

Testimony in Opposition to House Bill 3336

April 4th, 2017 House Committee on Early Childhood and Family Supports Chris Hewitt

Chair Lively and Members of the Committee:

Thank you for the opportunity to testify in opposition to HB 3336. ONA's 15,000 members provide care in every corner of our state and have a robust history of advocating for policies that address social determinants of health and enhance patient outcomes, particularly for some of our state's most vulnerable populations.

While ONA applauds efforts to increase access to paid family and medical leave, we believe that any effective policy should cover all families while being affordable, accessible, and inclusive of all workers. HB 3336 falls short of these criteria in proposing tax credits as the foundation of a paid leave system and offering no job protections for those who utilize the benefit. This will serve to further widen our state's current unequal access to paid leave, as only wealthier individuals and businesses would likely possess the means needed to invest in the savings accounts prescribed in the bill.

ONA members frequently see lower-income patients whose health conditions adversely suffer after being forced back to work due to economic pressures shortly after the birth of a child or treatment for serious illness. Offering a tax-advantaged health savings option will do little to aid everyday working families like these who often already face impossible choices between caring for their loved ones and returning to work abruptly just to make ends meet and afford basic necessities. HB 3336 also provides no employment security even for those with the means to save under the program, undermining the true purpose of adopting a worthwhile paid family leave system.

A more comprehensive approach to this issue would be a social insurance program as proposed under HB 3087. This will pool small contributions from both employers and employees to provide wage replacement while workers are out on leave and affords explicit job protections to prevent reprisal for those accessing the benefit.

In contrast, HB 3336 is an inadequate proposal that will ultimately not support low-wage Oregonians and excludes large cross sections of our communities from affording any benefit, likely resulting in a negligible effect on improving overall patient outcomes or producing any savings for our health care system.

ONA urges you to oppose HB 3336.