



Medicare Threatened From Two Sides

By Michael Righi

Medicare is bankrupt. Medicare is going broke. Medicare is about to run out of money. These are some of the headlines you find in the mainstream press. It all sounds like a familiar refrain, doesn't it?

The New York Times, in a major July 5 editorial, said, “Democrats must recognize that changes to Social Security and Medicare, the major drivers of expected spending growth, should be on the table.” It’s a “painful choice,” but they claim the country has too much debt, and it is social spending that has to be cut. They do not mention military spending.

Medicare is definitely not “bankrupt.” Part A (hospital services) is funded by workers’ payroll taxes (1.45 percent of wages matched by employers) paid into a trust fund. According to trustees, there’s enough in the fund to cover expenses until about 2030. After that, it would still cover 90 percent of Part A spending.

Parts B and D are covered by the government’s general revenue, and by enrollees’ premiums (that’s the payment typically taken out of your Social Security check). These are adjusted annually to cover program costs.

So, “going broke” is a myth. There may be a very small gap in the Part A trust fund in the future, which could be easily closed with a small tax increase or a reduction in costs (we’ll get to that in a bit).

But it’s a myth that the austerity crowd, Republicans and too many conservative Democrats, find useful in order to eviscerate social programs. We have beaten back these campaigns

for decades now, in order to keep and strengthen Medicare and Social Security and prevent the rich from gutting them and appropriating all our wealth to themselves.

Medicare as Cash Cow

If you have been reading *The Advocate*, you know the other threat: Medicare Advantage, private insurance and profit.

Last year Humana made \$2.8 billion in profit. They paid out \$448 million in dividends to their mostly wealthy shareholders, and \$17 million to their CEO. They have 5 million Medicare Advantage “customers,” and that’s where they get 80 percent of their revenue. Without the Medicare Advantage gravy train, there would have been a \$900 billion loss. Their stock price has gone up 23 percent more than the average.

They claim they can make money because they are “more efficient.” Here’s what efficiency means in the health care market: cutting costs. Oh wait, those are medical services people need. Data shows that the private Medicare Advantage plans have significantly higher rates of denials of care and required prior authorizations than Traditional Medicare. Efficiency means you can’t always get what you need.

And it’s certainly not efficient that Medicare (Dis)Advantage plans spend so much time gaming the payment system. They are compensated extra for “risky” enrollees, and they find all kinds of reasons, many of them phony, to exaggerate enrollee risk. It winds up

being a huge subsidy from Traditional Medicare to private plans.

Medicare Advantage plans have a couple of other tricks you may have heard about. Upcoding means they charge Medicare more by claiming their “customers” are sicker than they really are. They also try to attract the least expensive enrollees by advertising benefits like gym memberships.

A recent University of Southern California study estimates a number for all this overpayment from Medicare to Medicare Advantage plans: \$75 billion. A Moody’s report contends “..we believe Medicare Advantage will continue to be a growth driver for the (insurance) industry.” Investors brag that 13 to 30 percent of the money they get from Medicare goes straight into profit.

That \$75 billion would be way more than enough to close the so-called funding gap and make a good start on leveling-up Traditional Medicare and kicking the insurance companies out of health care, period.

Strengthen Traditional Medicare

Rather than subsidize private insurance profits, those funds could be used to expand Medicare itself. Traditional Medicare should include dental, hearing, and eye care. It should cover prescription drugs, and at reasonable prices. Medicare should not be funding Big Pharma profits either.

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The Retiree **ADVOCATE**

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Celebration of Life for Paul Bigman

Saturday, September 9, 1:00 p.m.

Many PSARA members knew and worked with Paul Bigman. Sadly, Paul passed away in June this year.

There will be a celebration of his life on Saturday, September 9, at 1:00 p.m. at Keystone Congregational Church (5019 Keystone Place N.) in Wallingford, Seattle.

The space is accessible. There is no parking lot, but there are parking spaces on neighborhood streets and a drop-off space directly in front of the main entrance. The closest bus routes are 62 and 20. If coming on light rail, Route 44 goes from the University District to Sunnyside Avenue N., which is five blocks south of the church.

It is not necessary to RSVP, but it would be helpful to have a rough count for planning refreshments for the reception to be held afterwards. If you think you are likely to attend, please send a note to memorial@jbrad.org and say something like "yes." If you can help with setup or cleanup, please include that information in your reply.

PSARA Picnic and Summer Membership Meeting

August 13

Photos by Garet Munger



Seattle Labor Chorus leads us in a rousing chorus of Solidarity Forever



At right, Bobby Righi supervises while Michael Righi and Carlos De La Torre staff the grill. At left, PSARA members dig into a potluck feast.

“We Can Reclaim Medicare from the Greedy Profiteers” Webinar, Wednesday, September 13, 5:00 p.m. PT with Dr. Ed Weisbart

PSARA is very pleased to welcome back Dr. Ed Weisbart. Earlier this year, Dr. Weisbart, a PSARA member, presented a brilliant webinar providing information that helped inform us of the very significant threat to public Medicare posed by large corporations and Wall Street.

Now Dr. Weisbart returns to provide us with additional information that has been revealed since his first webinar, as well as strategies that are developing to win this battle. He describes the webinar as follows:

The effort to understand and reverse the corporate takeover of Medicare is critical to both present Medicare beneficiaries and all who look forward to benefiting from Medicare in the future.

Insurance corporations have figured out how to funnel staggering sums of money into their own pockets by misusing and abusing the Medicare system, callously delaying and denying the life-saving health care Medicare beneficiaries need and deserve.

And it's about to ramp up again. Our TVs are already getting inundated with the deceptively misnamed “Medicare Advantage.” It's not really Medicare, and the “advantages” mainly go to the insurance corporations' bottom lines. It should really be called Medicare DIS-Advantage for the rest of us.

Physicians for a National Health Program, working closely with lots of great national allies and local community-based organizations, like PSARA, has been developing a comprehensive strategic plan to start to reclaim Medicare from the profiteers. Just in time for Open Enrollment, the webinar will address how we can get our hands around this needlessly complex mess and make the best decisions for ourselves and our families as we unite to preserve and expand our public Medicare.

Ed Weisbart, MD, is the national board secretary and MO chapter chair of Physicians for a National Health Pro-

gram. PNHP is a non-profit, non-partisan organization of more than 25,000 physicians and other health care advocates in support of a publicly financed, non-profit single-payer national health insurance program that would fully cover medical care for all Americans. He chairs PNHP's anti-Medicare-privatization steering committee.

He also serves as president of Consumers Council of Missouri, a non-profit organization that works to build a more inclusive and equitable community through advocacy, coalition building, collaboration, and community education.

After practicing family medicine for 20 years at Rush Medical Center in Chicago, Dr. Weisbart moved to St. Louis in 2003 to serve as chief medical officer of Express Scripts until retiring in 2010. He worked as an assistant professor of clinical medicine at Washington University in St. Louis, MO, from 2004 until retiring clinically in 2021.

During 2023, a national movement has developed to wrest control of Medicare from large insurers, Wall Street, and regulators in the Center for Medicare and Medicaid Services who seem determined to privatize and profitize Medicare. We have a long way to go to win this battle, and we are challenging very powerful economic interests.

But the progress we have made this year to help build a national movement to preserve and expand public Medicare has taken us further than we had dared to think could be done in such a short timeframe.

Please join PSARA and Dr. Ed Weisbart on September 13 at 5p.m. PT for



Dr. Ed Weisbart

what promises to be an outstanding webinar.

Registration is required. If you regularly receive PSARA emails, watch for the registration link in your emails.

If you don't get emails from PSARA, contact organizer@psara.org to get on our email list and receive email notifications for this and all our exciting PSARA events.

If you wish to view Dr. Weisbart's previous webinar, go to PSARA.org, click on Calendar of Events, Webinars, and then watch “Don't Let Naked Profiteering Destroy Our Medicare.”

Also available on the Home Page is Wendell Potter's recent webinar, “Pulling Back the Curtain: Lies, Fraud, and Naked Profiteering in Medicare Privatization Schemes.”

I'm Just Here to Do Stuff, Part I

An Interview with Mike Andrew

By Angie Bartels

In many ways, knowing from whom and whence we came can define us, both as individuals and as part of a larger community. It can also provide a compass as we move through the present and into the future. Mike Andrew felt this way even before he came to realize it.

Mike was born in San Francisco to parents of Greek descent. His father's people were ethnically Greek from a town in Turkey. Mike's grandfather emigrated to the US in 1901 and became a maritime engineer. His family in Turkey lost their land and were expelled from their homes after WWI, during the reign of Ataturk in the 1920's, in what the Turks called an "exchange of populations" and honest people everywhere called ethnic cleansing. Most of the one-and-a-half to two million Greek refugees ended up resettling in Greece.

"A lot of them became socialists and communists when confronted with Greek right-wing governments that came to power either through fraudulent elections or through outright military dictatorship. But they didn't like to talk much about their experiences.

"Before World War II, my grandfather visited with his family in Greece all the time. They'd just take a boat over. Then, of course, during the war, they couldn't do that. My grandfather died pretty young, soon after the war, and the families lost contact until my dad reestablished contact with his relatives in Greece. They were very reluctant to talk about politics with my parents because they knew the kind of anti-left propaganda that was being run in in the US. It was dangerous to be pro-left in Greece until the 1980s.

"But one day I was talking with them alone and they opened up. They lived in Nea Smyrni, a suburb of Athens that was settled largely by refugees from Turkey. It was also one of the main communist base areas during the Civil War. So I asked, 'Did you live here during the Dekemvriana (December 1944, when



Kordoulis family, Derveni, Greece, c. 1900. Mike's maternal grandmother, Zafiro, is in the back row, center. His great aunt Eftihia (middle row, second from right) and great uncle Spiro (the boy sitting in front) also came to the US and were part of Mike's extended family growing up. Missing: the oldest son, Panayioti, was already in America; the youngest, Yiorgo, was still an infant. Panayioti returned to Greece in 1912 and was killed in the Balkan Wars in 1913. Yiorgo dodged the draft in World War I and lived to be 96.

the right-wing Greek government, backed by British troops, defeated the Greek People's Liberation Army and took control of Athens?' They looked at each other and said 'Yes.' 'What was it like?' I asked. 'It was terrible,' they said. 'The British shelled us during the day, and at night the Greek fascists would come and murder people.'

"My mother's people were from a little village in Greece called Derveni, in the Peloponnese about three hours from Athens. Part of the family still lives there today. My grandparents emigrated to the US in the early 1920's. During World War II there was a lot of resistance activity in that district, and the Germans retaliated by burning people's houses. Our cousins told me, 'We were very lucky that the Germans let us leave before they burned the house. In many villages they burned the houses with the people in them.'

"Fortunately, none of my family went

to the concentration camps where they sent leftists after the war, when the British, and also the US to some extent, stepped in to install a right-wing government in Greece. Some of our relatives were blacklisted from employment for a while. My uncle Taki told me 'We had to have one of our neighbors, who was friendly with the military, write a letter saying that we were okay and that it was all right to hire us.'

"My dad's father was a maritime engineer. My dad was going to do the same thing until World War II came along. My grandfather told him to go into the Navy because that would keep him out of combat. But then he ended up on a troop ship doing invasions all over the South Pacific. When he got out of the Navy, he went to college on the GI Bill and became an electrical engineer. He got a job with PG&E, the

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WA State Labor Council Convention Boosts Fight to Protect Medicare

By David Loud

On July 20, over 300 delegates to the WA State Labor Council, AFL-CIO (WSLC) convention unanimously voted to adopt Resolution #2023-01, "Level the Medicare Playing Field to Save Our Medicare From Total Privatization." This resolution was drafted by PSARA and co-sponsored by the Asian Pacific American Labor Alliance, AFL-CIO (APALA); Pride at Work, AFL-CIO; Retired Public Employees Council of WA (RPEC); AFSCME Council 28/WA Federation of State Employees (WFSE); and the WA State Alliance for Retired Americans (WSARA).

This action builds on years of WSLC and national AFL-CIO resolutions of support for defending Medicare, expanding its benefits, and making quality health care a basic right in the United States by means of a single-payer system like Medicare for All. The WSLC resolution calls out the existential threat to Medicare as a public program that is coming from the privatized Medicare Advantage plans and ACO REACH – a threat that has intensified under the Biden Administration.

The call to "level the playing field" is based on a recognition that most people choose private Medicare Advantage plans because they are less expensive and offer additional benefits – but only thanks to massive subsidies from the Medicare Trust Fund. It is also clear that most beneficiaries in the private plans do not suffer the negative impacts of the need for prior authorizations, claim denials, and narrow provider networks until they face serious or complex health issues. A number of advocates believe we will not be able to eliminate Medicare Advantage and ACO REACH until we have the political strength to enact an expanded and improved Medicare for All, as proposed by Rep. Jayapal (H.R. 3421) and Sen. Sanders (S.1655).

While PSARA and our coalition partner Health Care Is a Human Right continue to build support for our North

Star for health justice -- Medicare for All -- the interim strategy we have developed with national allies is to demand that everyone in Traditional Medicare enjoy the same benefits and affordability as those in the private plans: adding vision, hearing, and dental; setting an out-of-pocket cap, and eliminating the 20 percent copays that force beneficiaries to buy expensive private Medigap policies, if they can afford them. The companion demand is to eliminate excessive costs and profits in the private plans and to recoup for the Medicare Trust Fund the billions of dollars plundered every year by the fraud and abuse rampant in the private plans, well documented by Health & Human Services.

The goals of this interim strategy are to prevent the total privatization of Medicare, to achieve greater equity among Medicare beneficiaries, and to

make Medicare an even more compelling platform to expand into a universal health plan for everyone in our country.

The resolution will be sent to our state's Congressional delegation, President Biden, and Secretary of Health & Human Services Xavier Becerra. It also commits the WSLC to encourage its affiliates and the state's 15 Central Labor Councils to bring the resolution to their members for discussion and action.

It was fitting that in the floor debate, the three delegates who spoke in favor of our resolution (no one spoke against) represented retirees: RPEC, WSARA, and PSARA. I ended by saying "Retirees are leading this fight for ourselves, and we are also fighting for you who are still working and for all the generations to come."

David Loud is a member of PSARA's Executive Board and served as a PSARA delegate to the WSLC convention.

WSLC's Mother Jones Award for PEBB Medicare Stakeholders Coalition

From the STAND, July 24, 2023

The Mother Jones Award has been recognized for decades as the state labor movement's award that recognizes our own members in their struggle for dignity and respect for all working men and women in our state. Traditionally, two awards are given, one to an individual and one to an organization. Candidates for the award will best exemplify the tradition of Mary "Mother" Jones' immortal statement, "Mourn for the dead, but fight like hell for the living!"

[At the WSLC convention] the organizational Mother Jones Award went to the Public Employees Benefits Board Stakeholders' Medicare Coalition for their advocacy protecting the health care benefits of public sector retirees. The coalition includes the Retired Public Employees Council of Washington, Washington Education Association-Retired, AFT Washington Retiree Chapter, Washington State Alliance for Retired Americans, Puget Sound Advocates for Retirement Action, and the Washington Federation of State Employees. Non-labor affiliated members include Social Security Works WA, Health Care Is a Human Right WA, and the Washington Senior Citizens Lobby.

Seattle Crowd Shouts: “Medicare For All. Everybody In, Nobody Out!”

By Tim Wheeler

A big crowd at the Seattle Federal Building on August 1 cheered and applauded as Rep. Pramila Jayapal (D-WA) and others blasted medical insurance companies for reaping billions from fraudulent overcharges to the Medicare Trust Fund while denying urgently needed care for millions of patients.

The rally, sponsored by PSARA and their allies, celebrated the 58th birthday of Medicare and Medicaid, signed into law by President Lyndon B. Johnson on July 30, 1965.

A giant banner held by protesters in front of the Federal Building read, “Stop Raiding Our Medicare.” Another, held by Backbone protesters dressed in black, read “Merchants of Death.”

Jayapal told the crowd she is proud to be the lead sponsor of a bill, “Medicare for All,” to expand Medicare coverage to the entire population.

“Medical debt is ruining the lives of millions,” Jayapal declared. “Medicare is under threat. I want to make one thing clear: I will fight Medicare privatization tooth and nail!”

She added, “Medicare Advantage is privatizing Medicare, and we will not stand for it... Just recognize that if we took the billions – with a ‘b’ – that the Medicare Advantage program overcharges the government, we could plow that back into expanding Medicare. We could afford dental and vision. We could eliminate co-pays and deductibles instead of subsidizing private insurance companies.”

Alex Lawson, Executive Director of Washington, D.C.–based Social Security Works, asked the crowd, “Why does the United States have the shortest life expectancy of any developed nation in the world?” “Lack of health care!” the crowd shouted back in unison. “The latest scandal?” Lawson declared, “It is \$75 billion in overpayments. That’s a shame on our country! We are up against evil! People who kill people for profit. They are allowed to delay and deny care. That is what Medicare (Dis)Advantage is doing.”



Jeff Johnson introduces the octopus (Photo: Garet Munger)

Seattle City Council member Teresa Mosqueda, who served 10 years on the staff of the AFL-CIO, said Medicare, Medicaid, and Social Security are key benefits in a democratic society, vital to equalizing income in a country with a handful of billionaires and a majority struggling to survive.

“Equality... Guess who hates that?” Mosqueda asked. “Corporations, capitalism, CEOs, billionaires, private insurance companies. and those venture capitalists.” The crowd erupted in boos. “That is so wrong in the richest country in the entire world. You can see through that corporate greed.” She led them in a chant: “Medicare for all! Everybody in, nobody out!”

PSARA Co-President Jeff Johnson, former president of the Washington State Labor Council, chaired the rally. He pointed to a purple, papier mache octopus sitting on the sidewalk, each of its tentacles one of the Medicare Advantage providers. One of them was Amazon’s One Medical.

“Amazon spent more than \$4 billion buying One Medical. Now, Amazon is

reaping millions in profits from One Medical. And soon, there will be \$1.6 trillion in the Medicare Trust Fund, money Amazon and other Wall Street firms are scheming to get their greedy tentacles on.”

Claude Burfekt, a leader of the Coalition of Black Trade Unionists, charged that Medicare privatization is stripping millions of their right to health care. He blasted President Trump’s so-called “Direct Contracting Entities” (DCEs), renamed and re-packaged as “ACO REACH” by the Biden Administration. Both opened the doors wide for the private takeover of Medicare by private, for-profit outfits, he charged.

Cindy Domingo, a Filipina leader of the Asian Pacific American Labor Alliance and LELO, praised PSARA. “Power concedes nothing without a struggle, and that is why we are here today,” said Domingo. “We need to stop the overcharging of these private insurance companies that totaled \$75 billion... We

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A Personal Story About a Medicare Advantage Denial

By Hon. Jenn Coffey

Greetings, PSARA members. I'm a new member from New Hampshire, and I would like to share my Medicare (Dis)Advantage story with you. It's my hope to help others be forewarned. I learned the hard way.

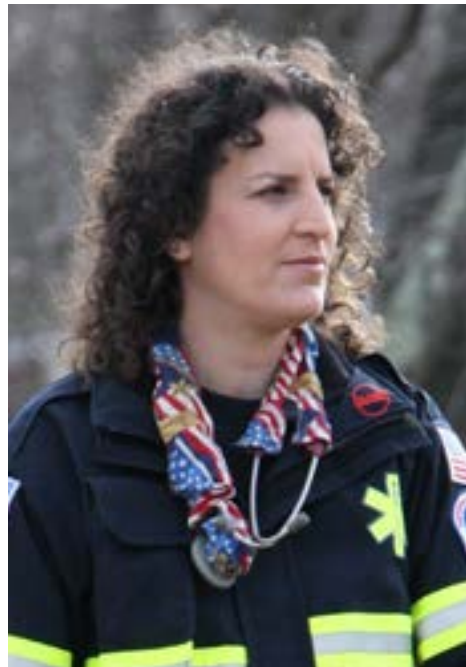
At the age of 42, I was diagnosed with breast cancer. The breast cancer I beat, but the surgeries created a new set of problems. Within one year, I had three surgeries trying to undo what had been done. I had walked into the hospital as a fully functioning EMT and was wheeled out never to walk without assistance again. In the end, I lost everything – my career, my home, everything. I was bedbound for two years.

I was diagnosed with two rare diseases: complex regional pain syndrome (CRPS) and small fiber neuropathy. CRPS is also known as the suicide disease. It's the most painful disease known to medicine. Though it was discovered over 200 years ago, to date it does not have a single solitary treatment approved by the FDA. UnitedHealthcare Medicare (Dis)Advantage loves to use that against me and as a reason to refuse to cover the lifesaving treatments that I need to have.

There came a point where my health got so bad that I had no quality of life left. I talked to my primary about signing a DNR (do not resuscitate order).

Then I gave it one more fight. I did a gofundme. I sold everything and bought my way into treatments. I was wheeled in, but I walked out. I stopped living in a bed. For the past five years, I have fought to keep myself alive by paying premiums and copays on top of the full cost of my infusions, plus the medications they refuse to cover.

Then things got bad last year. My illness was progressing, and I was forced to ration infusions because my rent went up \$400. My neurologist started me on LDN (low-dose naltrexone). But the pharmaceutical company that makes the medication will not make it



Hon. Jenn Coffey

in the low doses that I need, because it isn't profitable to them. For that reason, I have to use a compounding pharmacy to get the medication. Again, my Medicare (Dis)Advantage plan will not cover it.

Recently, I had a denial happen via text message. The first message said "Thanks for submitting your request." Nine minutes later, a denial text appeared. I was still on the phone with the service navigator who helped me file the request. She immediately said to me, "Oh, I thought that would happen; it's the name of the medication."

So a computer decided. A keyword gave me an instant denial and instructions to appeal it in writing within 30 days. Then the insurance company gets between 30 and 60 days to make a decision on that appeal. These are the kinds of delays in health care that are killing people every day in this country, all in the name of profit.

I went to a Rights & Democracy meeting and found out there were people who would help me fight. It

wasn't an easy decision to make – going public and sharing some of the worst moments of my life.

It took a public social media campaign with videos and over 4,000 signatures on a petition to get UnitedHealthcare to talk to me. They didn't like the embarrassment, considering my videos launched the same day that they bragged about eight billion dollars in profit for just the first quarter of this year. That's only three months. They deny care while pocketing our premiums.

UnitedHealthcare said they would pay for my infusion after all that, but when the cameras went away, so did the approval department. I had to contact my senators, and I'm lucky to have two senators willing to fight for me.

It's taken four months of fighting, a public campaign with videos being viewed tens of thousands of times, over 4,000 signatures on a petition, and two United States senators, but now they say they are really going to pay for the infusion. I'll have to get back to you on whether they really do or not.

I share just a bit of what I have gone through. I have spent so many hours on the phone just arguing for the medical care that I need to survive, with people who have not even a small working knowledge of the medical care I am begging for. It shouldn't be this way in America. We should be the very best. Please vote, act, and help to get private, for-profit health insurance companies out of Medicare.

Do you know who is representing you? If you visit congress.gov/members/find-your-member you can find them, contact them, and join me in fighting for health care for all.

Hon. Jenn Coffey is a new member of PSARA. She is a former Republican Representative in the New Hampshire House of Representatives, where she served on the Speakers Leadership Team. She is a retired Emergency Medical Technician and an advocate for health care for all.

Fires, Floods, Heat! Got Climate Ambition?

By Bobby Righi

The U.N. Secretary General, Antonio Guterres, is convening a Climate Ambition Summit on September 20 in New York. He said that leaders who are not stopping fossil fuel expansion are not welcome, and “the price of entry” to the summit is having plans to address the crisis. He says, “We’re not in the era of climate warming. We are in the era of climate boiling.”

The hospitable climate, the “Goldilocks Zone” that allowed the evolution of humans and the other species that we share the planet with is disappearing. Humans are causing the world to overheat and become inhospitable to life. It is up to humans to fix it.

The call to the meeting states, “The summit represents a critical milestone for demonstrating that there is a collective global will to accelerate the pace and scale of a just transition to a more equitable renewable-energy-based, climate-resilient global economy.”

At the summit there will be three tracks:

- Ambition – Governments are to lay out concrete plans for cutting emissions and contributing to the Green Climate Fund.

- Credibility – Businesses, cities, and financial institutions come with just-transition plans to phase out fossil fuels, get actual emission cuts without using offsets, and a commitment to publicly advocate for science-based climate action.

- Implementation – All sectors will demonstrate implementation partnerships addressing challenges and opportunities related to accelerating the de-carbonization of high-emitting sectors or on delivering climate justice.

Millions of people in the US feel the need to act to reduce the deadly threats from climate change. But they may not understand how what we do affects people in other parts of the world. These people’s lives are being shredded by climate change, even though they have not caused the emis-



Bobby Righi

sions that are responsible for the damage. Our political “leaders” apparently do not understand the need to stop burning fossil fuels. They talk about climate change but take only half-steps and go so slowly that the fires, heat, storms, and smoke kill thousands more people every day.

President Biden seems to think that the Inflation Reduction Act (IRA) is enough. Though it is the most significant climate legislation in US history and offers funding and incentives to accelerate the transition to a clean energy economy, the US Energy Information Administration projects that the production of oil, gas, and coal will reach new highs in 2023, and drive up the already obscene profits of fossil fuel companies. The IRA is clearly not enough. More expansion and burning of fossil fuels will also drive up temperatures closer to the 2C limit that scientists say will bring unpredictable chaos in the earth’s climate – that is, out of the “Goldilocks Zone.”

Jeff Goodell writes in his book *The Heat Will Kill You First*, “When it comes to imagining the future at the edge of the Goldilocks Zone, it’s the thermal gap that is hardest to see.” He says that we ignore deaths from car accidents

and the nine million deaths globally from air pollution and distant wars. The suffering and death from extreme heat could become part of what it means to live in the 21st century, something we accept and don’t think about in our everyday lives – if we are lucky enough to stay cool. In the long run, extreme heat is an extinction force for all life. We should be acting to stop the burning of fossil fuels now.

During the U.N. Summit in New York, there will be a massive march for climate action demanding “An End to the Era of Fossil Fuels.” We, in Seattle, should be demanding that Biden declare a climate emergency. He has the power to do so under the National Emergency Act of 1976. (See the August issue of *The Advocate* to learn why this would help.) We can all ask our local elected officials and our US Reps and Senators to call on Biden to do this.

PSARA members can take part in a local gathering on September 17, on the same day as the march in New York, to demand action from our so-called leaders. Demand that they break the chokehold of the fossil fuel oligarchs on our lives.

We call on President Biden to:

1. Stop Federal Approval for new fossil fuel projects and repeal permits for climate bombs like the willow project and the mountain valley pipeline.

2. Phase Out Fossil Fuel Drilling on our public lands and waters.

3. Declare a Climate Emergency to halt fossil fuel exports and investments abroad, and turbo-charge the build-out of more just, resilient distributed energy (like rooftop and community solar).

4. Provide a Just Transition to a renewable energy future that generates millions of jobs while supporting workers’ and community rights, job security, and employment equity.

Bobby Righi is Co-Chair of PSARA’s Climate and Environmental Justice Committee.

Cigars, Machines, and Immigrant Labor

By Mike Andrew

For most of the 19th century and a good part of the 20th, cigars were an indispensable part of male culture in the USA.

When United Press reporter Raymond Clapper wrote in 1920 that the Republicans nominated Warren Harding for president “in a smoke-filled room in some hotel,” it was cigar smoke he had in mind.

To have cigars you need cigar makers, and the Journeymen Cigar Makers’ International Union of America (CMIU) became one of the country’s most powerful unions. It was a founding union of the AFL, and one of the unions in the Seattle Labor Temple Association, the original owners of the old Labor Temple at First and Broad Street in Seattle.

CMIU’s International First Vice President, Sam Gompers, became the first and longest serving president of the AFL.

But the CMIU is no more. In 1974 its few remaining members merged into the Retail, Wholesale, and Department Store Union, which itself merged into UFCW in 1993.

The rise and fall of the CMIU is the tale of organized labor in the US and its attempts to cope – or not – with technological and demographic change.

Until the 1890s, almost all cigars were rolled by hand. The cigar maker was a skilled craftsman, who had to select only the best tobacco leaves for the outer wrapper, lesser quality leaves for the inner binder layer, and torn or scarred leaves for the filler. He (and in those days almost all the cigar makers were men) had to roll the cigar tight enough to stay together, but loose enough for the smoker to draw on it.

The first local Cigar Makers’ Union was founded in Baltimore in 1851 by craftsmen resisting the entry of low-wage immigrant workers from Germany. A couple of years later, a New York City Cigar Makers’ Union was formed by German immigrants who wanted to freeze out more recent immigrants from Bohemia.

Gompers himself was born in England into a Jewish family originally from Amsterdam. He and his family came to the US when he was 13. By that time, he was already working as an apprentice cigar maker.

As an adult, Gompers spoke English, German, which he learned from coworkers in his New York City local, and Hebrew, which he studied in night school after work. He hated Yiddish – a language used by Jewish immigrants from Ukraine, Poland, and Lithuania – and he resisted organizing Yiddish-speaking immigrants in the CMIU.

The whole CMIU leadership, Gompers included, believed in the law of supply and demand. As they saw it, the best way to guarantee high wages for union workers was to limit the supply of skilled union labor. In practice, this often meant excluding workers who wished to be part of the union in order to benefit the ones who were already members.

One way to do that was to charge high “initiation fees” for union membership. Another way was to make rules excluding women or specific nationalities.

To their credit, the CMIU admitted both women and Black members as early as 1867, but the union – and Gompers himself – supported the Chinese Exclusion Act of 1882, to bar Chinese immigration into the US.

Another way to limit the supply of union labor was to write a clause into the union contract prohibiting the use of machinery in the manufacture of cigars. That guaranteed that only the most experienced and skillful hand-rollers – the union members – were hired.



Cigar factory, early 20th Century. Note the “reader” hired to read books and newspapers to the cigar rollers as they worked. Many workers got their first introduction to socialist politics by listening to readers in the factory.

In 1867, the CMIU accepted the introduction of a wooden cigar mold which standardized the size and shape of cigars and eliminated unnecessary labor in what was called “bunching,” gathering the tobacco leaves together prior to wrapping them.

However, when the first cigar rolling machine hit the street in 1889, the CMIU opposed it and refused to admit the “unskilled” rolling machine operators into its ranks. A cigarette rolling machine had been introduced even earlier, in 1880, and it was capable of producing cigarettes so quickly, and therefore cheaply, that smokers switched from cigars to cigarettes. Die-hard cigar smokers began buying cheaper machine-rolled cigars produced by non-union labor.

By 1924, when Sam Gompers died, the CMIU was already on the skids. Four years later, the average age of a CMIU member was 64, an advanced age in those days. In 1931, the American Cigar Co., the only US-based cigar factory still making hand-rolled cigars, went out of business. By 1933, there were only 15,000 CMIU members left, most of them unemployed.

There were only 2,000 members left to merge with the retail workers in 1974.

Medicare For All. Everybody In, Nobody Out!

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must educate our communities....fight for Medicare for all."

Bryce Walker, in his fourth year at the University of Washington Medical School and a youth representative of Physicians for a National Health Program, said he has seen 2,000 patients, ranging from infants and children to senior citizens, afflicted with cancer or other lethal diseases. He said he is moved by their "grace." Not one of them "told me how they love their private health insurance," he said. "These enormous corporations are reaping profits from publicly-funded health care dollars."

A delegation led by PSARA Co-President Karen Richter went up to meet in the office of US Senator Maria Cantwell (D-WA). Cantwell was not present, but the delegation met with Cantwell's

senior staff adviser, Josie McKinley. After the delegation returned, Richter told the crowd, "It was a pretty good meeting. McKinley had never heard of PSARA, but after she had agreed to meet with the delegation, she read every edition of the *Retiree Advocate* that was filled with commentaries on the menace to Medicare from runaway privatization.

Jaisri Lingappa, MD/PhD, a retired infectious disease researcher from Port Townsend, was in the delegation that met with the Cantwell aide. She urged the crowd to "keep up the struggle because this fight is a long-term fight."

Richard Timmins, a retired veterinarian from Whidbey Island, also joined the delegation. A leader of PSARA, Timmins' referral to a dermatologist to examine a lump on his ear lobe was delayed by his

Medicare Advantage provider, Premera. By the time it was approved, it had tripled in size, and was diagnosed as a malignant melanoma. "Ms. McKinley was very receptive," Timmins told me. "She had read our articles about Medicare privatization. I was able to tell my story. She told us they know that this is an issue. But the staff has not received a statement from Sen. Cantwell about privatization."

Tim Wheeler is a veteran activist and journalist, and a leader of PSARA's Clallam County organizing committee. Versions of this story also appeared in the People's World and The Stand, the online newspaper of the Washington State Labor Council.

Medicare Threatened From Two Sides

Continued from Page 1

Copays are a residue of free-market philosophy, that people only make correct choices if they have to pay for things. Really? Research shows that folks put off needed care because they cannot afford it. Copays should be eliminated.

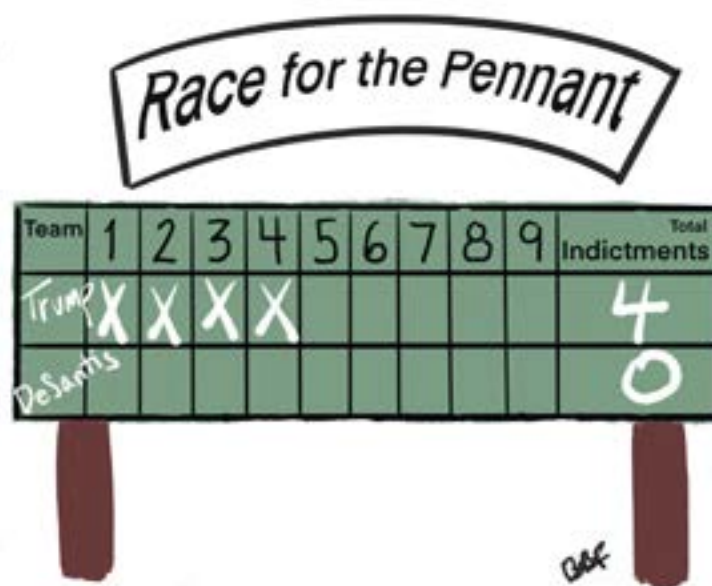
Medicare must not be cut, it must be improved. The age of eligibility does not need to be raised to "save" it. The age of eligibility should be lowered. To birth.

We also must stop Medicare from being raided by private insurance corporations. In what decent world is health care a profit center?

Michael Righi is a retired economics professor and a member of the Retiree Advocate editorial board.

The Barbed Wire

By Barbara Flye



"I'm Just Here to Do Stuff"

Continued from Page 4

big public utilities company in California. They discovered that he had a real talent for statistical forecasting, and even though he was educated as an electrical engineer, he eventually just did their numbers work. Unlike people today, he got a job that he stayed with for 40 years, and he retired with a nice retirement package. My mom still has survivor benefits from his pension.

"I grew up in a mostly middle-class neighborhood in San Francisco. My mom's mom lived with us, and my dad's mom lived only a two-minute walk away. The grandmothers were always a big part of our life when we were growing up. Although my brother and I used English as our primary language, and we always spoke English out on the street, in our house we spoke Greek to accommodate the grandmas. So I grew up being simultaneously American and not American, if you see what I mean. I feel very fortunate about that, because it certainly affected my worldview.

"When I was a kid, my mom had health issues, so frequently one of my grandmas would take care of us. My dad's mom had a set of history books that I guess my grandfather bought when my dad was just a kid. It was a 13-volume set and went from ancient Egypt up to about the 1920's or 1930's. It wasn't that great as history, and if we were looking at it now, we'd say most of the conclusions were very outdated. What was nice about it, at least for me as a kid, was that it was well illustrated with line drawings and color plates. But the thing I liked best about it was the foldout maps. You could see what Europe looked like in 1200 or 1500 or other dates in the past. For me that was important because you could see that the world wasn't always as it is today, right? And that means it doesn't always have to be like it is today.

"A lot of Eastern European people lived in our neighborhood. There were many Russians – children or grandchildren of White Russian emigres. They

built a huge cathedral on Geary Street not far from our house. Little Russian shops sprang up near the cathedral, all of them with pictures of the last Tsar and his family in the window. There were also a lot of Sephardic Jewish families, more so than Eastern European Jews. One friend's father had been a German prisoner of war. After the war, he decided to settle in the United States. This friend was not allowed to have Jewish kids over to his house. His father wouldn't permit it.

"There were also a lot of Chinese and Japanese families but only one African American family. In my fourth-grade class there was a girl by the last name of Kim. She was the first Korean immigrant we had in class. Her first name was In-sook. But for some reason, by her second or third day in class, everyone was calling her Shirley. I don't know how she felt about that, but she accepted the name Shirley.

"My kindergarten teacher's last name was Jimenez, but everyone pronounced it "Jimmy-nez." Even she pronounced it that way. We weren't conscious of race or racism until later on in childhood when the civil rights movement was carried in the news. I remember being able to see it but unable to under-

stand it or figure it out. I don't think my mother could even figure it out. But my parents were non-racist. We weren't ever allowed to use racist slang or anything like that.

"I was kind of a pudgy and slow kid, uncoordinated. I would play baseball with the kids at the playground but I wasn't particularly good at it, so I wasn't much into sports. I liked to hang out with my parents and their adult friends a lot. I guess they thought I was amusing because I was kind of a smart-ass kid. My sixth grade teacher was very interested in Mexican archaeology. She would work on archeological digs in Mexico during the summer. She recommended books about the Aztecs, which I found very interesting.

"My high school was built by the WPA..." Find out what happened at Mike's high school and afterwards in the next issue of the Retiree Advocate.

Mike Andrew is PSARA's Executive Director and Editor of the Retiree Advocate. Angie Bartels is PSARA's Membership VP.

This interview is part of a series Angie is doing with PSARA members. If you have a story to tell, email organizer@psara.org and we'll put you in touch with Angie.

To Renew or Donate

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321 16th Avenue S, Seattle WA 98144

- Basic contribution: \$20
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- Supporting: \$50 New contributor
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Meetings and Events

PSARA events will be virtual unless otherwise noted. For the Zoom links, email organizer@PSARA.org

PSARA Climate and Environmental Justice Committee: 10 a.m. – 11:30 a.m., Thursday, September 7.

PSARA Government Relations Committee: 12:30 p.m. – 2:30 p.m., Thursday, September 7.

PSARA Fundraising Committee: 1:30 p.m., Monday, September 11.

PSARA Education Committee: 9:30 a.m., Tuesday, September 12.

PSARA Webinar: We Can Reclaim Medicare from Greedy Profiteers, featuring Dr. Ed Weisbart, 5:00 p.m., Wednesday, September 13. See Page 3 for details.

PSARA Race and Gender Equity Committee: 11 a.m.– Noon, Thursday, September 21.