

Workers pay the cost of **de-listing**

Workers and their families take a major financial hit when public health care is privatized. As provincial governments cut services from the list of what is covered under Medicare (known as “de-listing”), more and more health care costs are shifted into private insurance plans funded on the backs of workers.

Workers fought hard for Medicare. If de-listing continues, we will have to fight hard to keep coverage – and it may mean difficult tradeoffs at the bargaining table.

Health insurance is at the top of bargaining agendas in the US, before wages, benefits and working conditions. American workers look to the Canadian system with envy. We must not let our public system be destroyed by de-listing and privatization. Publicly funded, publicly delivered health care is the best deal for workers – and the economy.

What’s wrong with private insurance?

Private insurance costs more

- Valuable health resources go to administrative costs, advertising and profits for owners and shareholders
- Administrative costs in the American multi-payer system are three times higher than Canada’s single-payer public system, according to a study published by the New England Journal of Medicine
- In the US, private insurance companies make profits by shifting costs to employers, who in turn download those costs to workers through high deductibles, co-payments and premiums
- In 2001, deductibles in the US increased by more than 30 per cent for typical employer-based plans. Premiums are rising by 20 per cent a year

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- A single-payer, universal system like Canada's is the most efficient system, costing less for everyone
 - 8,000 US doctors agree that a single-payer universal system would save billions of dollars and allow them to provide better care for all Americans. They published their plan in the Journal of the American Medical Association

Private insurance limits access to care

- As private insurance moves into areas that used to be covered by public insurance, access to care will depend on your ability to pay, employment and family status
- Private and employer packages rarely provide comprehensive coverage. The extent of coverage will be different for everyone
- Sick people will have the greatest problems getting insurance to cover the costs of care
- As costs increase, coverage falls. Sometimes it's not enough to cover basic surgical procedures

Private insurance offers less security

- Linking coverage to jobs means that when workers lose their jobs, they lose their health care
- Two million Americans lost their coverage last year due to layoffs
- In the US, 42 million people have no health insurance and 58 million people have been forced to go without insurance for a year or more at some point in their lives
- When employers go bankrupt, entire health insurance plans disappear

Private insurance means poorer health

- When you don't have health insurance, you put off health care. Most often this results in more complex care down the road, increasing health costs
- Over 18,000 Americans die prematurely each year because they do not have health coverage

Across Canada, there is a growing list of services that are no longer covered by public health insurance, including some physiotherapy, hearing aid fittings and rehabilitation services.

Our fight

CUPE members are on the front line, fighting to improve standards of living for ourselves, our families and our communities. We are mobilizing to defend our jobs and the services we provide. Workers were a key part of the fight for health care that's available to all – no matter what you earn, where you live or whether you have a job. Keeping public health care strong – and expanding it – is a life and death struggle for workers.

Private insurance is unreliable and unfair. It creates different classes of people, with the rich assured the best care. It also diverts health care dollars away from quality services to line corporate pockets. We must fight to ensure every penny of health care spending goes to care – not profits.

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