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## Oregon initiative targeted for November ballot

# AFL-CIO, allies launch Fair Share Health Care initiative

SALEM — The Oregon AFL-CIO filed a ballot initiative Jan. 27 that would require Oregon employers with more than 4,500 workers to spend at least 9 percent of their payroll on employee health insurance.

The Fair Share Health Care initiative is modeled after a bill that passed the Maryland Legislature last month. Maryland is the first state to require large corporations to provide health care for their employees. A similar bill has been introduced in the Washington Legislature. Oregon and Washington are among nearly 40 states using the labor-backed Maryland legislation as a model to enact legislation or pass voter initiatives.

“It’s irresponsible and costly when nonunion businesses boost their profits by denying health care to their employees and then let taxpayers pick up the slack,” said Oregon AFL-CIO President Tom Chamberlain. “The Oregon AFL-CIO filed this initiative to force large profitable employers to pay their share toward a healthy workforce and healthy Oregon economy.”

Once given clearance for a ballot title, the state labor federation will begin collecting the more than 100,000 signatures needed to qualify for the November ballot.

“The Oregon AFL-CIO has a history of successfully putting initiatives on the ballot,” said Jennifer Sargent, public relations/research director for the state labor federation. “We have the internal program in place to do that, and we’re seeing a big re-

sponse from the community for support.”

The initiative already has the backing of three of the state’s largest labor organizations: the 30,000-member Service Employees International Union Local 503, the 25,000-member Oregon Council 75 of the American Federation of State, County and Municipal Employees, and the 18,000-member United Food and Commercial Workers Local 555. Locals 555 and 503 are affiliated with the new Change to Win labor federation.

If passed, the Fair Share Health Care initiative would apply to 12 Oregon employers, including Wal-Mart, Oregon Health & Science University, Providence Health System, Legacy Health System, Kaiser Permanente, Intel, Nike, Safeway Inc., Albertsons Inc. and Kroger Co.’s Fred Meyer Stores.

Most of those employers already provide health insurance for their employees, with one glaring exception: Wal-Mart, which employs more than 11,000 workers.

The State of Oregon doesn’t keep tabs on how many employees of private companies receive taxpayer-financed medical insurance, but other states do. And Wal-Mart is the leader in virtually every state.

In Washington, for example, more than 3,100 Wal-Mart employees were benefiting from state-subsidized health coverage in 2004. The cost to taxpayers: \$9.25 million. (See related article on Page 3.)

“It’s not fair that responsible employers play by the rules while some companies shift their health care costs to other employers or the taxpayer,” said Gene Pronovost, president of Local 555 and a co-sponsor of the Fair Share initiative. “UFCW supports initiatives that correct these abuses.”

Washington State’s Fair Share Health Care bill would require companies of 5,000 employees or more to spend 9 percent of payroll on employee health care. The bill passed out of the House Commerce and Labor Committee last month. The new Maryland law (the Legislature overrode a veto by Republican Gov. Robert Ehrlich) requires any private employer with more than 10,000 employees in the state to spend at least 8 percent of its payroll for workers’ health care.

Chamberlain said that by requiring large corporations to report what they are spending on health care for their employees and requiring them to pay their fair share, a Fair Share Health Care Act in Oregon would:

- Reduce the bill Oregon taxpayers pay to cover profitable employers’ labor costs;
- Help alleviate the financial pressures facing Oregon as it struggles to meet a growing need for Medicaid; and
- Level the playing field between companies providing good jobs and benefits to their workers and those that don’t.

## Independent union trying to raid ATU #757 ambulance unit

By DON McINTOSH  
Associate Editor

In the next month, 532 American Medical Response (AMR) ambulance workers in the Portland metro area will have a choice to make: Stay with the local union that has represented them for nearly two decades, or leave to join a startup union headquartered in Sacramento, California.

Ambulance work is changing. Thirty years ago, “ambulance drivers” picked up bodies and took them to the hospital — or the morgue. But life-saving medical technologies have evolved, and today, training requirements for “emergency medical services (EMS) professionals” include having an associates degree and 65 units of continuing education per year.

Paramedics and emergency medical technicians (EMTs) are professional lifesavers who take many of the same risks as police officers and firefighters. But they feel underpaid and under-respected compared to their public sector counterparts, and compared to the hos-



**Pro-ATU emergency medical services workers Doug Weinrick and Dale Montgomery wait in their ambulance for the next call. An independent group is trying to raid their union at American Medical Response in Portland.**

pital workers who take up where they leave off.

To close this gap, some have formed

unions. Portland-area EMS workers joined Amalgamated Transit Union (ATU) Local 757 in 1988. Since that

time, in every union contract they have won improved pay, benefits and working conditions.

Nationally, ambulance service is mostly nonunion. A few local governments provide ambulance service directly, but most grant exclusive contracts to private companies.

At ambulance companies like AMR, unionized units are few and far between, and are divided among at least a half-dozen national unions. The largest of those is the International Association of EMTs and Paramedics (IAEP), which is a subdivision of the 1.8-million-member Service Employees International Union.

Just under two years ago, a pair of SEIU staffers serving an IAEP unit in Northern California came up with a plan to leave SEIU — and take their unit with them as a new stand-alone union for workers. While still employed by SEIU, they called the unit’s stewards and elected officers to a meeting in Livermore, Calif., where they pitched their proposal in a 30-page PowerPoint presentation. The group quickly gathered

member signatures and filed for an election to determine which union had the most support in the unit.

SEIU, stung by the betrayal, fought tooth and nail, but lost the election. It also sued the two staffers — Torren Colcord and Tim Bonifay — for fraudulent concealment, misappropriation of trade secrets and breach of fiduciary duty. The case goes to trial Feb. 24 in Alameda County Superior Court.

Colcord and Bonifay christened their union the National Emergency Medical Services Association (NEMSA).

Since then, they’ve made a bid to go national, chiefly by “raiding” already-unionized units affiliated with other unions. Colcord, NEMSA’s president, told the NW Labor Press the union now has 3,200 members in 13 units, five of which were taken from other unions. All but about 800 of those were in the original Northern California SEIU unit.

In December, a Fort Wayne, Ind., unit of about 100 AMR employees became the latest to join NEMSA, after

(Turn to Page 2)