

# Quality, Affordable Healthcare for All Oregonians

The Affordable Care Act is just the beginning. Even with this landmark law in place, many Oregonians will continue to struggle unless we address critical issues in the healthcare industry that are driving up costs and preventing access to quality care. Each year, thousands of Oregonians avoid or limit their care due to high healthcare costs, and ever increasing numbers of people are taking on medical debt. With healthcare workers leading the way, SEIU's Act Now for a Healthy Oregon campaign is working to achieve the goal of keeping our communities healthy by achieving the Triple Aim: improving quality, enhancing access, and increasing affordability of care. Our efforts include:

#### **Making Policies That Matter**

In the public arena, we are proposing commonsense ballot measures that take steps to address transparency, quality and affordability of healthcare in Oregon.

#### **Championing Healthcare Reform**

We will enroll 24,000 people by March of next year into Medicaid and the local healthcare exchange and will continue playing an instrumental role in helping to shape and roll out this healthcare law.

#### **Improving Quality of Care**

We are dedicated to making sure healthcare workers have a meaningful voice on the job and continue to play a pivotal role in improving quality patient care.

#### **Creating Good Jobs**

We actively bargain with hospitals and use our labor partnerships across the region to make sure our hospitals provide good jobs, raise standards and ensure that quality, affordable healthcare is available for everyone—including healthcare workers who are dedicated to providing this care.

As part of this campaign, we are looking at commonsense solutions—including the following 5 ballot measures—to provide affordable, quality care for every Oregonian.

#### **BALLOT MEASURE**

Minimum Charity Care

#### THE PROBLEM

Nonprofit hospitals do not pay income or property taxes in exchange for being charitable organizations. Current law provides no guidance about how much free or reduced price care a nonprofit hospital should provide in exchange for their tax-exempt status. We believe all hospitals in Oregon should provide a minimum level of benefits to their community in order to maintain their tax-exempt status.

This ballot measure would require each nonprofit hospital to spend the equivalent of 5% of payments for hospital services on providing charity healthcare and community health-related services.

- Too many Oregonians, including frontline hospital workers, cannot afford their own healthcare bills. People in our community shouldn't have to avoid care, or go into debt, because they can't afford it.
- Oregonians have a right to expect each nonprofit hospital to return a minimum level of charitable care back to our communities.
- All but two hospitals in Oregon operate as nonprofits, allowing them to avoid paying income or property taxes, as well as benefiting from special tax-exempt bonds to build new buildings or remodel existing facilities.

#### **BALLOT MEASURE**

Pricing
Transparency

#### THE PROBLEM

Hospital prices are confusing and typically not disclosed to patients before billing. Hospitals in the same community often charge very different amounts for the same services. They also charge different prices to care for patients with the same health problems, depending on what insurance they have.

This ballot measure would require hospitals to prominently display (in the hospital and on their website) the 'actual price charged' by the hospital for common procedures.

- Consumers are able to comparison shop for everything from groceries to phones to cars. Oregonians should be able to compare hospitals based upon the prices they charge.
- Patients can make more informed decisions about their care if they can compare charges for the same services between hospitals.

<sup>&</sup>quot;I worked at Providence hospital here in Portland for 30 years. The dedicated staff I worked with was committed to providing the best care possible directly to patients. It is so hard to see these same hospital workers having a hard time providing that care with ever-decreasing resources, while hospital executives are getting astronomically high salaries and bonuses. Patient care dollars should actually go to providing quality care."

<sup>-</sup> CAROLYN MATTHEWS, Retired Providence Unit Secretary

## BALLOT MEASURE Quality Transparency

#### THE PROBLEM

Hospitals vary in the quality of service they provide. Some hospitals make more frequent errors than others, but this information is not currently accessible to the public.

This ballot measure would require hospitals to prominently display (in the hospital and on their website) the quality of care provided at the hospital and competing hospitals. Quality of care information would include past performance on measures such as infection rates, mortality rates, patient satisfaction rates and other measures.

- Oregonians should be able to compare nearby hospitals based on the quality of care they provide.
- Hospital quality of care information should be easy for the public to obtain.
- Our community deserves to know the type of care hospitals are providing and make decisions based on this information.

### **BALLOT MEASURE**Reasonable Rates

#### THE PROBLEM

Hospital services have become increasingly unaffordable for many Oregonians. Hospitals in the same community often charge different amounts for the same service and charge different prices to different insurance providers. Many hospitals often charge patients more than double what it costs them to provide the service.

This ballot measure would require hospitals to set up uniform and reasonable rates for individuals and health plans. Prices for services would be capped at no more than 30% above the actual cost of providing care.

- It makes no sense for different hospitals to charge different prices for the same services.
- Price limits would be adjusted to allow hospitals to recover losses from treating low income and uninsured patients through charity and Medicaid care.
- Price limits would not apply to small, rural hospitals designated as Critical Access Hospitals, which face a different set of challenges.

<sup>&</sup>quot;Patients should be empowered to make decisions on their healthcare. It just makes good common sense to be able to make healthcare choices based on the quality of care nearby hospitals provide. If I can choose a restaurant based on ratings from an authority, why can't I do the same for the healthcare I receive? We need to put the power of choice into the hands of the community."

<sup>-</sup> BRYAN LEEDER, ABM Custodian, Lloyd Center



#### **BALLOT MEASURE**

Caps on Executive Compensation

#### THE PROBLEM

Excessive pay for hospital executives is one of the factors driving up hospital costs. However, the salaries and bonuses paid to hospital CEOs have no direct correlation with the quality of patient care that is delivered to our communities.

This ballot measure would cap nonprofit hospitals' executive compensation at no more than 15 times the wages of the lowest paid employee.

For comparison, St. Charles Health System President & CEO Jim Diegel's compensation in 2011 was 29 times the wages of their lowest paid worker.

- Executive compensation is increasing much faster than other employees' pay.
- Resources spent on excessive compensation are not available for other programs and services that directly impact patient care.
- Paying a hospital executive more is not linked to the quality of care patients receive.

- JULIE MARKIEWICZ, Auditor II, Kaiser & Vice President, Healthcare, SEIU Local 49



<sup>&</sup>quot;For our community, for our patients, our hospitals have a responsibility at every level to be transparent."