we should also support state initiatives to expand comprehensive healthcare. Time and again states have served as the incubators for lasting systemic change, and it is our belief that we can do so again with healthcare reform.

As you may be aware, Rep. Ro Khanna is reintroducing the State Based Universal Health Care Act to amend the ACA by creating a waiver to allow states to develop their own plans. In fact, multiple states are already passing legislation to ready themselves for a transition to a unified financing system pending federal authority. Rep. Khanna's bill would support these states in their efforts.

Specifically, the State Based Universal Health Care Act requires participating states or groups of states to propose plans to provide health care coverage for at least 95 percent of their residents within five years, and requires benefits provided under state plans be equal to or greater than what federal beneficiaries receive now.

You may be thinking, "But wait, doesn't section 1332 of the ACA already allow states to innovate freely?" Unfortunately, 1332 waivers don't quite go far enough. Here are the main reasons the State Based Universal Health Care Act 1335 waiver is different from, and better than, the ACA's 1332 waiver for the purposes of creating universal state plans:



- SBUHC allows states to integrate Medicare funds into a state plan; ACA’s 1332 does not.
- SBUHC gives access to an ERISA waiver to prevent self-insured employers from opting out of a state plan; 1332 does not.
- SBUHC allows two or more states to apply for waivers together to create a regional plan; 1332 does not.
- SBUHC requires state plans to cover at least 95% of their residents within 5 years; 1332 does not.
- SBUHC creates a broad HHS Secretary-appointed Independent Assessment Panel to review and recommend on 1335 waiver applications; 1332 leaves waiver decisions with the HHS Secretary alone.

Please consider our request, and sign on as an original co-sponsor of this critical legislation as our nation looks to your leadership in the most challenging time we've faced in generations.

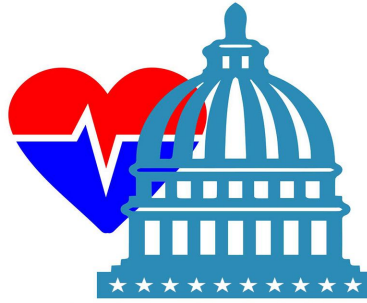
Sincerely,

National Organizations

American College of Nurse-Midwives
Business Leaders for Health Care Transformation
Doctors for America
Healthcare-NOW
Justice for All Network
Labor Campaign for Single Payer
National Nurses United
National Union of Healthcare Workers
One Payer States
People's Action
Progressive Democrats of America
Public Citizen
Social Security Works

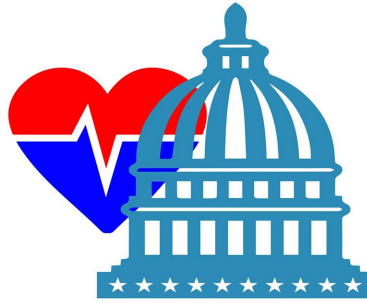
State and Local Organizations

AFT Washington
Alliance for a Healthy Washington, WA
American Indian Health Commission for WA State
Arvadans for Progressive Action, CO
Asia Pacific Cultural Center, WA
Asia Pacific Islander Coalition - Pierce County, WA
Asian and Pacific Islander Coalition of Washington - King County, WA
Asian Counseling and Referral Service, WA
Asian Pacific Islander Coalition-Yakima, WA
Backbone Campaign, WA
BMWED/Teamsters, DC
California Nurses Association
California OneCare/HEAL California



State and Local Organizations. Cont'd:

Capital Chapter PNHP, CA
Children's Alliance, WA
Colorado Foundation for Universal Health Care
Doctors for America - Washington, WA
Doctors in Politics, WA
Economic Opportunity Institute, WA
Faith Action Network, WA
HCA/PHNP-Humboldt, CA
Health care for All Colorado
Health Care for All Oregon
Health Care for All Pennsylvania
Health Care for All Washington
Health Care Is a Human Right Campaign, WA
Healthcare Action Committee, CA
Healthcare for All Minnesota
Healthcare for All Oregon-Action
Healthcare for All PA
Healthcare for All Working Group, CA
IAM District 751 Retirement Club, WA
India Association Western Washington, WA
Indivisible Sequim, WA
Keystone Progress of PA.
Legal Voice, WA
Louisiana Poor People's Campaign
Maine Healthcare Action
Midwives for Universal Healthcare, WA
Minnesota Nurses Association
NAACP - Seattle-King County, WA
North Seattle Progressives, WA
Northwest Health Law Advocates, WA
NOW - Tacoma, WA
NOW - Washington State
Opportunity Council, WA
Our Revolution Pennsylvania
Pacific Hospital Preservation & Development Authority, WA
Pacific Islander Healthboard of Washington, WA
Pennsylvania Council of Churches
Pennsylvania Municipal League
People Demanding Action, VA
Physicians for a National Health Program - NY Metro, NY
Physicians for a National Health Program-Santa Barbara, CA
Physicians for a National Health Program—CA
PrairieWood Consulting, LLC, WA
Progressive Democrats of America CA
Progressive Democrats of America NJ
Progressive Democrats of America CO
Project Access Northwest, WA
PSARA (Puget Sound Advocates for Retirement Action), WA
Refugee & Immigrant Services NW and Snohomish APIC, WA
Retired Public Employees Council of Washington, WA



Rights & Democracy (NH and VT), VT

MaineAllcare

Seattle Indivisible, WA

Single Payer Action Network Ohio, OH

Social Justice Ministry, Live Oak Unitarian

Universalist Congregation of Goleta, CA

Southern Maine Workers' Center, ME,

SPAN Ohio, OH

Statewide Poverty Action Network, WA

United for National Healthcare, WA

*WA Affiliate of the American College of
Nurse-Midwives*

Washington Community Action Network

Washington Physicians for Social Responsibility

West Consulting, WA

Whole Washington, WA