

Answers to Your Questions About Healthcare Reform

1. Covering the Uninsured Protects Our Members' Benefits: The number of uninsured Americans has continued to grow over the past decade, particularly among private sector workers and retirees. Public employees and retirees with access to quality, affordable medical insurance are rapidly becoming "outliers," and politicians have increasingly targeted their benefits to close state, municipal, and school budgets.

2. Reform Will Strengthen Our 20-Year Health Agreement: In the current economic crisis, some elected officials have called for gutting active and retired State workers' health benefits to balance the state budget. We held the line and preserved retirees' benefits and agreed to minimal increases for active State employees. Reform would expand quality, affordable coverage so that when the 20-year agreement for State and Retiree Division members expires in 2017, it is not an aberration in a system that surely will have gotten worse.

3. Expanding Access Increases Our Bargaining Power: Wages and salaries for too many of our Municipal Division members have not kept pace with increases in medical insurance costs. The proposed health care pooling would allow many of our Union members to spend more time bargaining with their employers for greater economic power, rather than fighting to keep their share of rising healthcare costs down.

4. Saving State and Local Tax Dollars Will Offset Cuts to Members' Benefits: All of our members have been impacted by the economic crisis, especially those in contract negotiations or asked for give-backs in the past 6 months. Reform would save millions through system-wide planning, reduced processing costs, and negotiating drug prices. That would empower public agencies to invest the savings into improving public services and offsetting local property tax increases.



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5. Making Preventative Services More Affordable Keeps More Americans Healthy: The current proposals will eliminate co-payments and deductibles for preventive services in Medicare. Currently, over 70% of costs -- and deaths -- in the U.S. result from chronic diseases, many of which can be prevented or controlled.

6. Achieving Cost-Savings will Strengthen Medicare: Reform would eliminate wasteful overpayments to Medicare Advantage plans, which replace traditional Medicare and private health insurance programs like those retired State employees have access to. Proposed incentives for coordinated, high quality care across the healthcare spectrum would extend Medicare's Trust Fund solvency and improve the benefit for generations to come.

7. Reform Will Protect Retirees' Access to their Doctor: Next year, Medicare funding for doctor payments is scheduled for a 20% reduction. Reform will prevent that cut and help ensure that your doctor keeps seeing Medicare patients.

8. Reform Would Encourage Americans' to Prepare "Living Wills": Medicare would empower individuals to make advanced care directives to their medical professionals, meaning that families -- not the government -- would make their own decisions about end of life care. The reality is that "living wills" are not "Death Panels," and have been around for a long time. In fact we would expect radio host Rush Limbaugh has one of his own.

9. Reform Will Provide Health Insurance to Public Service Workers: While the vast majority of our members have health insurance, a significant number are not covered under a health insurance plan or the cost is unaffordable. Two years ago, a state employee working as a substitute instructor died because she did not have health insurance. The state considered her a per diem employee, although she worked five days a week, 52 weeks a year. She died of pneumonia that could have been easily treated if she had health insurance and access to a doctor.

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