

**STATE OF MICHIGAN
IN THE SUPREME COURT**

MICHIGAN SENATE and MICHIGAN SENATE
MAJORITY LEADER WINNIE BRINKS,
in her official capacity,

Supreme Court No. 168269
Court of Appeals No. 374876
Court of Claims No. 25-000014-MB

Plaintiffs-Appellees/Cross-Appellants,

v.

MICHIGAN HOUSE OF REPRESENTATIVE,
MICHIGAN HOUSE SPEAKER MATT HALL,
in his official capacity, and MICHIGAN HOUSE
CLERK SCOTT STARR, in his official capacity,

Defendants-Appellants/Cross-Appellees.

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AMICUS BRIEF OF SEIU, AFSCME, AFT MICHIGAN, MEA, MNA, AND UAW

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QUESTIONS PRESENTED

Service Employees International Union (“SEIU”), American Federation of State, County and Municipal Employees (“AFSCME”), American Federation of Teachers, Michigan (“AFT Michigan”), Michigan Education Association (“MEA”), Michigan Nurses Association (“MNA”), , and the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (“UAW”), (collectively “Amici”) concur with and adopts by reference the Statement of Questions Presented in the Plaintiffs-Appellees Michigan Senate and Michigan Senate Majority Leader Willie Brinks’ (“Michigan Senate,” “Senate,”) Brief.

STATEMENT OF INTEREST OF AMICI CURIAE¹

The issues addressed in this matter are of important public interest, and the undersigned labor organizations have a special interest to present for the court’s consideration. As the Michigan Supreme Court stated long ago in referring to amicus briefs, “This court is always desirous of having all the light it may have on questions before it.” *Grand Rapids v Consumers’ Power Co.*, 216 Mich. 409, 415; 185 NW 842 (1921). Amici request that this court grant their motion to file their brief and consider the arguments made herein.

Service Employees International Union (“SEIU”) is a union of approximately two million working people in the United States, Canada, and Puerto Rico employed in healthcare, property services, and public services. SEIU Michigan is where SEIU’s four local unions in Michigan come together to advocate on behalf of improving the lives of workers. SEIU Michigan represents nearly 35,000 workers in a variety of industries including correction officers, janitors, custodians, librarians, nurses, healthcare workers, and many others. SEIU Michigan believes all workers, regardless of where they work, who they work for, or what type of work they do, need access to good benefits like a strong pension and fair contribution rates to healthcare to help solve the massive short staffing issues faced through state jobs including in corrections.

The American Federation of State, County & Municipal Employees (“AFSCME”) is a union of approximately 1.4 million members employed in the public service across the nation. Within its two state-wide affiliates AFSCME Michigan and the Michigan State Employees Association (“MSEA”) (collectively “AFSCME”), AFSCME represents 28,000 members employed in Michigan. The vast majority of AFSCME members work in the public sector, for

¹ Amici affirm that no counsel for a party authored this brief in whole or in part, nor made a monetary contribution intended to fund the submission of this brief. No person other than Amici, its members, and counsel made any monetary contribution to author this brief.

state and local governmental employers in all manner of professions necessary to the provision of essential public services. In Michigan, AFSCME represents motor carrier officers, conservation officers, and other employees providing vital public safety services to the public. These members work side by side with other law enforcement officers and state troopers, often in dangerous situations and under extreme conditions. AFSCME also represents employees across Michigan who work in non-public safety public service roles including, for example, social workers, waste management and water treatment workers, janitors, bus drivers, librarians, and many other positions; within all aspects of public service at all levels of government in the state.

American Federation of Teachers Michigan (“AFT Michigan”) is a union of 35,000 educators and healthcare workers. Most of its members are public employees who work in K-12 and intermediate school districts, community colleges, universities, and hospitals across the state. AFT Michigan fights for policies that improve the lives of working people.

The Michigan Education Association (“MEA”) is a voluntary membership labor organization that represents education professionals and support personnel throughout Michigan. The MEA’s members are approximately 120,000 educators and retirees and from pre-K to 12 public schools, charter schools, intermediate school districts, and institutes of higher education across the state of Michigan. The MEA represents approximately 80,000 active teachers, education support professionals, and higher-education employees throughout the state of Michigan. The MEA is the bargaining representative for approximately 1,143 local associations in 572 public school districts in the state of Michigan, including intermediate school districts, local educational authorities, and public school academies.

The Michigan Nurses Association (“MNA”) represents over 7,000 registered nurses

(“RNs”) and nurse practitioners (“NPs”) employed in the public sector in Michigan. Many are employed by the University of Michigan Health – Michigan Medicine, which operates the state’s most expansive and innovative system of research hospitals. Most of the remaining public-sector RNs and NPs are employed by county health departments across the state, from rural areas to urban areas throughout the Upper and Lower Peninsulas.

The International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (“UAW”), AFL-CIO, has approximately 400,000 actively employed members in both the public and the private sectors across the country. The UAW and its local affiliates represent approximately 20,000 active employees in Michigan’s public sector, including counties, cities, state civil service, libraries, schools, and universities.

Amici, along with their affiliated local unions, serve as their members’ exclusive collective bargaining representative. In that capacity Amici negotiate, administer, and enforce collective bargaining agreements on behalf of their members. Amici have negotiated thousands of agreements in Michigan that provide for health benefits and retiree benefits and are committed to achieving and protecting health benefits and retirement security for their members.

ARGUMENT

I. INTRODUCTION

The above captioned amici labor unions combine to represent millions of workers throughout the United States, Canada, and Puerto Rico. Within Michigan, Amici represent hundreds of thousands of workers and tens of thousands of public sector workers. Thus, Amici are uniquely situated to provide information regarding the impact of the Defendants-Appellants (hereinafter “the House”) failure to complete its constitutionally-mandated duty of presenting the nine outstanding bills to the Governor. Amici’s members can directly speak to the impact

the delay implementing these nine bills, particularly HB 6058, HB 4665, HB 4666, and HB 4667, has had on their lives, their families, and the citizens of Michigan.

Amici labor unions jointly submit this proposed amicus brief to aid the Court's consideration of the Senate's Answer in Opposition to the House's Application for Leave, Motion for Expedited Consideration, and Conditional Cross-Application for Leave to Appeal. Amici agree with and join in the merits argument advanced by the Senate. Amici hereby adopt and incorporate the arguments put forth by the Michigan Senate in its brief in this matter.

Amici's proposed brief expands on the irreparable injury and substantial harm that Amici's members are suffering each day the House fails to perform its constitutionally-mandated duties. The continued delay in the final adjudication of this matter has and continues to cause substantial harm to Michigan's public employees. As discussed below, workers represented by the Amici are harmed by the continued denial of healthcare benefits and pension rights that are enumerated in these bills. *Rouch World, LLC v. Dep't of C.R.*, 507 Mich. 999, 961 N.W.2d 153 (2021), opinion after grant of appeal, 510 Mich. 398, 987 N.W.2d 501 (2022) (grant of bypass application where denial would leave Michigan citizen's unprotected by ambiguities in Elliott-Larsen Civil Rights Act).

The House's assertion that the harm to Michigan citizens caused by its failure to fulfill its duties is "purely speculative" underscores the House's complete and utter derogation of its obligations to the public. The House knows that the abandonment of its duties hurts Michigan workers-it just does not care.

The House cannot point to any law, rule, or regulation which permits or justifies its failure to perform its job duties. Thus, as the Michigan Senate's brief establishes and Amici's brief further supports, the House's application should be denied and it must immediately present

the nine bills to the Governor.

II. THE HOUSE'S REFUSAL TO PERFORM ITS OFFICIAL DUTIES SUBSTANTIALLY HARMS MICHIGAN PUBLIC EMPLOYEES AND THEIR FAMILIES WHO WOULD BENEFIT FROM EXPANDED ACCESS TO AFFORDABLE HEALTHCARE UNDER HB 6058.

Affordable health benefits are essential to Amici's members and to the public they serve. Enhancing public service workers' ability to bargain for better healthcare will make Michigan communities safer and stronger. Employees frequently forego more lucrative positions in markets outside the public sector or even outside the state and commit to public service in exchange for stronger healthcare benefits. Employees with adequate health insurance tend to stay longer and tend to maintain their health and productivity through their access to better insurance coverages. Recruitment, retention, and keeping workers in-state and contributing to the economy requires competitive benefit packages. These benefits allow public sector employers the ability to offer relatively lower pay than the private sector yet still remain competitive and provide attractive options to current and prospective employees.

Michigan's Publicly Funded Health Insurance Contribution Act regulates public employers' contributions to employee medical benefits. Prior to 2011, unionized public employees in Michigan had a greater ability to negotiate the costs of their healthcare. In 2011, the Michigan Legislature passed the Publicly Funded Health Insurance Contribution Act, referred to as Public Act 152 ("PA 152"). This law limits the amount that public employers may pay toward employee medical benefit plans by requiring that employees pay 20% or more of the total annual costs of their health plan.

HB 6058 amends PA 152 to allow employers and unions to bargain for employers to pay up to the full cost of the employee health plans. The availability of affordable healthcare and benefits is essential to the public service members all the amici labor unions represent.

Improving public service workers' ability to bargain for better healthcare will make Michigan communities safer and stronger. Among other benefits, it may also make public budgets more efficient because access to quality healthcare has been tied to lower turnover rates and higher productivity.

However, if HB 6058 is not signed into law, public employees will continue to suffer. To just give one example, the MEA estimates that the increased costs on educators and the support professionals it represents if HB 6058 is not signed into law will be an additional \$116 million in FY 2025 alone. Without the passage of HB 6058, the cost of healthcare for all public employees will reach an unsustainable breaking point.

A. PA 152 Eroded Access to Affordable Health Insurance.

Public employees have faced rising healthcare costs since the passage of PA 152. This law allows public employers to select, without any collective bargaining obligation, either the hard cap provisions set forth in Section 3 of the law (MCL 15.563), or agree to pay no more than 80% of the total annual costs of the medical benefits it provides for its employees, as set forth in Section 4 of the law (MCL 15.564). Based on data gathered by the MEA Research Department, about 75% of public school districts have elected to adopt the hard cap provisions of PA 152, while only about 14% have elected to pay 80% of the medical insurance costs of their employees.

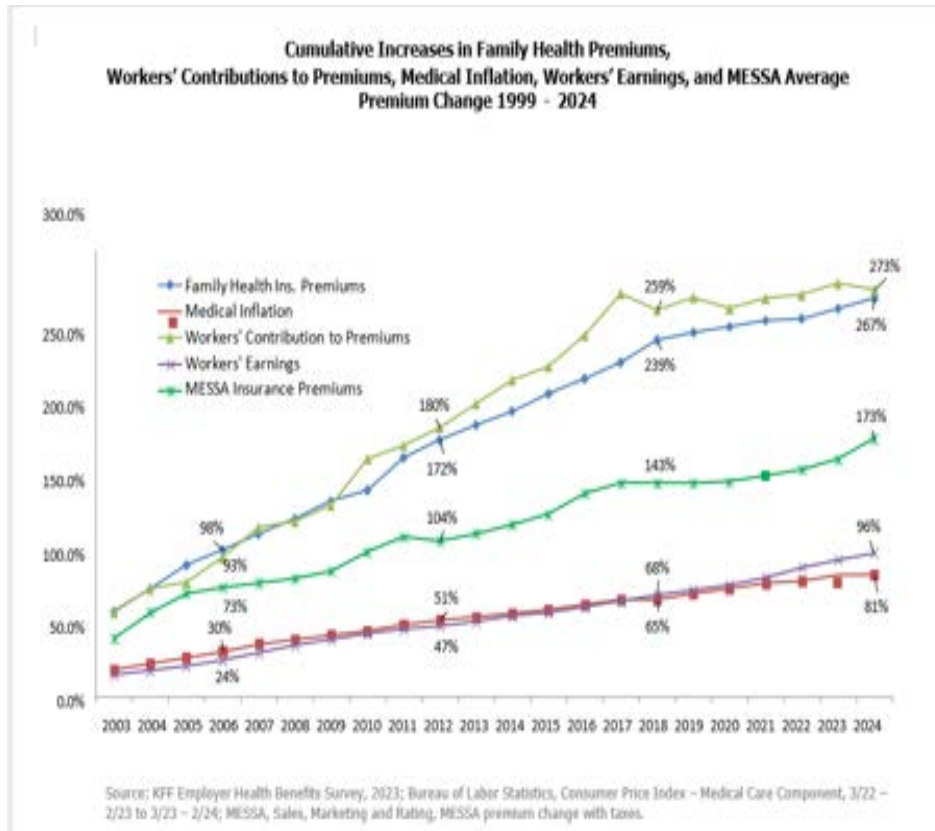
Before PA 152 was enacted, the percentage of school district expenditures dedicated to educator insurance benefits was between 10% and 11% of their total expenditures. By 2024, that percentage dropped below 7%. Meanwhile, the annual increases in the hard cap provisions of PA 152 have not kept up with the rising costs of medical insurance premiums in Michigan. Since the law's inception, the hard cap amounts in Section 3 of the law have increased based on the

medical care component of the United States Consumer Price Index (“CPI”) for the most recent 12-month period. MCL 15.531(1). Since 2013, this index has increased annually by approximately 2.6%.

Yet, between 2012 and 2024, the cumulative increases in family health premiums have risen about 95% nationwide. While the Michigan Education Association Special Services Association’s (“MESSA”) insurance premiums have increased well below the industry average, it has experienced cumulative premium increases of about 69% during that same time period.² For 2025, MESSA, like many other health insurance providers, experienced a significant rate change of 13.80%, primarily due to increases in prescription costs as well as an increase in usage rates. This occurred at a time when the CPI-medical component set forth in Section 3 of PA 152 saw its lowest increase since the adoption of PA 152— an increase of 0.2%.

The chart below shows the cumulative increases in family health premiums, workers’ contributions to premiums, medical inflation, workers’ earnings, and MESSA average premium changes from 1999 to 2024.

² Created by MEA in 1960, MESSA was established as a nonprofit voluntary employees’ beneficiary association (“VEBA”) to ensure that school employees have access to affordable health insurance. The MEA has negotiated MESSA insurance into many of its collective bargaining agreements throughout the state of Michigan. Approximately 60% of the collective bargaining agreements to which MEA is a party include MESSA health insurance as the provider.



B. Public Employees' Earnings have not Kept Up with Rising Health Insurance Costs.

Medical insurance rates have outpaced public employees' earnings. Since 2012, the cumulative increase in workers' earnings on a nationwide basis have only gone up 36%, as described in the chart above. Earnings for teachers during that same time frame are substantially lower: around 8%. During the 2012-13 school year, the average Michigan teacher's salary was approximately \$61,560. National Center for Educational Statistics.

https://nces.ed.gov/programs/digest/d13/tables/dt13_211.60.asp; See also,

https://www.mlive.com/education/2013/12/average_michigan_teaching_sala.html. By the 2023-24 school year, that figure only increased about 8.2%, to approximately \$67,011. See Rankings of the States 2023, NEA Research, April 2024. According to the Bureau of Labor Statistics, a teacher who earned \$61,560 in 2012 should be earning a salary of about \$85,715 today in order

to retain the same earnings power—yet Michigan teacher’s salary average was nearly \$19,000 less than that. CPI Inflation Calculator, Bureau of Labor Statistics,

https://www.bls.gov/data/inflation_calculator.htm.

- C. *Public Employees are Struggling to Make Ends Meet and Facing Difficult Choices, Including Leaving their Chosen Profession to Serve Michiganders, to the Detriment of the Public Interest.*

The growing disparity between the rising cost of health insurance premiums, stagnant growth in educator pay, and small increases in the hard cap provisions of PA 152, has placed enormous pressure on public employees as they continue to pay a greater share of their healthcare costs with a salary that has not kept pace with inflation.

HB 6058’s changes to PA 152 will have a positive impact on all public employees. For 2025, HB 6058 would increase the hard cap provisions in Section 3 by 7%. It also would guarantee an annual minimum increase in those hard cap amounts by 3%, a modest increase over the current law’s 2.6% CPI-medical component index over the past twelve years. As collective bargaining agreements expire, public employers would begin paying 80% of the cost of the medical care of their employees as a floor, not a ceiling. However, through the collective bargaining process, unions and public employers may elect to bargain an amount greater than 80% if they choose. While these provisions, if implemented, will not “fix” all the financial problems facing public employees, they will reduce some of the financial pressures that have been unfairly placed on the shoulders of all Michigan public employees, including corrections officers, public safety employees, public library employees, unemployment insurance adjudicators, educators and educational support professionals.

The much needed changes brought about by HB 6058 will help address a key issue for retaining public employees. For instance, nearly a quarter of teachers surveyed by the National

Education Association (“NEA”) said they intended to leave their jobs by the end of the 2023-24 school year, and 17 percent said they intend to leave the profession altogether. About one-third of teachers surveyed said low salaries and extra administrative work were the top reasons for their job-related stress. The Economic Policy Institute has similarly found that teacher pay has suffered a sharp decline compared with the pay of other college-educated workers. On average teachers made 26.4% less than other similarly educated professionals in 2022 – the lowest level since 1960. <https://www.epi.org/publication/teacher-pay-in-2022/#full-report>.

As teachers leave the profession, there is no one behind them to fill these important positions. The Bureau of Labor Statistics has found that approximately 271,000 education jobs were open in 2024, which on average is the fourth-highest average in history and more than double pre-pandemic averages. BLS, “Job Openings and Labor Turnover Survey, 2024. In fact, between 2006 and 2019, Michigan has experienced a 71% decline in teacher preparation completers, the highest decline in the nation. <https://title2.ed.gov/Public/DataTools/Tables.aspx>. The impact of low teacher pay makes recruiting and retaining highly qualified teachers difficult. A lack of well-qualified teachers means society cannot equip the future technology innovators, researchers, and educators with the training they need to emerge as the next leaders.

Below are just a few examples of how dedicated public employees in Michigan will be impacted on a personal level if HB 6058 is not signed into law.

Greg Merricle, Environmental Quality Specialist and SEIU 517M President

SEIU Michigan’s members have been hard hit by the skyrocketing costs of healthcare for public employees. Greg Merricle is the President of SEIU 517M and has been an Environmental Quality Specialist for the State of Michigan for almost 25 years. SEIU 517M represents over

6,500 public employees in all 83 counties of Michigan. These members serve the public as scientists, librarians, city workers, paraprofessionals, engineers, and more.

In 2025, Greg, along with all of his coworkers in the public sector, faced one of the largest healthcare cost increases in recent history as a result of PA 152. His out-of-pocket costs went from \$176.33 every other week to \$203.76 every other week. As Greg explained, “We don’t have the new numbers yet, but we expect similar or even worse increases in 2026.” These additional costs add up to several hundred dollars a year that workers hadn’t expected. “We’re being hit from all sides. Michigan’s electricity costs rose [12.6%](#) last year - a record high. Food costs are up [2.8%](#). Housing is up [4.6%](#). The cumulative effect of all of these rising expenses is state workers who once had stable public sector paychecks now worried about how they are going to pay their bills.” With public sector healthcare costs expected to rise in 2026, there remains no mechanism for unions to support their members bargain over costs. “Keeping our healthcare costs in check would be a powerful tool to stem the tide. We should be able to save for our futures, but our paychecks barely cover the present.”

Many workers are considering leaving public sector jobs altogether. “You don’t enter public service to become a millionaire, but many of the benefits that keep workers in their jobs - good healthcare, a strong retirement, and sound wages - are slowly being chipped away. We’re struggling to compete with the private sector at every turn.” Greg further noted that the House’s failure to send these bills to the Governor was directly impacting people’s morale at work. “We see that they are just playing games with our livelihoods and people are getting fed up. They are talking about just leaving rather than waiting to see if we get what we need and deserve.” The results have been disastrous for Michigan taxpayers. As he explained, “[w]hen we are

understaffed, Michigan communities aren't receiving the best quality state services they deserve, and we put our most vulnerable at risk.”

Timothy Fleury, Corrections Officer and SEIU 526 Recording Secretary

These healthcare cost increases have also impacted law enforcement. Timothy Fleury has been a corrections officer at Alger Correctional Facility in Wetmore, MI since 2006. He is also currently the Recording Secretary of SEIU Local 526M, which represents approximately 6,000 Corrections Officers and Forensic Security Assistants in Michigan's prisons and the Center for Forensic Psychiatry. Timothy's employer's contributions to his healthcare benefits are capped at 80% of rates and premiums as a result of PA 152. Because of this cap, Timothy has experienced a dramatic increase in his out-of-pocket costs, especially in recent years as inflation has raised costs across the board. “I pay over \$205 a pay period for my portion of the plan. And it has skyrocketed over time. I was only paying \$173 prior to this year,” he explained.

These increased healthcare costs have coincided with an increase in mandatory overtime, where corrections officers are required to work past their shift, often with only an hour's notice. This increase in mandatory overtime is a result of chronic understaffing in Michigan's corrections facilities. In Timothy's facility, the current capacity for corrections officers is 166, but the facility only currently employs “around 111 to 114” officers, meaning the facility is frequently short around 40 officers. This shortage has resulted in reduced activities for prisoners, increased tensions in the facility, and an increase in staff assaults.

The increase in mandatory overtime and poor working conditions without a commensurate increase in benefits has demoralized the officers at Timothy's facility. According to Timothy, “[m]y coworkers are saying that, not only are you irritated that you are being forced to work overtime, you are looking at your paycheck and you aren't making much more than you

were a couple of years ago because of how things are costing now.” These increased healthcare costs have forced officers to look for work elsewhere, further exacerbating the staffing crisis. “We don’t think we are being compensated for that extra work. We can find another job with similar pay and benefits, and I don’t have to work more than 40 hours,” Timothy explained.

Further delays in the implementation of HB 6058 will force workers like Timothy to find work outside of the public sector, further degrading the conditions in Michigan’s correction facilities and putting the remaining officers and the inmates they protect in harm’s way.

Alternatively, if the bill is signed by the Governor, Timothy believes that it will bring his facility closer to solving their staffing problems. “I think recruitment would go way up if applicants knew the job had a pension. Which then saves me, because it reduces the amount of overtime I have to work.”

Tracy Carlton, Library Technician and AFSCME Local 496 President

AFSCME members’ common bond is a dedication to serving their communities and to fair working conditions both while on the job and in retirement. Tracy Carlton, for example, is President of AFSCME Local 496, which represents employees of Genesee County. For over 25 years she has worked in the County library system. She currently works as a Library Technician providing a variety of services to County libraries including acquisitions, ordering of materials, and other services. AFSCME Local 496 bargains with Genesee County over health insurance coverage and other healthcare benefits. Employer contributions to those healthcare benefits are subject to PA 152, which caps their contributions to 80% of the cost of the rates and premiums.

As a result of the high cost of healthcare, and the cap on employer contributions to those costs, Tracy has changed her health plan multiple times seeking affordable care. Her portion of healthcare premiums has been as high as \$600 per month. Tracy is a single parent, and her son

suffers from a serious health condition regarding fluid in his brain. If not for the healthcare benefits negotiated by her union, Tracy knows that her son would have severe cognitive delays, and she would not be able to afford the numerous required brain and spine surgeries and the ongoing physical therapy and other care that allows him to fully walk and talk. Nonetheless, because of the hard cap under PA 152, Tracy has delayed essential healthcare needs, like cancer screenings, specialist care for her son, and dental care because of high health insurance deductibles. She has been forced to choose between paying other household bills or paying for these healthcare services.

In 2024, for example, her healthcare plan rates increased 17.6% while the amount her employer can contribute to her health benefits only increased 4.1%. HB 6058 would permit Tracy's union and employer to bargain over the employer contributing up to the full cost of healthcare. In 2025, Tracy and many of her colleagues moved to high deductible plans in an effort to contain costs. Healthcare costs continue to rise and exceed the hard cap. Even a relatively small increase in the employer's share of healthcare costs would provide Tracy and her son with the ability to afford both healthcare and other costs of living and allow her to continue to provide public service to the residents of Genesee County without the stress and anxiety of making ends meet.

Todd Simon - Teacher and MEA Member

During the 2023-2024 and 2024-25 school years, Todd Simon was employed as a teacher for the Waverly Community Schools in the Lansing area and a member of the MEA. At that time, Waverly Schools utilized the hard cap provisions set forth in PA 152. In 2024, Mr. Simon contributed \$154.64 per bi-weekly pay period over twenty-four pay periods to contribute to the cost of his healthcare. In 2025, he made premium payments of \$207.43 per pay period, an

increase of about 34%. Mr. Simon's health plan also included a \$4,000 annual deductible, making his 2025 premium and deductible payments \$8,978.32 for the year.

For the 2025-2026 school year, Mr. Simon was hired by a neighboring school district, Grand Ledge Public Schools. Like Wavery, Grand Ledge utilizes the hard cap provisions of PA 152 but has negotiated a different insurance carrier. Under his new health plan with Grand Ledge, Mr. Simon continues to pay an extremely high annual deductible of \$4000 but now has a bi-monthly premium contribution of \$113.06 per bi-weekly pay period over twenty-four pays, instead of \$207.43 per bi-weekly pay period. Despite this lesser payment, Mr. Simon still makes health care premium and deductible contributions of \$6713.40 per year.

Jonny Ellis - Teacher and MEA Member

Jonny Ellis and his wife work as teachers for the Williamston Community Schools. Williamston Schools utilizes the hard cap provisions of PA 152 to pay its portion of the healthcare costs of its employees. In 2024, the Ellis family paid \$180.21 per pay period over twenty-four pay periods to contribute to the cost of their family's health care. Had they kept the same medical plan in 2025, their contributions would have increased to \$406.21 per pay period, an increase of 225%. Due to this substantial premium increase, Mr. Ellis and his wife made the difficult decision to switch to a less expensive HMO plan which has created gaps in insurance coverage and caused significant delays in accessing the health care their family needs. For example, the family's 23-year old daughter has been forced to change medications from Humira to Simlandi for an ongoing chronic health condition. However, after just a few months on this new medication, their daughter developed medication-induced Lupus which has further impacted her overall health. As a result, she now uses a cane for mobility and has been issued a disability

parking permit. The Ellis family has also been forced to seek alternative mental health and physical therapy service providers.

For 2026, the Ellis family is facing an annual HMO premium increase of approximately 40.4% for the year, an increase of approximately \$72.89 per bi-weekly pay period over twenty-four pay periods. Instead of paying \$180.21 per pay period in premium payments, the Ellis family will now be making bi-weekly payments of \$253.10 per pay period along with an annual deductible that has increased to \$3400 in 2026, or about \$9474.40 for the year.

Kim Sandefur - Teacher and MEA Member

Kim Sandefur has been an elementary school teacher for the Comstock Public Schools for over 12 years. Like many school districts, Comstock Schools utilizes the hard cap provisions of PA 152 to pay its portion of the health care costs of its employees.

For 2024, Ms. Sandefur's full-family deductible for health care was only \$1000 and her prescription coverage included co-pays which totaled no more than \$1000 for the entire year.

In 2025, Ms. Sandefur switched to a high deductible health plan due to the rising health care costs and only a 0.2% hard cap increase under PA 152. During that calendar year, the annual premium costs for Ms. Sandefur's full family health insurance plan increased by 14% to \$32,854.00, with a deductible of \$4000 and prescription benefits that did not begin until after this deductible was met. Ms. Sandefur paid insurance premiums of \$8290.36 for the year, or \$345.43 per bi-weekly pay period over twenty-four pay periods. In addition to her deductible and her bi-weekly premium contribution, Ms. Sandefur experienced significant out-of-pocket expenses. For the entire year, Ms. Sandefur's paid \$6,272.81 in out-of-pocket expenses; \$4,516.73 of those expenses were related to pharmaceutical costs with no plan options available. In January 2025, when Ms. Sandefur's daughter became seriously ill and was hospitalized, she was required to

pay \$1545.00 for the emergency room visit. In addition, Ms. Sandefur's treating physician placed her on a heart medication that required her to pay \$1729.00 every quarter until she met her \$4000.00 deductible. The medical costs she incurred in January 2025 alone exceeded her total net bi-weekly income of \$1355.00 as a veteran teacher at the top of the salary schedule.

For 2026, Ms. Sandefur will continue to pay a \$4000 deductible with an annual health care premium payment of \$9975.88, or \$415.66 per bi-weekly pay period over twenty-four pay periods (an increase of \$70.23 per bi-weekly pay period for the year.). Between premiums, deductibles, co-pays and other out-of-pocket medical expenses, Ms. Sandefur expects to spend over \$15,000 on medical-related costs, including health insurance premiums, deductibles, co-pays, and other out-of-pocket expenses during the 2026 calendar year.

Michigan RNs and NPs who are MNA Members

Affordable health insurance is an essential component of a competitive benefits package for any employee, but especially for MNA's RNs and NPs, who serve on the front lines when our state faces emergencies such as the COVID-19 pandemic and who suffer violent assaults at the workplace more frequently than other professions. The Centers for Disease Control and Prevention has reported that the healthcare industry sees days lost from work due to nonfatal injury at a rate more than three times higher than all industries combined, noting that, "[w]hile healthcare workers make up 10% of the workforce, they experience 48% of the nonfatal injuries due to workplace violence." https://blogs.cdc.gov/niosh-science-blog/2024/05/29/hcw_violence_mh/. Healthcare workers also bear the brunt of communicable disease outbreaks. For example, by November of 2020, merely six months into the COVID-19 pandemic, at least 389,309 healthcare workers in the United States had been infected and at least 2,133 had died from related complications.

https://www.nationalnursesunited.org/sites/default/files/nnu/graphics/documents/1220_Covid19_DeadlyShame_PandemicEquity_WhitePaper_FINAL.pdf. When healthcare workers get sick or injured at work, they most often rely on their employer-provided health insurance as the means to pay for their own care so they can recover and return to serve their patients and communities. Even when eligible, it can be difficult and burdensome for healthcare workers to navigate the workers' compensation system, particularly for infections from communicable diseases, when such infections are frequent, but short, and the exact source is hard to prove. This reality forces healthcare workers to rely on their health insurance and bear the cost of their own workplace-caused illness or injury when their insurance requires cost sharing.

If the state of Michigan is to be prepared for the next epidemic, then public hospitals and county health departments must offer competitive benefits to retain and recruit RNs and NPs. Public employers need a fair chance to compete with private employers in the state, as well as private and public employers in other states. A study conducted in 2023 found that about a third of surveyed nurses in Michigan planned to leave their jobs, with pay and benefits cited as one of the factors. <https://news.umich.edu/michigan-nurses-study-modest-improvements-in-working-conditions-but-big-problems-persist/>. By placing arbitrary caps on the amounts that public employers in Michigan can invest in their employees' health, the state puts itself at an unnecessary disadvantage when trying to recruit employees including RNs and NPs.

With healthcare staffing in the state still recovering from the devastations of COVID-19, the rise of another communicable disease could overwhelm our system in ways we have not yet experienced. RNs and NPs at the University of Michigan have been and will continue to be critical in caring for Michiganders affected by infectious outbreaks. RNs and NPs at county health departments will remain critical in identifying, handling, and preventing such outbreaks

from developing in the first place.

By unconstitutionally withholding bills from presentation to the governor, the House is precluding the state of Michigan from giving its public employers a fair opportunity to recruit and retain the workers our state needs and deserves, and for public employees to access the affordable healthcare they likewise need and deserve.

III. THE HOUSE’S REFUSAL TO PERFORM ITS OFFICIAL DUTIES SUBSTANTIALLY HARMS MICHIGAN LAW ENFORCEMENT, CORRECTIONS OFFICERS, THEIR FAMILIES, AND THE CITIZENS OF MICHIGAN WHO WOULD BE POSITIVELY IMPACTED BY HB 4665-4667.

Amici represent workers in vital public safety roles who engage in often dangerous, taxing work to protect Michigan residents and keep them safe. These members frequently work side-by-side with other law enforcement officers. Yet, before the passage of HB 4665, 4666 and 4667, these public safety employees could not participate in the Michigan State Police retirement plan. Chronic understaffing in Michigan’s correction facilities is directly linked to the decision to remove corrections officers from the pension plan and move them to 401(k) retirement plans. The injustice of preventing public safety officers from participating in the retirement plan has likewise resulted in high turnover and the reduced ability to attract and retain qualified workers.

A. These Bills take Aim at Chronic Understaffing and Advance the State’s Safety and Security Interests Within Michigan’s Correction Facilities.

Below are just a few examples of how dedicated corrections officers in Michigan will be impacted if these bills are not signed into law.

Timothy Fleury, Corrections Officer and SEIU 526M Recording Secretary

When it comes to retention, SEIU member and corrections officer Timothy Fleury has observed a clear difference between workers grandfathered into the pension and officers on the 401(k) plan. “When you look back at when the MDOC had the pension, they did not have a

staffing issue. All those retirees who had that pension are nearly gone. It's less than 10% of the people. And look at how fast we are losing people," he explained. Unlike a 401(k), which can move between jobs, a pension would give corrections officers an incentive to continue working in a job that has become increasingly difficult. "The pension system requires workers to stay, which is what we need. We need people to stay and be rewarded for it." Officers like Timothy have also noticed that the current law values the sacrifices of some members of law enforcement differently than others. "We are risking our life every day like police, who have pensions. Our job is no different."

When HB 4665, 4666, and 4667 were passed by both chambers last year, it made corrections officers optimistic that the state would finally work to address the understaffing issue. But the failure of the House to transmit the bills to the governor has deflated their optimism. "In Michigan, the Democrats did do something, and they got this legislation all the way through, which was giving us hope that something would happen, and now we feel like that was all for nothing. You gave us false hope," Timothy said. The consequences of further delay could be disastrous for the workforce. "If this bill doesn't pass, it allows me to look elsewhere because I have no penalty for leaving now. If there was a retirement, I would be staying. There wouldn't even be a question."

Cary Johnson, Corrections Officer and SEIU 526M Vice President

Cary Johnson has worked as a corrections officer at Cotton Correctional Facility since 1995. Cary has also noticed her coworkers have been demoralized by this recent delay. "Since 1997, I have been listening to people say they need the pensions back to make this a career again. For one guy to just stall this out and what it's done to the hope of these people is awful. I don't know that he knows the damage he's doing to people," she said.

Unlike Timothy, Cary is grandfathered into the pension plan. Therefore, she has a unique perspective on what the workforce has looked like before and after they had access to a pension. “Prisons are not fun places. But I have this reward at the end of my career. The new people don’t have that, and they are leaving as quickly as they come.” Since the pension program ended, Cary has seen turnover and understaffing rise while working conditions have fallen. Corrections officers are being forced to work mandatory overtime in dangerous, understaffed facilities. They often only carry handcuffs and chemical agents in a facility where they are regularly asked to break up fights and where staff assaults are all too common. Cary is frequently alone on shifts in a facility that houses prisoners classified in all four security levels. Mandatory overtime results in officers missing out on time with their families. “When I go to work, I cannot plan something I need to be at after my shift because I don’t know if I will be able to make it. Family members and friends get sick of that.”

Because of the stress, time, and burnout involved in being a corrections officer, and the lack of a pension to look forward to, many officers are choosing to move their 401(k)s to new positions elsewhere instead of staying in corrections. “There’s nothing keeping them there, and we are losing them to county jails, the feds, but also to private industries that have better benefit packages and pensions. These are law enforcement minded people and they are not staying.” This has not only impacted the quality of life for officers, but it has also been a waste of state resources. “Since 2018, my facility has hired 135 officers. Of those 135 officers, only 46 remain. That is wasted money on training, on ammunition, and on supplying them with uniforms.”

Cary views HB 4665, 4666, and 4667 as a much-needed steps to fixing the chronic understaffing issue in her facility, and the needless delay of the bill being presented to the Governor has been devastating for her and her coworkers. “The fact that it’s made it this far took

so much for politicians to get it there. And it was so exciting to see both parties supporting this bill. It was important to see them understand what it meant to corrections officers. It's so unfortunate and I see the people who were hopeful just feeling like they got their guts kicked in.”

B. These Bills Correct an Injustice and Improve Public Safety in Michigan.

In Michigan, AFSCME represents motor carrier officers, conservation officers, and other employees providing vital public safety services to the public. These members work side by side with other law enforcement officers and state troopers, often in dangerous situations and under extreme conditions. Robust retiree benefits are essential to all public service members of AFSCME and to public safety officers especially due to the toll that work takes day-to-day and over a career. Below are just a few examples of how dedicated public safety officers in Michigan will be impacted if these bills are not signed into law.

Clyde Gentry, Motor Carrier Officer and MSEA Member

Clyde Gentry, a member of MSEA, has worked for almost ten years as a Motor Carrier Officer within the state police department. His job is to enforce traffic laws and criminal laws concerning commercial vehicles on the state roads and highways. He engages in vehicle inspections and truck weight enforcement, but he also is called upon to assist local police departments in criminal investigations, collision response, domestic violence calls, active shooter situations and other highly dangerous work. Like the state troopers Clyde frequently works alongside, he is licensed and trained to carry his firearm, is trained on defensive tactics, and has arrest authority. His job is difficult and dangerous. Traffic causes more fatalities to state workers than almost any other cause, and his primary work function involves commercial vehicles on the road. But because Clyde is not a state trooper, he does not have a defined benefit pension plan. Clyde has watched many of his co-workers leave for the private sector because they can roll over their 401(k) and work in much less arduous, much safer environments. He has also seen co-

workers leave to become state troopers to do a similar job with better retirement security.

Jon Busken, Michigan Conservation Officer and MSEA Member

Jon Busken is also a MSEA member and has been a Michigan Conservation Officer for eleven years. Conservation officers are fully commissioned public safety officers who respond to domestic violence events, drunk driving incidents, hunting and fishing regulation enforcement, and policing of marine vehicles. They work in uniform with full arrest authority and are licensed to carry a weapon. They frequently work hand in hand with state troopers or serve as their backup. Jon's job is rewarding, but physically demanding and dangerous. But because conservation officers are not in the police pension plan, many must wait until they are well into their 60's to retire. As they age, some conservation officers do not have the level of physical fitness required to do the job as well, but they do not enjoy enough retirement security to retire and create openings for new recruits. Not having a defined benefit pension has a negative impact on recruitment and turnover.

By allowing these dedicated, hardworking public safety employees and corrections officers to participate in the Michigan State Police retirement plan, HB 4665, 4666, and 4667 would correct an injustice, ease chronic understaffing and turnover, and improve public safety across the state.

CONCLUSION

Expanding access to affordable healthcare and pension benefits will make Michigan safer and stronger by stopping the flow of employees choosing to work elsewhere for better job benefits. Employees frequently forego more lucrative positions in markets outside the public sector or even outside the state and commit to public service in exchange for better benefits and retirement security. Employees with adequate health insurance tend to stay longer and tend to maintain their health and productivity through their access to better insurance coverages.

Recruitment, retention, and keeping workers in-state and contributing to the economy requires competitive benefit packages. These benefits allow public sector employers the ability to offer relatively lower pay than the private sector yet still remain competitive and provide attractive options to current and prospective employees. This balance is especially important in public safety jobs where the dangers and physical requirements of the profession are extremely taxing.

Therefore, this Court, as the Senate asserts, should deny the House's application and order it to immediately present the nine bills to the Governor.

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