

# ...The end of Obamacare?

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a variety of taxes — on medical equipment manufacturers, tanning salons (because tanning beds cause cancer), and most importantly, by extending the Medicare payroll tax to high income taxpayers and to “un-earned” (investment) income. The most broadly controversial tax — the so-called “Cadillac” tax on expensive employer-provided health insurance plans that cover many union members — has yet to be implemented because Congress voted in 2015 to delay it to 2020.

In theory, the regulated state-level insurance exchanges are supposed to restrain increases in insurance premiums — because insurance companies compete on price for standardized insurance products, and because the ACA says at least 90 percent of premium dollars must go to health care, with only 10 percent for insurance company administration, tax, and profit. Insurance companies are barred from refusing coverage to the sick (those with “pre-existing conditions” in the industry’s soul-less jargon), but in turn, they benefit from the “individual mandate” — the requirement that all the healthy purchase insurance under pain of tax penalty.

In practice, it didn’t work as well as predicted: Too many healthy people remained uninsured, because the tax penalty wasn’t draconian enough and/or the subsidies weren’t rich enough. And maybe more importantly, the exchanges did nothing to restrain the prices charged by hospitals or other health providers. The fact that premiums continued to rise led some people to conclude that Obamacare is a failure, overlooking the fact that an estimated 20 million more people are now insured because of it.

What does the American Health Care Act do to all of that? Here are some highlights:

**It starves off the most effective part of the ACA.** Medicaid would be converted from a federal guarantee to a state block grant, with funds ratcheted down every time someone drops off the Medicaid rolls.

**It gives up most of the revenue.** AHCA keeps the Cadillac tax (though delaying it to 2025), but repeals the Medicare tax on high-income taxpayers and the medical equipment manufacturers.

**It mucks up the subsidy/penalty structure.** In Obamacare, subsidies are based on income, and the least-income get the most subsidy. That makes sense, since the point is to make it affordable enough so people buy insurance who otherwise wouldn’t. AHCA changes subsidies to be based on age, with older people getting more. That will result in

healthy lower-income young people going without, which would destabilize the insurance market. Making matters worse, AHCA replaces the already-ineffective tax penalty with something worse: a rule letting insurance companies charge 30 percent extra to those who’ve gone without insurance. Think about that: If you go without because insurance is unaffordable, a policy making it even less affordable to get back on will guarantee you stay uninsured . . . until you’re sick.

**It brings back ‘pre-existing conditions.’** ACA says insurers can’t refuse coverage to those with pre-existing conditions, but AHCA says states could let insurers charge them more.

AHCA passed May 4 by 217-213, with no hearing, no analysis from the Congressional Budget Office, and no support from Democrats. The bill’s fate in the U.S. Senate is uncertain. Thanks to the filibuster rule, if the Senate’s 48-member Democratic caucus sticks together, it could defeat AHCA or any other bill to undo the ACA, or at least engage in history-making debate if Republicans are prepared to duke it out on the Senate floor.

— Don McIntosh

## How your member of Congress voted

**FOR:** Oregon Republican Greg Walden

**AGAINST:** Washington Republican Jaime Herrera-Beutler; Oregon Democrats Earl Blumenauer, Suzanne Bonamici, Peter DeFazio, and Kurt Schrader.

## UNION DEMOCRACY



At the May 9 meeting of OPEIU Local 11, President Barbara Melton (left) administers the oath of office to officers Maureen Colvin, Lori Ricketts, Kim King, Sandra Dowling, Debi Turk and Doug Luse.

## Colvin wins top job at Local 11

In mail ballots counted May 3, Maureen Colvin won election to a three-year term as executive secretary-treasurer of 1,900-member Office and Professional Employees International Union (OPEIU) Local 11. Colvin has worked as a union rep at Local 11 since 2007, and had been serving as interim executive secretary-treasurer since her predecessor Mike Richards retired at the end of 2016. Executive secretary-treasurer is the local’s top elected office, and a full-time salaried position responsible for overseeing a staff of three at Local 11’s Vancouver headquarters.



Maureen Colvin

expected to go before the U.S. Supreme Court.

Colvin outpolled fellow long-time business rep Rick Wilson 125 to 66 to win the election. Colvin said she expects Wilson will continue as a union business rep.

She’ll also be responsible for renegotiating the current Northwest Natural contract, together with Wilson, the Local 11 rep assigned to the company. That contract expires November 2019.

Local 11 represents 617 workers at Northwest Natural, 258 at Clark County and 153 at the City of Vancouver, plus workers at Columbia River Mental Health and Columbia Wellness, and office workers at local unions and union-associated businesses in Washington, Oregon, Idaho, Montana and Utah.

Except for executive secretary-treasurer, other expiring union offices were filled by nominees who were unopposed:

Over the next three years, Colvin said she hopes to get more members involved, particularly as the union contends with the threat of “right-to-work” via a case that’s

- **Vice President:** Doug Luse
- **Recording Secretary:** Debi Turk
- **Trustee:** Kim King
- **Executive Board:** Sandi Dowling, at-large seat; Chuck Strange, public employee seat; Lori Ricketts, utility seat

Two positions received no nominations and remain vacant: sergeant-at-arms, and an at-large executive board seat.

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