



Cheers to union fundraising program

Jeff McDonald (left), secretary-treasurer of United Food and Commercial Workers Local 555, leads a toast for retiring Local 555 President Gene Pronovost, at the finish of the 12th annual Pronovost Foundation Golf Tournament. The event raises money for college scholarships and to fight leukemia. This year, 13 scholarships totaling \$14,000 were awarded to members of Local 555, their children and/or spouses. An additional \$20,000 was collected for the Leukemia Foundation. Pronovost is retiring at the end of the year after serving four terms as president of the largest private-sector union in Oregon. Since its inception, the fundraiser has donated more than \$135,500 to the Leukemia Foundation and doled out \$112,600 in scholarship money to Local 555 members and their families.

Big choices ahead devising health care plan to cover all Oregonians

SALEM — A complicated proposal to require health insurance for all Oregonians is nearing the next phase. Six citizen committees that have worked on different parts of the plan since last winter are finalizing their recommendations to the governor-appointed Oregon Health Fund Board. That Board was conceived by last year's Senate Bill 329, which was itself the work of a 2006 interim Senate commission.

Now the seven-member Oregon Health Fund Board will have until October to decide what to propose to the Legislature for its 2009 session, which begins in January. Oregon AFL-CIO President Tom Chamberlain is labor's representative on the Oregon Health Fund Board.

As spelled out by SB 329, the "Oregon Health Fund" is supposed to require all uninsured Oregonians to purchase private health insurance, but also make it available to them at an affordable rate through subsidies, tax credits, and, maybe, pooling purchasing power.

Organized labor was broadly represented on the committees, but some of the unionist committee members are disappointed with recommendations that fell short of gutsy.

"If our vision is too small, we will get nothing," said Lynn-Marie Crider, a health policy expert who works for Service Employees International Union Local 49.

Crider served on the Oregon Health Fund Board's Finance Committee, which was supposed to propose how to pay for the insurance that 600,000 presently uninsured Oregonians would be required to get. The committee failed to reach consensus on how to pay for the plan, and instead put forward several options, including funding it entirely with an em-

ployer payroll tax — or combining a payroll tax with a tax on health care providers or on higher-income Oregonians.

Crider said too little is being proposed to restrain health care costs, a view echoed by Teamsters Local 206 Union Representative Stefan Ostrach, who served on the Board's Delivery Systems Committee. His committee was supposed to look at ways to rein in costs, but Ostrach said they ignored that charge. In the end, he produced a minority report to the Board.

"The direction this whole process seems to be going," Ostrach wrote, "will be a boon for insurance companies, forcing hundreds of thousands of individuals to buy their products — and a boon for hospitals, relieving them of the cost of charity and other uncompensated care."

Ostrach faulted his committee for failing to propose any mechanism to redirect those insurance and hospital windfalls to defray the costs of insuring the uninsured.

Meeting with the Oregon Health Fund Board for the first time June 11, Gov. Ted Kulongoski, too, stressed that the Oregon Health Fund won't be able to expand and sustain health care coverage if it doesn't control and reduce health care costs.

Kulongoski also told the Board what his health care priorities will be for the 2009 legislative session. A requirement that all uninsured Oregonians buy health insurance along the lines envisioned by the authors of SB 329 was not on the list. Instead, the governor wants to expand enrollment in the Oregon Health Plan (the existing health insurance plan for low-income Oregonians), and make another attempt to expand children's health insurance using a tobacco tax increase. [Last year, the Legislature referred

such a proposal to the ballot, but voters rejected it.]

Chamberlain said he took the governor's message as a warning that the Oregon Health Fund Board has to be pragmatic; a comprehensive health insurance program won't be able to begin all at once, but will need to be rolled out in increments. And expanding health coverage among children and lower-income Oregonians would be a first step.

"If next year the Legislature expands the Oregon Health Plan by 100,000 and provides insurance to 125,000 children, that's a third of the uninsured," Chamberlain said.

Kulongoski's goals are compatible with the comprehensive insurance mandate outlined by SB 329, said Ben Westlund, the act's co-sponsor last year in the Oregon Senate.

"[SB 329] does call for a comprehensive plan to be introduced in 2009," Westlund said. "That doesn't mean you push a magic button and achieve those goals in six months or a year."

Westlund said political considerations will have to figure in what the Board proposes. Westlund himself is leaving the Senate to run for state treasurer, and faces Republican Allen Alley, Kulongoski's former economic development adviser, for the office. If he wins, Westlund said he will use the higher-profile "bully pulpit" of the statewide elected office to continue his advocacy of health care reform.

"We've got to build a very strong coalition," Westlund said — in order to bring about the comprehensive health care program the Legislature committed to in SB 329, "because we're getting to the point in the decision-making process where there are going to be winners and losers."

Building a better mousetrap doesn't mean anything, Westlund said. "Passing it through the Legislature — that's something. The sad truth is it's easy to kill a bill in committee, and the bigger the bill, the harder it is to pass."



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