



Why should
OCSEA members
care about
**health care
reform?**



Health care reform is
about **YOU!**

YOUR BENEFITS

PROBLEM: Health care costs are rising and are out of control. OCSEA's Joint Health Care Committee bargains hard for our benefits, but with health care costs growing three times faster than wages, we're often forced to give up well-deserved wage increases just to keep our health care.

PROBLEM SOLVED: At the same time, more than 47 million Americans don't have health insurance because they can't afford it. OCSEA members and others who enjoy decent health insurance then bare the costs of those who cannot afford it. Health care reform will mean everyone shares in the cost and will help make health care more affordable for everyone.

YOUR JOB

PROBLEM: As state revenues continue to dwindle, OCSEA members' benefits and pensions become a target to fill budget holes. However, one of the biggest costs and risks to the state budget is the rising cost of health care. State government must purchase health care for a variety of groups including the sick, disabled and elderly as well as inmates in correctional facilities. When health care costs go up, government budgets are squeezed. When that happens, OCSEA members' job security is at risk.

PROBLEM SOLVED: Comprehensive Health Care Reform will mean employers share the risk equally. Right now state and local governments that provide health care carry a larger risk than do employers who don't offer health care. Sharing risk will make health care affordable—it will cost less and state's can spend their money on maintaining safety net services delivered by front line employees like you.

YOUR HEALTH CARE

While OCSEA members enjoy good health care benefits negotiated by the Joint Health Care Committee, they are constantly being made to do more with less.

EXPLODING

the **MYTHS**
of **Health Care Reform**

MYTH ONE I won't be able to keep my current insurance or doctor.

REALITY: Comprehensive health care reform will fix what needs fixed—not what doesn't. People who are happy with their health insurance company and/or physicians, will be able to keep them. In fact, Americans will have a choice to keep their employer-based plan or, if they qualify, purchase a public plan. Reform will offer continuity for those who wish to keep their current plan and choice for those seeking a different plan. That's peace of mind.

MYTH TWO Costs will go up

REALITY: In fact, because everyone will be covered by a health plan under the reform bill, the risk will be shared across employers equally. This will make health care more affordable, allowing those businesses (or governments) that currently offer employer-based health insurance to continue to do so at decreased risk and cost. For small businesses, tax breaks will allow them to buy coverage with a choice of affordable options.

In fact, health care reform checks and balances will serve as a watchdog for the health care industry to ensure they don't run up employees' out-of-pocket expenses. Costs in fact will be more stable, less hidden and won't eat up your paycheck.

MYTH THREE Quality will go down.

REALITY: Actually, when insurance companies are made to compete with a public option, not only will costs go down, but quality and innovation will go up. Historically, public plans, like Medicare, are more innovative and, and private companies follow their lead. When private companies must compete with a public option, they won't be so quick to deny coverage or shortchange treatment, thus raising the quality of health care.