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New York State Public Employee Conference

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On behalf of the New York State Public Employment Conference representing more than 80 member unions and 1 offer the following statement about the proposed legislation to enact and institute a Single Payer Health Program throughout New York State.

At the outset, let me state that the proposed legislation appears to be an attempt to offer better health services to lower income New York residents as well as undocumented aliens by further bending the working middle class over the table by forcing a two wage earning family to foot the outrageously exorbitant bill in a scheme that is ill conceived and will ultimately result in the complete annihilation of hard earned union contracts which historically provided negotiated health benefits as part of the overall employer costs in wages and overall compensation.

To be more succinct in my evaluation of this legislation as an amalgamation of inconsistent thought processes that attempts to coagulate like oil in water in a feeble attempt to form a cogent health law. I refer you all to the first part of the Bill in the Legislative Findings of Section 2, paragraph 3. It states:

"This Act does not create any employment benefit nor does it require, prohibit or limit the providing of any employment benefit."

Yet, as I look deeper into the legislation, Section 5111 entitled, Regional Advisory Councils, Section 4, Financing of New York Health, Paragraph 29a) that the basic structure of the program is that its benefits will be paid for by a tax on all payroll and self employed income and a non-payroll tax on taxable income not subject to payroll tax. Thus, every employee in New York State is expected to pay 20% of their entire income for this healthcare which flies in the face of negotiated premiums and employee contributions that are already negotiated in their collective bargaining agreements. Therefore, this legislation will change their benefits package by legislative flat and thus become a changed benefit by definition which is inconsistent with the legislation's stated intent.

Another point of schizophrenia is in regards to the effect of this legislation on retirees. Section 5101 (10)(a) states: "this subdivision does not create or increase any eligibility for any public employee retiree health benefit that would not otherwise exist and does not diminish any public employee retiree health benefit". Yet, sub. B requires all retirees living in New York State to enroll for the State Healthcare System because if they don't, the State Retirement System is mandated under this law to enroll them.

Also, the Rand report which is heavily relied upon in fashioning this incomprehensible legislation relies on unfathomable assertions that every high income residents, including medical professionals who will be overtaxed and no longer paid competitive wages due to state caps on medical services, will continue to reside in this state while they're basically shaken down by the highest taxed state in the country to give more. All I can say is one word, "SALT". In one year, the state stands at a 2.6billion-dollar deficit and will continue to climb as legislation like this will eviscerate the working Richard E. Mulvaney, Esq. middle class and continue to accelerate income flight from this state. While the Rand report attemp to gloss over the exorbitant costs to this boondoggle it at least admits that in a perfect world, there may be a reduction of 2 percent in overall costs by 2031. That assumption does not take into accou the true economic realities of economic recessive cycles as well as an aging resident population wit diminished high-income earners remaining in the State to be fleeced. Simply put, this is an insanely sick legislative scheme that needs to be quarantined from those who deal in our state's reality that the cost does not equal the cure.

Thank you. Poto D. Mengold



2019 Member Units

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