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Don't cut Medicare.

The reform bills passed by the House and Senate cut Medicare by approximately \$500 billion. This is wrong." So declared Newt Gingrich, the former speaker of the House, in a recent op-ed article written with John Goodman, the president of the National Center for Policy Analysis.

Now, Mr. Gingrich was just repeating the current party line. Furious denunciations of any effort to seek cost savings in Medicare — death panels! — have been central to Republican efforts to demonize health reform. What's amazing, however, is that they're getting away with it. Why is this amazing? It's not just the fact that Republicans are now posing as staunch defenders of a program they have hated ever since the days when Ronald Reagan warned that Medicare would destroy America's freedom. Nor is it even the fact that, as House speaker, Mr. Gingrich personally tried to ram through deep cuts in Medicare — and, in 1995, went so far as to shut down the federal government in an attempt to bully Bill Clinton into accepting those cuts.

After all, you could explain this about-face by supposing that Republicans have had a change of heart that they have finally realized just how much good Medicare does. And if you believe that, I've got some mortgage-backed securities you might want to buy. No, what's truly mind-boggling is this: Even as Republicans denounce modest proposals to rein in Medicare's rising costs, they are, themselves, seeking to dismantle the whole program. And the process of dismantling would begin with spending cuts of about \$650 billion over the next decade. Math is hard, but I do believe that's more than the roughly \$400 billion (not \$500 billion) in Medicare savings projected for the Democratic health bills. What I'm talking about here is the "Roadmap for America's Future," the budget plan recently released by Representative Paul Ryan, the

ranking Republican member of the House Budget Committee. Other leading Republicans have been bobbing and weaving on the official status of this proposal, but it's pretty clear that Mr. Ryan's vision does, in fact, represent what the G.O.P. would try to do if it returns to power.

The broad picture that emerges from the "roadmap" is of an economic agenda that hasn't changed one iota in response to the economic failures of the Bush years. In particular, Mr. Ryan offers a plan for Social Security privatization that is basically identical to the Bush proposals of five years ago. But what's really worth noting, given the way the G.O.P. has campaigned against health care reform, is what Mr. Ryan proposes doing with and to Medicare.

In the Ryan proposal, nobody currently under the age of 55 would be covered by Medicare as it now exists. Instead, people would receive vouchers and be told to buy their own insurance. And even this new, privatized version of Medicare would erode over time because the value of these vouchers would almost surely lag ever further behind the actual cost of health insurance. By the time Americans now in their 20s or 30s reached the age of eligibility, there wouldn't be much of a Medicare program left.

But what about those who already are covered by Medicare, or will enter the program over the next decade? You're safe, says the roadmap; you'll still be eligible for traditional Medicare. Except, that is, for the fact that the plan "strengthens the current program with changes such as income-relating drug benefit premiums to ensure long-term sustainability." If this sounds like deliberately confusing gobbledegook, that's because it is. Fortunately, the Congressional Budget Office, which has done an evaluation of the roadmap, offers a translation: "Some higher-income enrollees would pay higher premiums, and some program payments would be reduced." In short, there would be Medicare cuts.

And it's possible to back out the size of those cuts from the budget office analysis, which compares the Ryan proposal with a "baseline" representing current policy. As I've already said, the total over the next decade comes to about \$650 billion — substantially bigger than the Medicare savings in the Democratic bills. The bottom line, then, is that the crusade against health reform has relied, crucially, on utter hypocrisy: Republicans who hate Medicare, tried to slash Medicare in the past, and still aim to dismantle the program over time, have been scoring political points by denouncing proposals for modest cost savings — savings that are substantially smaller than the spending cuts buried in their own proposals. And if Democrats don't get their act together and push the almost-completed reform across the goal line, this breathtaking act of staggering hypocrisy will succeed.

Paul Klugman, emphasis added, February 14, 2010 edition

Union NEWS

AFL-CIO News service graphic(s) added



The annual **Labor Media Contest** sponsored by the International Labor Communications Association (**ILCA**) is now open for submissions. If there's reporting you're particularly proud of from 2009—whether you uncovered new facts in an investigative piece, or made an awesome campaign video, or

painted an especially exquisite portrait of a worker in words or images—submit it to the contest. A new prize category this year is social media for those who ran campaigns with social networking tools. Other categories include print, web, photo essay, electronic newsletter, blog and multi-media campaigns. The deadline for submissions is April 1, 2010. Award recipients will be announced in late July and top entries displayed at ILCA's 2010 Awards Luncheon in November in Washington, D.C. Entries must have been published or released in calendar year 2009. The exceptions are website awards which, because of the nature of the medium, will be judged on what is posted this spring.

Snow? Oh, No. It's Still the Economy: Here are a few tidbits worth noting from around the nation's economic scene. Bob Herbert at the New York Times puts the sorry U.S. unemployment rate in clearer—and more painful—perspective today, pointing out how the workers losing jobs are those who had almost no income to begin with. The highest group, with household incomes of \$150,000 or more, had an unemployment rate during that quarter of 3.2 percent. The next highest, with incomes of \$100,000 to 149,999, had an unemployment rate of 4 percent. Contrast those figures with the unemployment rate of the lowest group, which had annual household incomes of \$12,499 or less. The unemployment rate of that group during the fourth quarter of last year was a staggering 30.8 percent. That's more than five points higher than the overall jobless rate at the height of the Depression.

In this cross-post from Huffington Post, Bernard Pollack, who is taking a leave of absence from the AFL-CIO to travel through Africa, and Danielle Nierenberg describe how the Solidarity Center in South Africa is training and educating workers on HIV/AIDS protection. Surrounded by neatly trimmed bushes and flower beds, Johnson Matthey Catalysts in Germiston, South Africa, just outside of Johannesburg, looks more like a botanical garden than a factory. But every day nearly 600 workers pass through its doors to their jobs on an assembly line making catalytic converters that are inserted in cars to reduce pollution, complying with South Africa's auto environmental emissions standards. As we arrived, Percy Nhlapo, a trainer with the **Solidarity Center**, an AFL-CIO affiliated non-profit organization that assists workers around the world who are struggling to build democratic and independent trade unions, was leading a discussion with a group of 10 workers, correcting misconceptions about contracting the HIV virus and urging participants to get tested. The Solidarity Center is working in partnership with the National Union of Metal Workers of South Africa (NUMSA), an industrial affiliate of the country's largest union Federation COSATU, to train and provide free HIV/AIDS testing and counseling to several thousand manufacturing workers a year. Said Percy: *HIV/AIDS affects everyone. Educating workers is the first step in helping them prevent further infection, getting tested is the second.*

AFL-CIO/NEA Labor Solidarity Partnership Agreement Extended: AFL-CIO President Richard Trumka and National Education Association (**NEA**) President Dennis Van Roekel have agreed to extend the **NEA/AFL-CIO Labor Solidarity Partnership** until June 30, 2010. As a result of the historic agreement, **signed in Feb. 2006**, 20 NEA local associations—representing more than 30,000 members in five states and the District of Columbia—have directly affiliated with the AFL-CIO and its state and local bodies. The partnership was to have expired on Dec. 31, 2009. Across the country, NEA affiliates, state federations and local councils report that the partnership has resulted in mutually beneficial relationships between NEA local associations and local AFL-CIO bodies. NEA local associations can continue to affiliate with the AFL-CIO and state and local bodies, while the extension provides the time to determine what changes, if any, should be made to the agreement. The extension also allows the AFL-CIO and the NEA to maintain their intense activity around several serious challenges, including an economic crisis that has resulted in **double digit unemployment** while state and local governments are grappling with unprecedented budget deficits. Together, the partnership will enable the AFL-CIO and NEA to also work together to push passage of **health care reform** and the **Employee Free Choice Act**.



With the nation's capitol under two-plus feet of snow, Nebraska's Sen. Ben Nelson (D) appears to have come down with a case of snow madness—a delirium that sometimes manifests itself in bizarre and illogical actions and speech. Nelson announced yesterday that he would back a **Republican-led filibuster** against President Obama's nominee to the National Labor Relations Board, Craig Becker. The vote is scheduled for later today. **Call your senators today and tell them to stop obstructing President Obama's nominees, starting with Craig Becker.** Nelson says he believes Becker, the Obama

administration's choice for the NLRB, "would pursue a personal agenda there, rather than that of the administration." As Michael Whitney on **FireDogLake** writes: ***How does that make any sense, when it's the Obama administration that nominated him twice?***



John Drinkwater, organizing and mobilization coordinator for the Massachusetts AFL-CIO, sends us this report on how the state federation is helping build the future by tapping into the skills of today's young workers.

Continuing its ongoing mission to develop young union leaders in the Commonwealth, the Massachusetts AFL-CIO's Third Annual Futures Convention elected a new Futures representative to a serve on the

Massachusetts AFL-CIO Executive Council and head the Futures Program for the coming years. This year, delegates at the Feb. 5 and 6 convention voted among a group of three candidates nominated by their fellow delegates and chose Daniel Manning of Electrical Workers (IBEW) Local 2325 as their new rep. Ben Sherman of Sheet Metal Workers Local 17 and Christopher Deane of Iron Workers Local 7 also ran for the Futures seat. Manning will be the third young union member to hold the one-year term Futures seat, taking over for Allison-Doherty-LaCasse, a member of the Boston Teachers Union/AFT who served for the past year and led the Futures program through its successful second year. Jeremy McKeen, a member of the Lynn Teachers Union/AFT, served as the first Futures Representative in 2008.

U.S.: Bottom Of the Pack for Bread-and- Butter Basics



When it comes to ensuring working families have the bread-and-butter basics, the United States is an outlier, there's no doubt. For example:

177 nations guarantee paid leave for new mothers; the U.S. does not.

74 nations guarantee paid leave for new fathers; the U.S. does not.

132 nations guarantee breastfeeding breaks at work; the U.S. does not.

163 nations guarantee paid sick leave; the U.S. does not.

48 nations guarantee paid time off to care for children's health; the U.S. does not.

41 nations provide leave that can be used for child education needs; the U.S. does not.

33 nations provide paid leave to care for adult family members; the U.S. does not.

The cost to Americans is profound.

Every year Americans lose income and homes when they get sick with serious illnesses.

Restaurant workers, health care providers and co-workers spread disease when they go to work with infectious diseases.

Infants fall sick at 1.5 to 5 times the rate when they are not breastfed—by mothers who have little choice.

For decades, we've been hearing none of these issues can be addressed because of the economic cost. The argument has been that if mothers and fathers could afford to care for their newborn children, we'd have fewer jobs; America would be less competitive; it would cost too much.

If people with flu stayed home when they were sick, if Americans with cancer didn't fear losing their job and home when they got sick, it'd cost too much for our country. Well, it turns out not to be true. Some 57 million Americans do not get paid sick leave, or even sometimes unpaid leave, to stay home sick or to care for sick relatives.

In *Raising the Global Floor*, a book that reports on 10 years of research carried out at Harvard and McGill, Alison Earle and I report the findings of the largest global study to look at working conditions, how they affect individual men and women and national economies in 190 of the world's 192 countries.

Can the United States afford to improve working conditions?

Globally, none of the protections described above are linked with lower levels of economic competitiveness or employment.

Of the world's 15 most competitive countries, 14 provide paid sick leave, 13 guarantee paid leave for new mothers, 12 provide paid leave for new fathers, 11 provide paid leave to care for children's health needs, eight provide paid leave to care for adult family members and seven guarantee breastfeeding breaks.

The majority of the 13 Organization for Economic Cooperation and Development (OECD) countries with consistently low unemployment rates provide paid leave for new mothers (12), paid sick leave (11), breastfeeding breaks (9), paid leave for new fathers (9) and paid leave to care for children's health needs (8).

We can afford the change. What we can't afford is the status quo.

Dr. Jody Heymann is a professor in the Faculties of Medicine and Arts at McGill University, where she is founding director of the Institute for Health and Social Policy and founding chair of the Project on Global Working Families. Dr. Heymann has authored and edited more than 150 publications, including Raising the Global and Forgotten

