



## Hostages to health care? The American workers' dilemma

"You can actually lose your house, your retirement funds, your kids' college funds... simply because you got sick. What kind of a society are we if we can't even grasp that that isn't the way we should be treating one another?" - **Rose Roach**

*911. What's your emergency?*

*America's healthcare system is broken and people are dying.*

Welcome to **Code WACK!**, where we shine a light on America's callous healthcare system, how it hurts us and what we can do about it. I'm your host **Brenda Gazzar**.

This time on **Code WACK!** In honor of Labor Day, we're looking at the trade-offs some workers are making in order to have health care. What choices are families forced to make when they can't afford to insure everyone? To find out, we spoke to **Rose Roach**, national coordinator for the **Labor Campaign for Single Payer** and chair of Healthcare for All Minnesota.

**Welcome back to Code WACK! Rose.**

**Roach:** Great to be here.

**Q: Today, you're the voluntary national coordinator for the Labor Campaign for Single Payer. What is the Labor Campaign and why was it founded?**

**Roach:** So the Labor Campaign was founded back in 2009 because it just became really evident to a number of labor leaders and labor members across the United States that trying to bargain health benefits has just not been working all that well for us and that what we really needed to do was to get it off the bargaining table altogether and doing that we should be fighting for Medicare for All and join in and help to lead the healthcare justice movement in this country. And so our lane, as we see it inside of the healthcare justice movement, is to really work with labor unions, to help them look at health care, health insurance benefits from a worker perspective. Is it truly a benefit for us anymore? The issue is 'do we want our employers controlling our access to health care and using it as a tool against us economically?'

We have seen such severe wage stagnation in this country because when you go to the table and there's only so much money on it, even when you're pushing and you know there's a little bit more there, so much of it ends up going into the pockets of these corporate health insurance companies because the premium went up 10%, 8%, 15%, and everyone panics. They're like, 'that's too much. I can't afford it. I need the employer to pay for it' so we take it off of wages. We're paying for it one way or another and it's time for us economically to stop that nonsense and get to something sustainable both in the health care world and in our own economic household budgets, our own wages.

***Q: Right, so how would Medicare for All then take the burden of healthcare costs off the backs of working people?***

**Roach:** Because we wouldn't have to bargain over health care anymore. It sucks up a great deal of time at the bargaining table. A lot of energy. Sometimes it even pits workers against each other because some workers may not take the employer's provided health insurance and so they really get impacted by that wage stagnation, right? Because they're like, where's the raise? That's what I really need because maybe they're on their spouse's plan so if we don't have to sit at a bargaining table and spin our wheels over this really costly quote unquote benefit, that quite frankly isn't much of a benefit to employers other than when they want to use it to control workers because it's a big cost item for them too and what's their value added at the end of the day? They have to hire a bunch of people that are somehow health insurance experts to try to figure out every year networks and copayments and deductibles and HSAs and all of that kind of stuff. Enough of that nonsense. It doesn't make any sense for workers. It doesn't make any sense for the employers either.

***Q: Right. So in that vein, how does healthcare affect collective bargaining and what would it really mean for workers to take that off the table completely?***

**Roach:** Well, we would know that we had guaranteed health care whether we liked the job we were in currently or not. We could have more mobility, you know, and portability – for ourselves personally, for our own personal growth or people who want to start a business. They're scared to do that because this is hanging over their head, right? I mean it's not a good way for us to really incentivize entrepreneurship or even mobility of workers so that they can move from job to job to job, if that's what they so wish to do.

We would be able to concentrate money on other types of benefits – things like defined benefit pensions. There's many, many working conditions that we have out there in this day and age that are very different than they were maybe back in the thirties or forties that we could negotiate and just knowing that our families, no matter what happened with our work, our families are protected and they have the health care that they need when they need it and we can afford it regardless of what we're doing with our employment, would be huge for workers. Huge freedom. Talk about freedom of choice.

***Q: Yes. Do you, Rose, have any personal stories you can share that kind of illustrate how much of a burden this is currently on workers?***

**Roach:** When you're paying something like 25% of your paycheck or your family's budget towards health care, there's going to be an impact there. People are making decisions on whether or not to buy that medication, whether to take two pills or cut it in half. Whether or not they should even bother going into the doctor's office because maybe they will find out it's something worse and they could end up in bankruptcy.

I have experienced a situation where a worker had to choose which child to cover under health care because you pay more for family than employee plus one or for employee only and (she) wasn't able to pay for both children to be covered 'cause that was going to come out of her paycheck and she was a single mom and couldn't afford to do it. You know, Sophie's choice isn't the way that we should be doing health care in this country and parenting. That's crazy.

***It's heartbreaking to think that she had to choose between her two children not knowing who was going to need it. It's just a big gamble, too.***

**Roach:** Yeah and as it turned out, the one that wasn't covered ended up in an accident and so then, you know, it spins the whole family, right? I mean then you've got to look at potential medical bankruptcy and no other industrialized nation in

the world has something called medical bankruptcy that just doesn't happen. I mean, they think we're crazy that we have such a thing. You get sick or injured and you can actually lose your house, your retirement funds, right, your kids' college funds simply because you got sick. What kind of a society are we if we can't even grasp that that isn't the way we should be treating one another.

***Q: So what happened to this family? Did they end up declaring medical bankruptcy?***

**Roach:** I'm not sure because I didn't hear the absolute end of the story. I just had heard that this was a choice that she had had to make and then unfortunately the individual that they experienced this accident and it really had a serious financial impact on the family. I'm not 100 percent sure if they had to declare bankruptcy or not. I hope that they didn't. But this was, you know, probably 15 years ago now that this story (happened) but these are the kinds of things that when you hear them, it's like, 'okay, I'm dead set now on trying to fix this. This is nuts.'

***Q: Right, right. What role do you think labor can play in achieving a truly fair and sustainable healthcare system?***

**Roach:** Labor can be out front in telling stories, talking about why it is important that health care is not something that is tied to employment and how it is not doing any workers any real benefit when it is like that, when it can just be used against us. I think that in this country, the labor movement has been at the forefront of all great social change that has happened and this is no different. This is our moment. It is an ultimate act of solidarity to stand with workers, whether they are organized in labor or not to say we are humans. We are all susceptible to illness and injury. And as such, health care should not be something that is held over our head. As workers, we should be able to simply access health care when we need it and not just when we can afford it. So I really think the labor movement is key in getting more and more density of labor involved in that fight.

And that is a big part of what the Labor Campaign stands for. We do lots of education, provide all kinds of resources and open up space for all of labor, whether they support Medicare for All or not, to have the conversation about why not, what are your concerns? What would we need to do to bring you on board or what would make you feel better about moving in that direction? So it's a really important role that we're playing inside of the House of Labor. And we have, I think 13 national unions that are affiliated with us and a number of state labor federations as well under the AFL so we have got a pretty good organization to do this work.

***Q: Great. So how involved is labor today in Minnesota and do you happen to know what percentage of unions are on board with single payer in the state?***

**Roach:** I can tell you that the Minnesota AFL-CIO has passed resolutions both in support of Medicare for All at a national level, but also the Minnesota Health plan at a state level. I know that I'm working now with the retirees around what's happening with the privatization of Medicare, which is really bad with Medicare Advantage and you know, many, many employers because health and welfare benefits for retirees is not considered a mandatory subject of bargaining. It's permissive. So many times the employers get to make the decisions and some of them are putting retirees into Medicare Advantage plans and we don't want to privatize Medicare any further than it already is. We don't want to promote that. So working with them about how can we make traditional Medicare better so that it doesn't, people don't want to go into Medicare advantage.

So we have lots of support here in Minnesota for single payer in the labor movement. We've got, you know, SEIU healthcare – SEIU I should say in general, AFSCME has been a supporter. They have come out and stood up at conferences and supported it. Education Minnesota has supported it, which is our teacher's union. We only have one here in Minnesota and they're both combined and so some of the major, major unions that have high density – of course the nurses – all support Medicare for All or single-payer here in Minnesota.

***Q: Great. How can we get labor more involved in this fight in general? What do you think it will take?***

**Roach:** I really think it's a grassroots education campaign. I think it is helping, you know, grassroots members understand 'what are we talking about, what are we not talking about?' There's a lot of what would you call it? You know, loss aversion, right? Fear. Fear of loss. I mean, because if you have what you consider to be something pretty stable because your union and G-d bless unions, they did and have negotiated much better health benefits than employers generally or employment places that don't have organized labor involved. So that's good on them. It's just that we're kind of still all held hostage to the system as a whole and to this industry that keeps wanting to put all these costs on our back right as they profit off of that and so I think it is just having those one-on-one conversations, doing education pieces, opening up that space to talk about this, find out what the fears are and help everyone understand well actually save money, we'll improve, quality, we'll cover everyone and most importantly we'll end up saving lives.

It should impact in a positive way the workers' comp systems. The cost should come down there because the medical will now be moved out of there 'cause we'll

all get access to medical care whether we were injured on the job or whether we fell in front of our house and slipped on ice. Right. We're going to be able to go to the doctor and not have to worry about, 'oh, which system, which payer is gonna pay it? There's a single payer that's gonna pay it. Done.'

***Q: That's right. Do you think it's possible, Rose to win this fight without labor?***

**Roach:** That's a really good question. I really don't think it is. I think labor has to be really heavily engaged and I know that we're not there yet and that's part of our job is to do that, to get labor to resource the campaign and to politically prioritize and by resource, I'm not talking necessarily money, I mean just putting in like maybe it's staff time to help do the education programs, you know, maybe it's help with some communication stuff that we need out of their comms departments, you know, if we're all pitching in on that then, you know, many hands, right, make for lighter work and so we're really making an effort to diversify the work inside of the labor campaign so we have more and more folks from all over the country who are stepping up and joining us in our various working groups to help us really spread the word and get labor more engaged. Because I do think we have to have some serious density, not just in saying, 'sure, we'll pass a resolution, we support it.' We need revolutionary politics, not resolutionary politics.

***Q: That's right. What about all the jobs that would be eliminated under Medicare for All in the health insurance industry and in health provider administration?***

**Roach:** Yeah, I mean, a valid question and a valid concern and one that we as trade unionists care very deeply about and that is why labor has been absolutely critical in the development of the Medicare for All bill. There's a whole section on this issue and it's called a "just transition" and it is all about people who will be impacted by loss of a job, making sure, number one, we got a Medicare for All systems so they lose their job, they're not going to lose their health care. That's number one. But number two is it also provides for a period of time where they will be compensated with their wage so that they can either learn a new craft if they wish to and there is money in there for training as well, retraining programs or you know, we'll still we're going to have some jobs right, that are going to come from this just in a different entity 'cause we're still gonna have to process some level of paper and claims and making sure providers are getting paid, right?

So there will be some of those types of jobs and for those who are already providers inside of like insurance companies, like doctors, nurses, et cetera, listen, we all know we could use them at the bedside. So hopefully they will be encouraged to go back – back to the bedside and start providing direct patient care again. But

that whole section takes care of workers 'cause we were not going to not take care of workers.

***Q: Makes perfect sense. Was there anything else you wanted to say about this issue?***

**Roach:** No, just that if you belong to a union and this sort of rings a bell for you, you can certainly feel free to go on to the Labor Campaign for Single Payer website. You can get contact information there for me and for Eric Vance who is our staff person. Reach out to us. We are happy to talk with you about how to talk about this issue and maybe come in and have a conversation with your union leaders about it.

***Wonderful. Thank you so much, Rose.***

**Rose Roach:** You bet. Thank you, Brenda.

***Thank you Rose Roach.***

***Do you have a personal story you'd like to share about our 'wack' healthcare system? Contact us through our website at [heal-ca.org](http://heal-ca.org).***

***Don't forget to subscribe to Code WACK! wherever you find your podcasts. You can also find us on [ProgressiveVoices.com](http://ProgressiveVoices.com) and on Nurse Talk Media.***

***Code WACK! is powered by HEAL California, uplifting the voices of those fighting for healthcare reform around the country. I'm Brenda Gazzar.***