



Chair Holvey, Vice-Chairs Williamson and Wilson and members of the House Rules Committee,

Thank you, for your continued work on crafting a universal paid family and medical leave Insurance program that can be accessed by Oregon’s entire workforce. Oregon AFSCME Council 75 supports HB 2005 -3 are as numerous as the workforce we represent with nearly 27,000 AFSCME members in Oregon. Whether it is our corrections officers, road crew workers, behavioral health specialists, child care providers or other caregivers, they all know how important a universal statewide benefit is to be able to address their need or the people they work with needs for paid time away from work to welcome a new child or deal with an illness of their own or of a loved one.

For our members in health care, behavioral health or other caregiving work, they immediately see how this benefit is needed for the people they work with before they see the importance for themselves. For our behavioral health members, they see people putting off treatment that may be inpatient or even time intensive outpatient due to worry about not being able to pay their bills, support their families or have a home to return to once they complete treatment. For our social workers supporting families whose children are at Doernbecher Children’s Hospital at OHSU, they see parents having to leave their jobs to be able to stay with their child while they are in the hospital. Our child care providers receive calls from desperate parents asking for help caring for their newborns who are too young¹ to come into care.²

Employers are already dealing with costs – just in a different, and likely more costly way than if we have a state insurance program with a set cost. HB 2005-3 shifts the cost burdens of tracking and administering a paid family and medical leave program employer-by-employer and gives them a fixed cost that is less than the cost of having to cover an employee’s full wages through banked sick, vacation and other paid time off. This actually helps our smaller employers, whether a small business or small local government. It moves us to a more sustainable system where if an employer needs to hire a temporary replacement, they don’t have to cover both the wages of the employee who is out and the replacement worker, because the wages for the person taking leave have are handled through the insurance program and have already been covered.

¹ <https://oregonearlylearning.com/wp-content/uploads/2019/02/CF-Rule-Book-CRT-130.pdf>

² “We recommend infants wait to enter a child care center until they are about three months old, and by then swaddling should have been phased out because the babies are more active and rolling,” said Danette Glassy, MD, FAAP, chair of the AAP Section on Early Education and Child Care and the AAP representative on a panel that wrote guidelines for child care providers. “Swaddling in Child Care” <https://www.healthychildren.org/English/ages-stages/baby/diapers-clothing/Pages/Swaddling-Is-it-Safe.aspx>



AFSCME Council 75 Support for HB 2005-3

Additionally, HB 2005-3 ensures employees not only keep their jobs, but their health insurance and other benefits while they are on leave. It is critical to ensure that people in the midst of a medical emergency have full access to their health insurance – even if they are on leave from work. This ensures employees can continue to get the care they need before a problem becomes more costly. You will receive testimony from one of our members who was put into the position of coming off family leave after 8 weeks home, or lose her insurance and with that, guardianship of her niece. These are unacceptable choices that Oregon’s families should not have to make, and that could be prevented through your support for HB 2005-3.

For the above mentioned reasons and so many more, Oregon AFSCME Council 75 urges the passage of the universal paid family and medical leave program. Thank you.

Respectfully submitted by Eva Rippeteau, Political Coordinator, AFSCME Council 75.