

Bargaining rights in health care reform

Health care reform is coming. Whether it happens on the state or federal level the call for reform is too great for change not to occur.

To be a part of the reform and have a say in the form health care changes take, the WEAC Board has adopted a principle to reinforce bargaining rights with health care reform. The principle states that **full, free and fair collective bargaining rights must be established which will allow unions to negotiate over both supplemental coverage beyond that provided by the universal plan, as well as a share of the savings from health care reforms.**

The principle aims to give WEAC members a voice in the cost savings borne from a single-payer health care system on the federal or national level.

Should a district save money by moving staff to a single-payer plan, the WEAC principal mandates that any savings to be realized from that move be negotiated by supplemental health care coverage, enhanced salary or a combination of both.

In the meantime, while health care reform is debated on federal and national levels, it is important for WEAC members to maintain the value of their benefits and overall compensation. We are better positioned to have a positive impact on reform efforts if we maintain the value of our benefits. Maintaining benefits includes resisting cost-shifting measures that do not solve the real health care cost crisis.

The health care system needs a real change, one that will provide coverage for everyone. What's needed is real reform – health savings accounts, for instance, are not the answer. Ideas like that just shift costs and don't address the true problems of skyrocketing costs for coverage and practices that put families in jeopardy.

High deductibles and cost-sharing discourage consumers from seeking care. A national 2006 study showed that nearly twice as many privately insured adults with deductibles of \$1,000 or more avoided getting necessary health care or prescriptions when compared to those with deductibles less than \$500. Those people avoided tending to their health because it cost too much. That puts people unnecessarily at risk and causes higher health insurance costs for everyone.

It is unrealistic to expect that patient financial incentives, even if better information is available, will lead to dramatic improvements in quality and efficiency. Most health care costs are incurred by people who are very ill, often in emergencies. Ten percent of the sickest patients account for about 70 percent of all health care spending. It's time to change our prescription and get real on health care.

To get involved in the informational campaign regarding health care, e-mail healthcare@weac.org for e-alerts and share your story by sending it to shareyourstory@weac.org.

For more information about health care reform, visit www.weac.org/healthcare.