

...Labor enters debate over Medicare For All

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a narrative that union members would lose out.

Health insurance benefits are one of the hallmarks of union membership: 94% of union-represented workers have employer-provided medical benefits, compared with 67% of non-union workers. In the building trades, union-sponsored health and welfare trusts provide high-quality health benefits that are the pride and joy of the union and employer trustees who oversee them.

Among Democrats running for president in 2020, Sanders, Elizabeth Warren, Cory Booker, Kamala Harris, Julian Castro, and Pete Buttigieg have said they support Medicare For All. But in several Democratic presidential debates this year, candidates who oppose it have zeroed in on the argument that union members would lose their union health plans under the proposal.

“If they like their employer-based insurance, which a lot of unions broke their neck to get ... they shouldn’t have to give it up,” former vice president Joe

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— Flight attendants union president Sara Nelson



Biden said in July.

At the national level, the International Association of Fire Fighters is the only union outright opposed to Medicare For All. But national union leaders, including AFL-CIO President Rich Trumka, have expressed hesitation about eliminating the union role in health care.

Dudzic and other proponents don’t see it that way. They argue that relieving union employers of the burden of providing health insurance would free up in the neighborhood of \$18,000 a year that could go to wages or other benefits. None of the current Medicare For All bills in Congress would outright require that employers pass the savings on to workers, but Sanders says he wants to modify his bill to do that.

“When someone stands in front of the country and says that single payer is a threat to those with great union plans, I want to scream,” said Sara Nelson, national president of the Association of Flight Attendants at the Portland strategy conference. “We spend more time [at the bargaining table] talking about health care than any other issue. And every time we go there, it’s not about improving health care coverage, it’s about having more costs for the employees.”

Under the current system, U.S. health costs have risen dramatically. Average annual premiums for employer-sponsored family coverage reached \$20,576 this year, a 54% increase from 10 years ago. And deductibles have

doubled in that time on average.

“At nearly every negotiation we enter, the company informs our members that the burden of rising health care costs are eating up a larger and larger portion of our total compensation,” said Machinists International President Robert Martinez Jr. in a Feb. 27 letter urging members of Congress to sign on to Medicare For All.

According to a study published last year in the Journal of the American Medical Association, the United States is spending nearly twice as much on medical care as 10 other high-income countries — not because Americans are sicker or use more health services, but because of higher doctor salaries, higher prices for drugs and medical devices, and vastly higher administrative costs. By one estimate, as many as 2 million people are employed to process (or deny) insurance claims; that’s an administrative cost burden no other country comes close to.

Under the Medicare For All proposals, those administrative costs would be expected to drop dramatically, and the government would use its negotiating

power to obtain lower prices for drugs and medical services.

Moreover, Jayapal’s H.R. 1384 in the House and Sanders’ S. 1129 in the Senate wouldn’t just expand Medicare to cover all U.S. residents; they would also improve Medicare benefits by adding dental, vision, and hearing coverage and eliminating premiums and cost-sharing for patients.

But there’s no question they’d disrupt the current status quo: The bills would retain the Veterans Administration and the Indian Health Service, but would largely eliminate the system in which employers and individuals pay private health insurance companies to act as middlemen.

“The time has come to take health care off the bargaining table by making it a right for all Americans,” wrote Washington State Labor Council President Larry Brown in a March op-ed. “Health care has become the biggest cause of strikes, lockouts and concession bargaining. Unions routinely trade off wage increases and other benefits in order to maintain basic health care for their members and retirees.”



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