

AFT promotes part-time faculty rights legislation campaign in 11 states

-- Julie Ivey

The Faculty and College Excellence (FACE) campaign represents an assortment of recent senate, house, and assembly bills that address higher education's over-reliance on exploited contingent faculty who work under conditions that deprive students of the best education. The AFT has generated the template, or prototype, bill upon which eleven states so far have modeled their own legislation.

Key goals of FACE include 75 percent of courses in two and four-year institutions being taught by full-time, tenured faculty, and pro-rata pay, health care coverage, and priority consideration for part-time faculty seeking full-time positions. An important element is that for any FACE bill to pass, money must be set aside in state budgets.

Most FACE bills were generated in the spring of 2007. Bills in some states have already generated calls for modification. Washington state's FACE bill, HB 1875, could end up broken down into separate bills to address each of the key goals in AFT's prototype. California's FACE legislation, AB 1343 (Mendoza) has been put in the California Assembly Appropriations Committee suspense file until January 2008.

All FACE bills are, for the time being, still alive.

Whether or not FACE survives various legislative gauntlets may depend upon on the public re-valuing higher education in terms of turning out knowledgeable, critically thinking citizens and not simply "workers." Universities enjoy more political capital than unglamorous community colleges, but all of higher education has experienced a steady replacement of full-time, tenured faculty with underpaid contingent faculty who have little or no academic freedom.

The absurdities linked with contingent faculty working conditions could fill a library, but many legislators still view higher education, especially community colleges, as "good enough" when staffed with a limited supply of inexpensive faculty who appear to be teaching their professional best while providing most of their labor for free. That eleven states are actually considering expensive FACE bills could signal a turnaround in this CEO mentality and move FACE beyond wishful thinking.

Passage of a FACE bill in California could eliminate rationales for the 60% cap. Pro-rata compensation removes the incentive to replace full-time faculty with part-timers, and the mandated increase in full-timer

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Adult Education teachers getting short-changed on retirement benefits

-- Ron Russell

Adult education teachers in California should be gravely concerned about their STRS retirement benefits. Recently, STRS projected my final retirement at age 65 at \$1,500 a month before taxes. I was shocked, as I have taught ESL full-time (from 35 to 42 hours a week) for about 26 years with the Monterey Adult School program and have four teaching credentials and three college degrees.

This is happening because the education code only specifies a "minimum" number of hours, namely 30 hours, as the definition of "full-time," and does not specify a

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Universal health care in California: what's in it for part-timers?

-- Sandra Baringer

The governor's deal with the Democratic leadership on universalizing health care insurance in California seems headed for the November ballot as a funding initiative, though subject to serious analysis and revision by the Senate when it reconvenes in January. Between the budget problems looming from the downturn in the real estate market and the inherent problems in the health deal itself, the California proposal promises to be controversial.

Though the stated intent of the legislation is to accomplish universal health care for all Californians, anyone whose premiums would cost such a large portion of his or her income as to cause financial hardship can apply for an exemption. This escape clause, along with the still-open question as to just exactly how much employers would have to pay, leaves the most important questions unanswered.

The plan, like the one generated by Mitt Romney in Massachusetts, continues to tie most health insurance to employment, a practice that started in the United States during World War II and is not common in other countries. Thus those who are intermittently employed, underemployed, self-employed, or have multiple employers will continue to have problems. The system

purports to mandate coverage for them one way or another, but eligibility documentation and variable income and employment circumstances will create ongoing claims and coverage issues.

The proposal will require that all Californians have a "basic health care plan," the definition of which will be determined by a Managed Risk Medical Insurance Board (MRMIB). Three members of this board will be appointed by the governor and two will be appointed by the legislature. Moreover, there will be five levels of "basic" health care, all of which will meet the "Knox-Keene" standard of benefits (California legislation enacted in 1975)). Prescription drugs will also be covered.

There would be a statewide purchasing pool that negotiates insurance rates for members of the pool. But not everyone will be insured through this pool: they may be insured through their employer, other public programs such as Healthy Families, Medi-Cal, or Medicare – or the private market.

Most of the conflict between the governor and the Democrats on this plan, and thus much of the news coverage, has focused on how much employers will be required to pay, either directly to insurers or into the state pool. But to freeway flyers, the more significant question

is how much employees will have to pay, regardless of whether the balance is subsidized by the employer or by the state pool. This will depend on the employee's annual income in a complicated scale based on federal poverty level standards (FPLs; see table on p. 7). If the employer opts to pay into the state pool instead of offering insurance, a single person who makes more than 150% FPL will have to pay up to 5% of annual family income. Individuals earning from 250-400% of the poverty level — \$25,525 to \$40,840 per year — would pay up to 5.5% with tax credits for excess payments over 5.5%. There is a 20% premium contribution from the state pool.

Those who make more than \$40,840 (400% of the federal poverty level) are not eligible for the pool, or for tax credits, and there are no cost controls — except that there will be tax credits for people age 50-64 who retire before they are eligible for Medicare; this latter is intent language for future legislation, subject to "available resources."

There is no language in the bill (other than the "hardship" escape clause) to prevent an employer from offering a policy with a minimal employer contribution,

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