

Louise Novotny Interview- May 23, 2024

Communications Workers of America Oral History Project

Interviewee: Novotny, Louise

Interviewer: Debbie Goldman and Jeff Rechenbach

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Jeff [00:00:00] Today we are fortunate to have Louise Novotny as our interview subject. Louise is at her home in Washington, DC, right?

Louise [00:00:13] Yep.

Jeff [00:00:14] Debbie Goldman is at home in DC as well, I presume, and Hannah Goldman -- looks like you're back in Brooklyn. And I'm Jeff Rechenbach here in Cleveland. [The interview is being conducted over zoom.] Today is May 23rd, 2024, a lovely Thursday afternoon in Cleveland, Ohio. The way we like to start these is just learn a little bit about your growing up, just to get some of your background before you came into the labor movement. So let's start at the very, very beginning. Where and when were you born?

Louise [00:00:55] I was born in Albuquerque, New Mexico in 1953. My father was in the Air Force stationed at White Sands Air Force Base working on rockets. My mother, Peggy, at the time she was not a nurse because she was raising a growing family, but she had been a nurse, and an army nurse at that. That's where our family, from my point of view, started.

In 1958 we moved to Patrick Air Force Base, Florida, which was attached to Cape Canaveral. My dad was the head of the Titan missile test program. The Titan was an intercontinental ballistic missile (ICBM). It was the beginning of the Cold War and the U.S. was arming up. Dad was part of that. At the same time, the U.S. was beginning the space race. And so rockets, in addition to preventing war or preventing rockets from reaching our country, were being developed with the goal of putting men into space. While we lived in Florida, I saw Alan Shepard, Scott Carpenter, John Glenn, and Gus Grissom, the original Mercury 7 astronauts, launched into space.

Louise It was a great place to grow up. We lived a block from the beach. We could run out our front door and see the rockets going up. But before the astronauts were launched, the Cold War was raging and rockets were being developed in the arms race, so there were lots of rockets going off. There were at least one rocket every day during the period we lived there. There were many different kinds of military rockets – the Minuteman, the Snark, the Matador, the Atlas. [*Laughs*] Then there was dad's rocket, the Titan. It was the biggest rocket on the Cape at that time. We kids were very proud that our dad was in charge of the biggest rocket. At one point, the Titan became the booster for the Gemini astronauts because they needed more power than the Redstone and Atlas rockets that boosted the Mercury astronauts into near space. The Gemini astronauts were being launched out of the Earth's atmosphere to orbit the moon. They needed big, powerful, noisy rockets.

It was a great place to grow up. Everybody in our neighborhood, all the dads, worked on rockets. That's what life was. And because military rocketry was in its developmental stage, there was this real camaraderie. Also, we were very isolated. The Air Force Base was located on a thin barrier island between the Atlantic Ocean and the Banana River. At that time, in that area, there was nothing much there, the Air Force base and the rocket center and a few small towns. But at any rate, when families in the neighborhood would get together, the dads would all be talking about their work. "Yeah, we missed that launch because of this." And they'd collaborate about how to fix things. "Have you tried this?" and "Have you tried that?" There was a real spirit of collegiality, problem solving and mission that was fostered there.

Jeff [00:05:11] Wow.

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Louise [00:05:12] I always get sentimental when I think about those days.

Jeff [00:05:15] Sure.

Louise [00:05:17] But at any rate, that was how we saw people operating, and I think the kids carried that forward. My brother and sister and I all have that sort of sense of how we move in the world. We're problem solvers, we're collaborators. Those are our values. Other values -- my dad was very conservative. My mother, at that point in time, thought what dad thought in terms of politics, but she grew out of that over time. *[Laughs]* There was no connection to the labor movement in my family. In fact, when I did start working for CWA many years later, my dad took me aside to warn me about the labor unions. *[Laughs]* My mother told me, he said, "She won't last a year there." *[Laughs]* I think he had this vision of rough and tough guys that I wouldn't acclimate to. But he was wrong.

Jeff [00:06:50] Thankfully.

Louise [00:06:51] For me, too! *[Laughs]*

Jeff [00:06:56] I have to go back to White Sands for a minute. Did you ever go sled-riding down the dunes?

Louise [00:07:02] You know, I was born there. We left when I was four. I have a very thin memory of my time there, to be honest. I remember things like chopping down Christmas trees in the Sandia mountains-- very, very, very few memories, frankly.

Jeff [00:07:28] So where are you in the pecking order between your brother and sister?

Louise [00:07:31] I'm the middle kid.

Jeff [00:07:33] So you moved to Florida when you're four years-old? I presume that's where you started school.

Louise [00:07:42] Yes.

Jeff [00:07:43] Okay. Yes. Public school?

Louise [00:07:45] Yes. Well, at the time, we went to school on the base. We moved to Maryland in [19]62. Dad got promoted. He moved out of research and development and into I am going to call it a lobbyist. There's probably a different name for it, but he was connected to the Air Force Systems Command at Andrews Air Force Base. A lot of his job was going to the Hill to brief members of Congress about the military space programs and try to make sure they were well-funded.

Jeff [00:08:26] So did you live in the District or Virginia?

Louise [00:08:28] No, we lived in Prince George's County [Maryland].

Jeff [00:08:31] Okay.

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Louise [00:08:32] He was stationed at Andrews Air Force Base right outside of DC.

Louise [00:08:37] And where did you go to school there?

Louise [00:08:40] I went to high school at Crossland High School. It was fairly new when I went. It was unique at the time. It had a vocational wing as well as what we'll call the traditional sort of college prep wing. There were some core classes that people went to together -- English, math, and sciences. But then, kids who wanted to go into automotive mechanics, to carpentry, to electricity, and also cosmetology -- I forget all the programs, but there were quite a few -- they went off into that wing. And those of us who had ambitions to go to college stayed in the other wing. It was an interesting mix of kids at the time.

Again, because we were not on the base at this time -- when we moved up to Maryland, it was the first time we lived off base, the first time I met people who weren't associated with the Air Force. [Laughs] To be honest, it was an embarrassing awakening for me. [Laughs] I remember going to the bus stop [on the] first day of elementary school. And Jeff, like you, I'm a shy person and I have always been. You were describing me when you were describing yourself.

Jeff [00:10:37] Also born in 1953, by the way. [Laughs]

Louise [00:10:45] I was at the bus stop, and my mother encouraged me to make friends. She thought I was too close to my brother because he and I were great pals. She told me "You need to meet new friends. Go meet new friends." Anyway, I go up to a little girl who looked to be my age and asked her, "So what rocket does your dad work on?" [Laughs] She looked at me and said "My dad doesn't work on a rocket!" [I said,] "Oh. Oh, okay. So is he in the Air Force?" She said "My dad owns a hardware store." So I got to meet a whole new world.

Jeff [00:11:41] Just as an aside, I grew up in an all Catholic neighborhood and I was Lutheran. And I was hanging out with my buddies, and [they said,] "Why aren't you Catholic? What religion are you?" I had no idea what religion I was. You know, no clue. And they said, "Well, are you Jewish?" And I thought, and I said, Well, I have heard in church that Jesus was the king of the Jews. So yeah, I guess I'm Jewish." I went home that night and said, "Mom, how come we're Jewish and everybody else in the neighborhood is Catholic?" [She said,] "Where'd you hear we're Jewish?" [I said,] "Well, we're not Catholic. We must be Jewish." [She said,] "We're Lutheran. That's your father's thing. He's the Lutheran. I'm the Catholic here." [Louise laughs] Same kind of story. I just didn't fit in.

Jeff [00:12:31] At any rate, you mentioned your brother. Was he older or younger than you?

Louise [00:12:39] He's a year older and my sister is a year younger. We were born one after the other, "bing bing bing."

Jeff [00:12:43] Yeah. So he had you under his wing a little bit?

Louise [00:12:47] Yeah. He was always the leader of the pack. He has two sisters who, to this day, adore him and think he's the most wonderful guy. But he always looked out for us.

Jeff [00:13:09] So after high school, where do you go now?

Debbie [00:13:12] Can I ask one question about high school? At this time [in] Prince George's County [Maryland], some parts are becoming more African-American and there is some desegregation of the schools going on. Is that happening in Camp Springs?

Louise [00:13:29] It didn't happen at that time in Prince George's County. It happened later. It happened, for example, I think -- the desegregation program actually started when I had graduated and my sister was still in high school. But bussing -- honestly, at the time I was going to school there, there were maybe three black families. It was not a lot. And then they started bussing, but it was after I was there.

Jeff [00:14:14] So college is next?

Louise [00:14:17] Right. I graduated in [19]71, I assume, Jeff, like you.

Jeff [00:14:24] Yes.

Louise [00:14:25] At the time, in the high school, there were a lot of activists, shall we say. We had demonstrations, anti-war demonstrations. It's a weird thing to be in a military family and have a dad who is responsible for making ICBMs, and being anti-war. But my brother was at risk, as were many friends. There were demonstrations at the high school. Then when I went to college, there were still some demonstrations. It wasn't the passion of 19]68, [19]69. But we still had demos at the University of Maryland -- it was like a spring ritual, taking over Route 1 that went through College Park. That is where I started. I think it's those demonstrations where I got a sense of the power of the collective. In addition, the atmosphere at that time, in those demonstrations, was "We can change the world." When the war ended, we thought we did change the world. Right? And so it was very inspirational, and it had that same sort of aphrodisiac that being at Cape Canaveral did. Right? As though we were on the brink of making change. We were on the brink of making history. It had that same sort of energizing feel about it at that time.

Jeff [00:16:33] By the way, I had the same dichotomy. My father worked at the Cadillac plant. It was a Cadillac plant that made tanks.

Louise Oh, no kidding.

Jeff So here I am demonstrating against the war. He's at a plant that manufactures tanks for the war.

Louise [00:16:45] Oh my gosh.

Debbie [00:16:48] One of the things I learned from Jeff's interview was he was at Kent State -- I think it was you said the day before the four people were shot?

Jeff [00:16:57] The weekend before. I was still in high school. So we would go down -- Kent was the nearest college campus where there was protests going on. And so me and a buddy of mine drove down to Kent, spent the weekend down there demonstrating, and the students were shot, I think, on Tuesday. Tuesday or Wednesday. It was later on in the week. We were back in Cleveland, back in high school at that point.

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Louise Wow.

Jeff Yeah. So it was kind of a hotbed for activity around the area.

Louise [00:17:31] A few years ago, I went to Kent State. David Crosby was performing at some little dive place. I walked around the campus and I was so impressed how they have really -- they've created a memorial. You can walk around the campus and it's got placards telling you what happened at what time. There's a little museum that I think really captures the time and the atmosphere of what happened there very well. It was really powerful.

Jeff [00:18:17] It's a very nice campus.

Louise [00:18:22] Beautiful, too.

Jeff [00:18:25] So, you're at the University of Maryland. What's your course of study?

Louise [00:18:29] I majored in English. I didn't start with that. I started with something practical. My dad was insisting that I couldn't -- I fancied myself a writer and scholar. [*Laughs*] I started in journalism and at one point I didn't pass the typing test. [*Laughs*] And I stormed out and found something else to do. I majored in education for a while. Then I finally went with my passion and switched to an English major. I got jobs in the English department. I was a tutor, helping kids who couldn't even make the grade in freshman English. And then I was hired as the assistant to the chairman of the English Department. My job was to do research for her. She was a specialist in Restoration Comedy, which was not my cup of tea.

Jeff [00:20:11] What is Restoration Comedy?

Louise [00:20:13] I don't even remember, but it you could think of white wigs and fancy dress and silliness. But my other job was to review all of the resumes that came in. I've skipped ahead. This is in graduate school, when I was --

Jeff [00:20:39] I was going to ask you that question.

Louise [00:20:45] My job was to review the resumes and assess which ones were in categories that we needed to staff, and pass the resumes on to the hiring committee to see. These resumes came in by the bag full. It was astounding to me. The time I spent reviewing resumes and making judgments on these people -- it just got to me. I envisioned my own resume passing through there, and the reaction being "Oh, we don't need her!" One day, after having been at the library doing research for the Chairman all day, I found a big basket full of resumes sitting on my desk. I sat down, grabbed the basket and just threw it across my little cubicle. The ones that I could pick up without getting out of my chair were the ones that got passed on. The next day, I quit. Or I didn't immediately quit, but I realized I couldn't continue with this. I needed to get out in the real world. I didn't want to be in the batch of resumes that I just rejected." [*Laughs*]

Louise Anyway, I had a number of jobs after I left the department. Then I met my parents' across-the-street neighbor Rudy Mendoza, who was the national director of Independent Telephone at CWA. He was looking for somebody to be an administrator for a little union pension fund. He was chair of the Labor-Management Pension Fund. He needed somebody to do administrative tasks. But

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in addition, ERISA had just recently been enacted -- the Employee Retirement Income Security Act. The law required all plans to have an easily understandable summary plan description rather than the legalese kind of documents that were otherwise the only thing[s] available. So he said, "Why don't you come work for me?" I think we both thought it would be a short-term thing. He'd get his problem taken care of. I would have a job. But I really liked working for the union. There was this air of making things happen, of solving problems, of working collaboratively. And so I stuck around for another 40 years. *[Laughs]*

Jeff [00:24:17] Very cool. What year is that then?

Louise [19]77.

Jeff Okay.

Louise [00:24:28] [19]77, I started with the labor-management pension fund.

Jeff [00:24:32] And you were housed at K Street.

Louise [00:24:36] Yes, exactly. 1925 K Street, [Washington DC].

Jeff [00:24:40] Before I hand this over to Debbie to talk about your CWA career, let me dial back for a minute and ask was your brother engaged in protest against the war as well?

Louise [00:25:00] Yes, yes.

Jeff [00:25:01] What was your parents reaction to your --

Louise [00:25:05] Oh my gosh. They were split up, too. My dad was furious. We couldn't talk civilly about what was going on. My mother was torn up because she didn't want her boy going to Vietnam. She even later confessed to me that she was making plans about sending him to Canada, because we had relatives in Canada. How about in your family?

Jeff [00:25:48] Actually, it was benign. My father was a Republican, a Nixon Republican. I mean, really, grew up in a family that was a Teddy Roosevelt Republican and just kind of stayed with it. But really, [he] never was angry about my protest against [the war]. My mother was definitely against the war. And I think it was both -- I was the oldest. I think, in both cases, they didn't want to see me shipped overseas. They sort of understood it. I have to say they really didn't give me any trouble for it. They knew I went down to Kent to protest against it.

Louise [00:26:32] Oh wow. Okay.

Jeff [00:26:34] As long as I had a decent haircut, I was allowed.

Louise [00:26:38] I think that's part of my Dad's problem too. My brother had the long hair. Charlie was selected to go to the Air Force Academy and went through all the required stuff, the interviews, the congressional recommendations. And then when the time came, he said, "I'm not going." I think that's where the rift really started. Especially for my brother, it was very tough. And my dad -- well, we had other issues with dad. *[Laughs]* I don't think he ever quite got over that.

Jeff [00:27:36] That's too bad.

Louise [00:27:37] Yeah.

Jeff [00:27:39] Okay. You're in 1925 K Street, so I will turn it over to my partner, Debbie, to talk about your CWA career. I may chip in every now and then.

Louise [00:27:49] Please do. Yes.

Debbie [00:27:50] Please do. Louise, let's just get very quickly from 19]77 to [19]83, when you started in the research department. You don't have to tell too much detail, but you've told us you were the administrator for the labor-management pension fund. And by the way, you said Rudy Mendoza was the director of the Independent telephone group. I don't think in any of our interviews yet we've talked about the Independent telephone groups. Most of the people we've interviewed who come out of the telephone side came out of the Bell System.

Louise [00:28:36] Right, right. Yeah. So he came out of General Telephone out of southern California. Dina Beaumont -- well, she was at General [Tel], but they were different unions or locals, I think. But anyway, I don't remember them all. What was there?

Debbie [00:28:59] Just in general, what was the non-Bell systems?

Louise [00:29:02] These were the non-Bell telephone companies -- Centel, Century, Citizens, GTE, United. They tended to be smaller companies, and a lot of them [were] in sort of rural areas.

Debbie [00:29:16] Well, the predecessors to what became Centel and Sprint. But I think one of the main things is that there was not a national contract or even a regional contract.

Louise Correct.

Debbie Except for a few of the General Telephone units were relatively big, but most of the others were pretty small.

Louise [00:29:37] They were small units. And you're right. They each had their own contracts. Rudy did not negotiate the contracts, but was often brought in to assist, and then also was considered like a clearinghouse. He had a research assistant, John Howard, who you may remember, who gathered, information so that all the units would have a library, if you will, of information about the key issues and the key provisions of all the contracts.

Debbie [00:30:17] And the other thing I wanted to ask about is -- we've been interested in the racial and ethnic background. And in general, the union was led by white men for a long time. But I hear the name Rudy Mendoza. Was he of Hispanic --

Louise [00:30:32] He was Hispanic. And at that time there was another guy who was -- I'm sorry. He was our international affairs director, and I'm blocking on his name. But they were the two Hispanics. I think there were some women who were assistants to the executive vice-presidents, but no one in in an officer capacity.

Jeff [00:31:10] Lou Moore.

Louise [00:31:12] Lou Moore. That's it. Very nice man.

Debbie [00:31:17] Very good. So after working for Rudy Mendoza, you had a few years in the public worker department.

Louise [00:31:28] I went from Rudy Mendoza to the research department. I worked -- to be honest, I don't recall the years, but I got hired by [research director] Ronnie Straw. Because after the several years that I worked on pensions, I became an expert, relative to a lot of people. I knew how to talk to actuaries. That was key. So I got hired into the research department to do pension work and that's when I was first assigned to do health benefits work. And then, after a few years in the Research Department, I was asked to move to the new Public Workers Department to work with Connie Bryant, the national director at the time. The post was later elevated to a vice-president and Connie was the first elected Vice-President of Public Workers.

Debbie [00:32:48] That was kind of the beginning of CWA trying to figure out how to have some kind of focus and structure, institutionally for public and healthcare workers.

Louise [00:33:00] Right, right. Well, that came later, too, at least in the sense of naming it. We [had] just organized New Jersey state workers. We already had a lot of public workers. We had county workers in New Jersey. We had city workers in New York. There were smatterings across the Midwest. Jeff, there were --

Jeff [00:33:22] Yeah.

Louise [00:33:25] I'm blocking on the District 4 states, but in Iowa we had libraries, we had school bus drivers and snow plow drivers. We had a lot of these public sector unions because CWA tended to be everywhere and when these workers were trying to organize, we were there. CWA was often the only union in some of these towns.

Louise [00:33:52] There was a smattering of public sector units throughout the union. But, with the New Jersey state workers, we suddenly had tens of thousands public workers. They were a substantial presence within the union. We needed to figure out how to support them and the national director would operate much like the national director for the Independent Telephone companies as a clearinghouse for information, a way to convene workers so that they could share information about what's going on in their districts, identify problems that might cross all borders, and that sort of thing. It was, again, not a bargaining responsibility, but a support and networking opportunity.

Debbie [00:34:54] And you mentioned Ohio and maybe Jeff, you remember. I remember there was a period in which the organizing department went into Ohio after the state passed a state collective bargaining law.

Jeff [00:35:12] We passed a state collective bargaining law and brought in a bunch of people. Bob Muscat, I think, was heading up the operation. Carla Katz was one of the people that came in. A few others.

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Louise Oh, really?

Jeff Yes.

Louise [00:35:27] I didn't know.

Jeff [00:35:28] She came in to help out. Helen Gibson was the administrative support for organizing. Yeah.

Jeff [00:35:37] They had this philosophy. There were these huge statewide units. Bob had this philosophy. AFSCME [American Federation of State County and Municipal Employees] kind of had a leg up on the big statewide units. He thought if we would win a bunch of elections around the state, that would give us momentum and state workers would then fall to our side. So we had like 19 election victories in a row, but they were for 12 people in this county, 9 people in this county, 48 people in this county. And when the big statewide elections came, we got trounced.

Debbie So that was kind of the end of that one.

Louise [00:36:20] That was the end of Muscat.

Jeff [00:36:21] Yes, that was the end of Muscat as well. We tried to get Larry Cohn to come to town, but he was he was busy managing things in New Jersey at that point because they were still fresh with everything going on there.

Louise [00:36:41] Then he was brought in to replace Muscat.

Debbie [00:36:46] So this was the early [19]80s?

Jeff [00:36:49] Yes. Early [19]80s because I just I came on staff in [19]81, and it was while I was on staff.

Debbie [00:36:58] Louise, now I want to focus on what I think will be the biggest section of our conversation, or maybe even not so much a conversation. Did I forget something?

Louise [00:37:11] Yeah, I forgot something. There is something I did in the public sector that I'd like to talk about. The Texas State Employees Union was also blossoming at that time. I did a lot of work for them on health care and pensions. The big thing that I'm still very proud of to this day. Pay equity was a key issue at that time and we were trying to promote and figure out approaches to both identifying inequitable wages for women and then come up with solutions to be presented in a public sector arena. We conducted a big survey of Texas jobs and issued a report, "Job Segregation and Wage Inequities in Texas State Employment."

Louise [00:38:45] Debbie's heard me tell the story I don't know how many times because I love it. But we went through every job title and split them out [by] men and women and the wages. We compared job descriptions for skills, educational requirements and other aspects. I don't remember how many jobs we reviewed but it was a lot. What I had to work with at that time, this was 1984, was a calculator. This was pre-computers. And we did all the charts in the study by hand. For pie charts we used the bottom of a Coke can. For bar charts we used transparent tape.

Louise [00:39:50] It was a massive project. Deborah Greenfield, who was in our legal department at the time and I did this work. Some time ago [I] ran into somebody from TSEU. They told me people still talk about this there. I don't believe it. I think they were flattering me, but nonetheless, it worked. I was flattered.

Debbie [00:40:28] What impact did it have? How was it used?

Louise [00:40:32] They used it in [a] legislative campaign to boost wages for women and were successful in attaining increases over time. It was used to good end in eliminating a lot of the differences in wages for women there.

Debbie [00:40:57] That was very early on in the Texas State Employees Union.

Louise [00:41:03] Yeah.

Debbie [00:41:04] And do you remember some of the leaders down there that you were working with?

Louise [00:41:09] Eliseo Medina was the head of TSEU at the time. I just remember a few of them. This was before Sandy Rusher. This was before Danny Fetonte. There was a Jim Pearson. It was still an organizing campaign as opposed to being an official local.

Debbie [00:41:43] Can you talk a little bit about why CWA in Texas, a telephone union, got involved with organizing state workers?

Louise [00:41:57] You know, to be honest, I don't know the origin story. But I do always think of it in terms of that famous John Kennedy speech. "We choose to go to the moon not because it is easy, but because it is hard. Because that goal will serve to organize and measure the best of our energies and skills, because that challenge is one we are willing to accept and are unwilling to postpone." And for CWA it was something that needed to be done. And it was hard and CWA chose to grapple with it. Honestly, throughout my career I've been in situations where CWA fights above its weight. We take on the battles that need to be fought. I think that's what happens. There are probably other more, less emotional, more practical reasons for organizing the Texas State workers.

Debbie [00:43:10] Okay, now let's jump to 1983. You started working in the research, excuse me, 1988 you came back to the research department, and George Kohl is now the director. You become the expert in health care bargaining and policy. I'm going to be very quiet for a while, because I think you have quite a story to tell about that trajectory. Talk to us about it.

Louise [00:43:43] I think that bargaining in 1989 was when we developed our whole view of health care and what we think about health care, how we value health care, how we work on health care changed. Up to that time our negotiations with the Bell phone companies had been focused on paying less towards health care. Eventually in the 1970s we achieved fully-paid health care at AT&T and in the Bell Operating Companies. Later, the union tried to stave off employers' attempts to shift health care costs and take back that hard-won benefit by negotiating for cost containment initiatives. So it was always this sort of chase. Costs go up so we bargain for second opinion surgeries. Costs keep going up, so we implement utilization review. There are these approaches that

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we put in place to try to tamp down the rising cost of health care. The fights were tough. In [19] 83, there was a strike partially over health care. In [19]86, there were strikes that included health care as the cause. It was all because of the rising costs and the companies' attempts to make us pay part of the premium or higher out-of-pocket.

Debbie [00:45:33] [19]83 was a strike against the Bell System.

Louise [00:45:37] That's what I'm talking about in the [19]80s.

Debbie [00:45:39] But [19]86 would have been a strike against AT&T because you now had the breakup of the Bell System. Is that correct?

Louise [00:45:50] When did divestiture [happen]?

Debbie [19]84.

Louise [19]84. That's when it was decreed. When did it actually happen?

Debbie [00:46:02] Decreed in [19]82. Took place in 1984. So the [19]83 strike was before the breakup. But knowing the breakup was coming.

Louise [00:46:12] Right. That's what I was trying to remember. And knowing the breakup was coming naturally it was a shorter term than usual.

Debbie [00:46:22] Anyway, there were strikes.

Louise [00:46:24] So there were strikes over health care.

Debbie [00:46:26] Keep on with the narrative.

Louise [00:46:28] At the same time, there was this realization that we can't keep doing the same thing over and over again. It doesn't get fixed. And the reason is because it's not our fault. We who are at the bargaining table don't control the cost of health care. Health care is driven by doctors and by hospitals and by insurance companies. Doctors push utilization. They tell patients what to do. We don't walk in and say I would like this, this, and this. Doctors determine the utilization of health care, so they drive costs. Hospitals determine costs by investing in technology and driving patients to use this high tech equipment. Insurance companies, the administrators impose rules, and different benefit provisions and hospitals have to develop administrative teams to comply with their rules. Then insurance companies have their own administrative overhead. All of that drives costs. We came to believe that unless we get some control over those players, what we do at our bargaining table is going to be, at best, short-term if at all effective at keeping health care affordable.

Louise [00:48:03] In 1989 we came up with a two-pronged approach. One, the short-term approach, was the next step in the evolution of these cost containment strategies -- managed care networks. The managed care networks at that time were brand new. There were very few employers who were offering them. There was only one telecom employer at the time that had implemented networks. But CWA proposed them because we felt there's a trade-off. The networks restrict the access to care by selecting providers who promise to follow utilization protocols and who agree to discounts. At

the same time, our proposal was to preserve choice. A member could choose to go to the traditional plan or else choose to use the discounted network. That was what we proposed. It was, again, a short-term approach to controlling cost, but making the system more accountable to both the employer and to the union.

Louise The second path was acknowledging that the rising health costs are a national problem and that we shouldn't have to negotiate over access to health care every round of bargaining. Health care should be a right. We asked the employers to join with us to look for a national solution to the health care problem, for national health care policy that would get health care off the bargaining table. That was pretty audacious, actually, for the time. But we did push that and I'm proud to have helped to draft that approach.

Louise [00:50:32] CWA President Morty Bahr believed in the right to health care. He believed that it was eating up too much of our money at the bargaining table. He believed that no one should be without health care and that if we have to strike, that no member should be at risk. That was appalling to him. He really was such a fierce leader both at the bargaining table and in other places on this. We did have strikes. They did not agree to that right off the bat. And not surprisingly, we had strikes. [In 1989] 200,000 workers, members went on strike over health care at AT&T, NYNEX. Ameritech was out -- but Jeff, I'm not recalling if health care was an issue there at Ameritech -- PacTel though. It was a 26-day strike for most of them. NYNEX stayed out for 17 weeks. So it was a powerful experience for us. It was recognized throughout the labor movement as being this great statement about health care. We were written up in newspapers and magazines illustrating the flashpoint that health benefits had become in union contracts.

Debbie[00:52:34] You're talking about 1989? We've had some conversations, particularly with Bob Master also, I think a little bit with Chris Shelton and Dennis Trainer about the 1989 strike over health care.

Louise [00:52:53] Right.

Debbie [00:52:54] Health Benefits for All, Not health Cuts at NYNEX.

Louise [00:52:58] It was a different fight at NYNEX than it was for the other units. Since they talked to you about it, I won't. The slogan at the other units was Cutting our Health Benefits is a Sick Idea. We had at the convention that year, taking you back in time, this is pre-PowerPoint when we used those, we didn't call them slides, but it was transparencies, things were written on transparencies. Morty [Bahr] had each District at the convention stand down, if you will, and had them each make a presentation about the health care crisis and what it means for our bargaining. It was a long presentation, 30 slides or so. I think it was the bargaining chairs that tended to give these presentations with the notion being that we're making a change in how we talk about health care, how we approach health care at the bargaining table and in the legislative process. The presentation laid out our new understanding about how health care impacts us. It was a way to educate our leaders, the local leaders, and then hopefully get our members more prepared for the change to come.

Debbie [00:54:55] And the change being moving to managed care?

Louise [00:54:59] Moving to managed care and advocating for national health care reform.

Debbie [00:55:04] So this was the convention in [19]89. Do you remember was that before the strikes or after the strikes?

Louise [00:55:13] Well, that's a good point. It is my recollection it was before, but I'd have to look for confirmation of that.

Jeff I think it was after the strikes from the other units but before the NYNEX strike ended. I seem to recall NYNEX still being on strike when we were at convention. The rest of us had all settled by then.

Louise Okay. Okay.

Debbie [00:55:50] In the other units, did we negotiate in [19]89 the beginnings of managed care?

Louise [00:55:59] Not in all of them, but definitely at AT&T and I believe Bell Atlantic and US West got seeded there, if you will. The difference was at AT&T. I remember this story of Morty. He was upstairs in his office late at night. And I was downstairs in mine waiting for things to happen. He had the AT&T CEO, Bob Allen at that time, and really buttonholed him about health care. Morty wouldn't let him out of the room until an agreement was reached. Morty and Bob got into the nitty gritty of what managed care networks would look like. They set the parameters for managed care would look like at AT&T. The result was not something that had been seen in the industry at the time. The agreement provided that our joint health care committees would oversee the networks and help design and implement the programs. That was unique to AT&T. The other companies that implemented managed care took off-the-shelf packages from the insurance companies. I'm not going to say which one was best. It was pretty hard working at AT&T on it. But the other thing, once they got an agreement on networks, Morty still wouldn't let Bob Allen leave. He said, this isn't going to be the end of it. You've got to work with us for national health care reform. I wonder if one of his books [*From The Telegraph to the Internet*] has his story about that night. But that's how it was told to me by someone from the company, not by Morty.

Debbie [00:58:18] So I want to slow down a little bit, because I think this is quite important. What I heard from you is the concept of managed care. Somebody was educating you and maybe [Research Director] George Kohl about it. These big companies that also have an interest in containing health care costs and have huge Benefits Departments and experts.

Louise Right.

Debbie But this idea is coming from the union to the companies, right? Their benefits departments, did they know about this or you were educating them?

Louise [00:59:06] Well, as I said, one of the companies had already implemented managed care. At the time managed care was being written about in health care and human resources journals. And we, George and I, started meeting with Cathy Schoen, who was with SEIU at the time.

Debbie [00:59:36] Yes.

Louise [00:59:38] She knew a lot about it. So we got briefed by her. But our understanding was about an inch deep for a topic that's a yard deep, right? It really was more a framework to think about what we wanted out of health care. Key things being that benefits had to be comprehensive. It had to be affordable. We had to assure the quality of the care. And did I already say accountability? We wanted it to be accountable. Those are the things we started sort of listing as our framework for what we wanted out of health care. Those were principles that we developed both there and then subsequently. But, at any rate, in the AT&T contract, we were developing the networks according to some parameters that had been laid out in the contract by Morty and Bob. Morty included some really great stuff. One that I remember is that this new system would not require people in the midst of treatment to change their doctors. They could stay in the traditional plan. So we had a transition plan to assure continuity of care.

Debbie [01:01:42] Your note to me says you served on the joint labor-management health care cost containment committees at AT&T, Lucent, US West and Bell Atlantic and also worked with the Southwestern Bell committee as it gobbled up Ameritech, PacTel, and BellSouth. So this was something you were doing in the [19]90s? Maybe you want to describe what you did and then what impact it had and how long it was effective.

Louise [01:02:19] The AT&T Joint Health Care Committee actually became kind of a pilot, if you will, because things that we learned and developed there we could pass on to the other units for them to consider and adopt in their negotiations. The AT&T committee was two people from CWA, two people from IBEW, and then, technically voting on the committee, two people from AT&T, a benefits department and a labor [relations] department. But early on they had this medical director on the committee. We had tons of resources, including, at the AT&T table an excellent consultant from Towers Perrin. He made our work a real learning experience as well as a practical development project.

Louise [01:03:46] The committee put together an RFP. We sent it out to insurance companies. We interviewed them. We selected them. We met with them in local places to talk about their networks in different sites. I'm remembering an incident that happened in Cleveland. (laughs) We had these site visits. We had local committees. Local committees would meet with us and talk about what they think of the plan we had for the network in their site and then give us feedback and make requests. So, for example, in Atlanta, there was a particular hospital that our members felt needed to be in the network. Things like that.

Louise But in Cleveland. Jeff, forgive me, what was the local number? John Ryan was on the committee.

Jeff [01:05:09] 4309.

Louise [01:05:12] I'm terrible with remembering names. My apologies, but.

Debbie [01:05:18] Eddie Philips?

Louise [01:05:19] Not Ed Philips. Fellow who died.

Debbie [01:05:23] Seth [Rosen]?

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Louise [01:05:25] No.

Louise [01:05:29] It's the story. We'll protect the innocent.

Jeff [01:05:34] Bernie Hill?

Louise [01:05:36] No. Forgive me for not remembering, but here's the story. We go there, and the CWA local committee had developed a fabulous presentation about the network that we had submitted to them for review. They had charts and posters and maps and had done a thorough analysis of health care access in our proposed network. The Joint Committee had established a standard of a choice of doctors within x miles and so many hospitals within another set of miles. The local committee showed us that our measurements were wrong because we didn't take into account all the traffic in Cleveland. Time and mileage matter, they asserted. I was blown away by their presentation, but there was a guy on the company side of the joint committee from the benefits department. He was obstinate. He just wouldn't take any input. So I took him out in the hallway, and I pushed him against the wall and poked at his lapel. "I can't believe you're doing this. This is exactly what we need. We need people engaged in this system. They've done all this work and they know this better than anybody and we have to treat their presentation as credible." We went back into the meeting and he agreed to the changes. When the meeting was over, the local guys drove me to the airport. As we came out of the parking garage, the driver looked down the street and said "Oh my gosh, look at all the traffic." (laughs) Honestly, there were about four cars on the road and all the guys just started laughing. Anyway, I never heard anything more about it. The network was established, but that's a funny story.

Louise [01:08:15] The local folks got deeply involved in making the networks. There were always 2 or 3 people in a city who knew the health benefits plan, knew the health care system within that local because they usually had a personal or family situation that made them need to understand the health care system. That was one other thing that came out of our work on the joint committee. It came to pass that we realized the value of having local experts not only to know the local health care system, but to help folks in that area navigate the new systems we were developing. And so we came up with a new title and pushed this in bargaining and it was accepted. I don't remember what the year was. I think the title was benefits coordinator. I actually came to believe during the course of my work that was the most important thing that ever happened on the health care front was having that sort of local expertise to help our members navigate the system. They became, I think, real heroes to folks who needed their help.

Debbie [01:09:49] We'll come back to the public policy side, which I want to have plenty of time for. But just to continue this, for how long would you say that the managed care networks were able to lower the curve of costs?

Louise [01:10:04] They did. In fact, there was one year there where there was no increase. I think we got through two rounds of bargaining because of the effectiveness of the managed care networks. In other words, health care wasn't a flashpoint in negotiations in that way for, I guess -- What would that have been? [19]92 and --

Debbie [19]95. We were still on a triennial for the Bell System, so it again began to pop out in [19]98?

Louise To be honest, I don't recall. But I do remember this, that there were two rounds of bargaining that we got through without headache. What we did in those years was try to make improvements to the networks including these coordinators that I just talked about and expanding some benefits.

Debbie [01:11:16] And how were you able to avert the major criticism today of managed care, which is that it's all about the gatekeepers and saving money by reducing the amount of care?

Louise [01:11:40] Well, I do think that it's a problem. I don't know that it's a controllable problem anymore to be honest with you unless we actually do get the kind of national health care reform that institutes price controls and imposes budgets on hospitals and all the kind of devices that is part of a national health insurance scheme. On the other hand, those countries that do have those kind of systems in place also have issues with rationing, with delay of treatment, with rising health cost and that sort of thing. It's health care. It's something you're not going to mess around with. It's life and death. It's a system here still that's not accountable in any way to a budget anyway. [01:13:07] Are we going to policy now?

Debbie [01:13:09] I think so, unless you want to add anything more about the bargaining.

Louise [01:13:14] I had some scribbles here. So the one thing I would say about those networks. Beyond preserving our health benefits, they became in some companies, not in all, but definitely in Bell Atlantic and US West and AT&T there was this sense that the union built the plan and so it was worth fighting for and protecting. To be able to create that kind of a dynamic around a benefit that previously had been just the employer's business -- we just get our ID card and go to the doctor -- did a couple of things. Not only did it give us real energy around the benefits plan, but it developed leaders, people who became experts in health care, became essential at the bargaining tables, became staff members. You could see the progression so that was a very cool experience. I'm thinking Ron Honse in District Four, was one of those who really sort of knuckled down and learned the system. He was on a bargaining committee, but then he got on staff. So he was just the model for others who took that pathway to leadership.

Jeff [01:15:11] Christy Darling was another one.

Louise [01:15:12] Oh, gosh. Christy Darling, she was a darling. She was before Ron, she was the one. Absolutely.

Debbie [01:15:22] Okay, let's talk about CWA getting engaged in policy.

Louise [01:15:28] Right.

Debbie [01:15:29] I don't know if you want to go before [19]92, but certainly [19]92, [19]93 [President William J] Clinton comes in and there's going to be -- Well before Clinton comes in there's an effort to elevate health care reform onto the policy agenda. So talk about back then and then move into the Clinton health plan and what CWA did.

Louise [01:15:52] So again, it goes back to the [19]89 bargaining and the language we got about national health care reform. We went in several different directions after that. One was keeping the companies to their word. Morty, and I'm trying to remember the guy. I think it was the General

Telephone guy who headed up this telecom industry health care consortium. That was the title of it. They would meet and Morty would try to coax them into stepping up and stepping out on the need for health care reform. And honestly, I think they came out of respect for CWA and they came out of respect for Morty. But they would sit in these meetings and we'd have experts come in and talk to them, and we'd have presentations that we would make. But they were just not into it. So I think Morty tired of that. He recruited them into the National Leadership Coalition on Health Care which was a big coalition of many employers and health care providers and unions that would sit together and hash out what a national health care reform plan for the U.S. today might look like. Our company members came. AT&T was there and Verizon/Bell Atlantic was there. US West was there. They came, but the people they put on this committee were their lobbyists out of their DC offices here who tended to be conservative Republicans. It just felt like they were coming because they were told to come not because they were told to make something happen.

Louise [01:18:36] On the other hand, at the same time we're getting involved in talks at the AFL-CIO. There's a healthcare taskforce at the AFL CIO that I sat on and we were hammering out what would be a labor approach to national health care reform. It broke down into I think it was just two camps, but there might have been more. That was extensive work led by Karen Ignagni, who was, I can't remember what her title was there at the AFL, but she had a heck of a job trying to lasso all these disparate unions to get to one unified position. We went on trips to Canada and explored that system. It was a pretty massive undertaking to educate ourselves about health care and what we might look for. Eventually, though, it dissolved. There were two camps. One was the "Pay or Play" approach which meant an employer would have to provide its own plan, or else its workers would have to be covered by a national health care plan.

Debbie [01:20:24] And a company that did not provide its own health care plan would have to pay into a fund --

Louise [01:20:29] Would have to make a contribution to the national fund to finance the coverage for its employees.

Louise [01:20:40] And then there was the Single Payer camp which is where we landed. We wanted a single national health insurance plan along the lines of the Canadian system, but customized for America. Those were interesting times too. The unions in that camp tended to be the industrial unions. There was the UAW, the Machinists, the IUE, ASFSCME, the Steelworkers, the Mineworkers, the old needle trade unions, ILGWU and ACTWU. This is another instance of CWA playing above its weight. Morty was really the linchpin for this group. He would call the meetings of the union presidents prior to AFL-CIO executive council meetings. They would meet and staff would brief them on the issues to be addressed at the council meeting. The goal of the meetings was to keep the unions together, to be a united front at the council meeting to push for a single payer national health insurance plan.

Debbie [01:22:22] As you've talked about the two camps. What were the basis for the industrial unions and CWA and AFSCME primarily being for Single Payer? And as I recall, the Pay or Play [group] was the building trades. SEIU was a strong advocate.

Louise [01:22:41] Those unions that sponsored their own health insurance programs to provide benefits for their members tended to support the Pay or Play approach. The unions like CWA whose benefits came through the collective bargaining process and were employer-sponsored plans tended

to be in the Single Payer camp. The building trades were the Pay or Play unions. They really saw their identity through those plans. Some of the benefit plans they provided were quite extensive and impressive. Because of the nature of those unions, I think that became a real sort of brand for them. Their benefits plan was like their brand. Even though those plans were being affected by the same cost problems that the employer-sponsored plans were, the building trades unions felt their identity, a key link to their members, would disappear if they didn't have these benefits to offer to their members. And so they saw it as survival whereas we did too but in a different way. We saw our collective bargaining being blown up year after year because of health care cost increases and our benefits shrinking as a result. So the two camps had two different interests and there never was a final single AFL-CIO endorsed plan.

Louise [01:24:43] The single payer unions moved off [on their own]. These unions also tended to be the Jobs with Justice unions and so we did our health care work predominantly through Jobs with Justice. At that time one of our big partners in Jobs with Justice was Citizen Action, where our friend and colleague Cathy Hurwit was the real maven of health care reform. That's how we got our work done. The Campaign for Health Security evolved under Jobs with Justice. It sort of evolved into Cathy being our policy expert and the link to other community organizations, other advocacy organizations. I was the one who sort of lassoed the single payer unions together. Between the two of us, we managed to get this diverse group to push the Paul Wellstone single payer health care plan in the Senate and Jim McDermott's single payer plan in the House. Those were the plans that we endorsed and advocated for.

Debbie [01:26:26] Talk about your caravan across America.

Louise [01:26:33] 9laughs) I was trying to remember when that was. I can't remember what year that happened. The notion was to raise awareness that these plans are out there, that health care change is on the way. Citizen Action, I think, got the ambulances. I can't remember how many there were but there were probably more than half a dozen, but I don't know if there were a dozen. But a bunch of us, starting at different points in the country in these ambulances, decommissioned, but now plastered on the side with Campaign for Health Security. We would drive from city to city and have these town hall style talks and rallies, and collect postcards that we had devised saying things like Cutting Health Benefits is a Sick Idea, and collecting them and driving them back to be delivered to the White House. My route was Portland [Oregon]. I think it was Portland to Boise [Idaho] to, what's the capital of Wyoming, Cheyenne? I think I ended it in Denver and someone else took over. But anyway, it was [an] interesting diversion. Fred Azcarate at the time was at Citizen Action and was the coordinator mastermind of the drive and he said he'd never do it again. It was mayhem.

Debbie [01:28:42] Before we move on in time, which we know the outcome, which was the Clinton administration endorsed a plan that was more like Pay or Play than it was like single payer. And it didn't make it through Congress.

Louise: Right.

Debbie Do you want to talk about any more mobilization activities or education activities that you did for the CWA members at that time.?

Louise [01:29:09] For the Clinton plan? You know, I know we did.

Debbie [01:29:13] Or for single payer at that point.

Louise [01:29:18] You know, Debbie, I have to say, everything starts to blur together. But we did a lot of educating, again through Jobs with Justice, a lot of work on it. The Clinton plan was a disappointment. As you say, it was a pay or play approach and we put so much into it working for single payer and then got what we told the Clinton folks was not going to be good enough. And it exploded. I think that it failed for a bunch of reasons. We were lukewarm about it. Only supported it really because it was Clinton and it was our greatest hope at the time for getting anything done. But it really didn't meet our criteria for what we wanted in health care reform. Then there were the Harry and Louise ads. Do you remember those that really sort of torpedoed it? It was true. The bill came in a book about this thick, the Health Security Act.

Debbie [01:30:37] Your hands showed about six inches thick.

Louise [01:30:40] Maybe it was only four, but it was big. [The Harry and Louise ad] shows this man and woman at the kitchen table trying to figure out what their health care is going to be like. And it was devastating. I think it was very effective in making people scared they would lose their health care.

Debbie [01:31:10] If we continue with the policy then. Although I do want to ask one other thing with Jeff here. As I recall, there was always an attempt to get our employers to understand that they were subsidizing the companies that were not contributing to employee health care benefits. As I recall, we had this in one of our interviews. Jeff, at one point you had the CEO of Ameritech, Dick Notebaert, who was about ready to sign on with you and do a joint press conference. Was that during the Clinton years?

Jeff [01:31:59] Yes, that was during the Clinton years. Morty was trying to get any one of the Regional Bell Operating Companies to sign on.

Louise [01:32:08] Right.

Jeff [01:32:08] And we finally got Notebaert to agree to sign on to the employer mandate portion of the plan.

Louise [01:32:17] Right, right.

Jeff [01:32:18] And so he and Morty flew to Wisconsin and Notebaert flew to DC so he could fly back to Wisconsin with Morty. And we had a big event up there. And then Notebaert was savaged by the rest of the business community in the Midwest who threatened to take business away from Ameritech and that he needed to get off that bandwagon. So he had signed on, but he was effectively muted after he came out publicly for it. It's part of who Morty was, just always looking for that other angle to try and leverage and having each of us [on the executive board] try to get to our connections with the employers to get them to sign on board.

Louise Right.

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Debbie [01:33:14] And this was not the first time, I'm sure Louise, that you experienced where class solidarity by the employers trumped their own self-interest.

Louise [01:33:25] Yeah, absolutely. That work on the National Leadership Coalition. It wasn't leading to a place that we were comfortable with it because we were now at this point embedded in the single payer approach. But it was showing all kinds of different ways that employers could preserve their health care and save money if there were a national health plan. They just wouldn't budge. And Jeff, you probably know this better than I, but I think part of the reason, and it could be somebody actually said this to me from the company, they don't like to get involved in anything that smacks of regulation. They don't want anyone to think that they agree that there should be more government regulation because they wanted government to be hands off our industry. So they didn't feel comfortable saying that on the other hand, the health care industry needs to be wrapped in all kinds of regulations. So, yeah, there was definitely the cabal of the corporations standing in the way of major reform.

Jeff [01:34:55] Notebaert showed me a couple of the messages he got from some of his corporate counterparts and they were pretty nasty. I mean, he took a beating.

Louise [01:35:05] Wow.

Jeff [01:35:07] For stepping out like that.

Louise [01:35:08] Did he ever step out again? Or did he step down?

Jeff [01:35:15] Well, then they were taken up by SBC --

Louise [01:35:18] Oh, right.

Jeff [01:35:19] And Ed Whitacre became the CEO and Notebaert went out to US West and became the CEO out there for a few minutes.

Louise [01:35:27] Really?

Jeff Yes.

Louise [01:35:28] Wow. I don't remember that.

Debbie [01:35:32] Let's jump now to the prelude to and the Obama health care period.

Louise [01:35:46] Okay. I do want to say one more thing because this became important to me and how I conducted my work or framed my work, whatever you want to say. During the Campaign for Health Security the Coalition spent a lot of time hammering out the principles we wanted to see in health care reform. I mentioned them before, but I did want to mention again, because it turns out they apply to so many things. We came up with five. I wrote them down because I always forget one: universal, comprehensive, affordable, quality, and accountability. Those principles are how we judged any kind of legislation that came through and then again, for me it became a way to frame bargaining demands. And towards the end of my career the affordability principle became a key in health benefit negotiations at all the companies but at AT&T in particular as they were pushing for

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greater cost sharing. I don't know where they are now. Jeff, I don't know if you've kept in touch with it, but I think we now have -- Well, it's sort of another conversation. But it always became helpful to me when we think about it in so many different ways. Debbie, even broadband, to think about what do we want from a broadband program. We want it to be universal, comprehensive, affordable. These are the principles that guide the way we see the world or want the world to be.

Debbie [01:38:05] Let me stop. We're getting on to almost 3:00. And, Jeff, you have a hard stop. Am I correct?

Jeff No. I'm good.

Debbie [01:38:19] Okay. And Hannah, you're good?

Hannah I have to get it off by, like, 3:20.

Louise [01:38:28] I won't do any more asides.

Debbie [01:38:30] Oh, the asides are always the best part.

Debbie [01:38:38] You became the research director. You'd been the assistant director and you became the research director. Your timeline says [in] 2000 [you were] named assistant director of research. That's when George Kohl became an assistant to Morty Bahr. Although they didn't give you the title [for several years], you were running the research department and eventually you got the title. That's a story in itself. But let's jump ahead then to the prep for hoping that Obama would be elected president after how many years of Republicans and that the issue of health care reform might be on the agenda again. What did CWA do to push first before the election, then during the election campaign. Talk about that.

Louise [01:39:42] Before the election and during the campaign?

Debbie [01:39:44] I could be wrong. I know that this was connected with developing the Legislative Political Action Team [LPAT] training.

Louise [01:39:57] I know you've talked to Annie about that and I'm trying to remember when we started the work on the LPATs. That had to have been the first Strategic Industry Fund, if not among the first. So whenever those were enacted.

Debbie [01:40:22] I think around 2008. [correction 2006]

Louise [01:40:25] That's what I'm thinking too. Okay, good.

Debbie [01:40:27] And [Barack] Obama is elected in the fall of 2008 and he takes office in [January] 2009. And he says that health care is going to be one of his priorities.

Louise [01:40:37] Right. And so we developed a proposal to fund essentially a health care campaign out of the Strategic Industry Fund. Is that what they were called initially? I think so. What we developed was the Legislative Political Action Teams, which were individuals selected by Districts to be trained in actually a bunch of things, but content wise on health care, but also some

basic things about how to talk to people about controversial issues, about how to develop their own stories that help illuminate an issue, how to draw out stories from others to illuminate the issue. It was pretty extensive training, pretty boot camp kind of stuff. We had trainings, I think we had two Districts per training. So we'd have these intensive trainings with two Districts and these appointed LPATers who then would be sent back to their Districts to train locals. We had schedules for trainings that they would do and then their work would include scheduling a series of meetings with the Members of Congress and then particularly with targeted Members of Congress as the health reform debate moved on so that we could focus on the key sites. Again, I know you talked with Annie [Hill], she probably talked a lot about it. What my key thoughts about those LPATS. I think they're still in existence. But they became, just like what I said about the joint committees and the people who took ownership, these folks who came through the LPAT training became our next generation of leaders. Many of them, in that first round of training, became staff when I was still there, some may be retired now. But at any rate, not only did they become these sort of mobilizers for our membership to push health care reform, but they became leaders within the union as they utilized training to become movers of people on any issue.

Louise [01:43:42] Also, I should say that although initially the notion was that the LPATs would be focused on health care, the other thing that was moving or we hoped would be moving at the same time was the Employee Free Choice Act. And so the training also incorporated the Employee Free Choice Act. We were also using these teams to move that legislation which didn't go anywhere. It was in spite of the Democratic majority in the Senate. It never got to the floor and that was a huge disappointment.

Debbie [01:44:36] [Senator Ted] Kennedy got sick and died in 2009. His seat was taken over by a Republican and I think somebody else got sick and we couldn't overcome the filibuster.

Louise [01:44:45] Oh, that's right. I'd forgotten that.

Debbie [01:44:47] Back to the LPATs. What I'm hearing from you is that it was a combination of creating a grassroots political structure

Louise [01:45:00] Right.

Debbie [01:45:01] And health care was an issue that all our members cared about, and it was on the agenda. So using that issue as a way to give action to these grassroots and regional structures. How was that different from the [existing] political structure? Did CWA not have a grassroots political [action] structure before this?

Louise [01:45:37] Well, that's a good question. And Jeff, maybe you answer it better than I do, but I think maybe the missing component is a national accountability, at least during that time on those two issues. We were relying on the grassroots, our locals to deliver this. But the plan came out of national and the systems that we put in place had them reporting to the structure at national. It wasn't all command and control kind of thing because there were different levels. We had local coordinators, we had district coordinators, structured much like the union. But those two programs, in terms of what we wanted out of the structure we developed came out of the national.

Jeff And I think up until then, the lobbying piece of the work was focused in DC and out of the headquarters office. This was the first attempt to really engage back home. We had our COPE

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[Committee on Political Education] program and we had relationships with many of these Members [of Congress] back home. But the actual asks were always done in their offices in DC and once a year we'd go to a legislative conference and that would be it. This was to take that next step and get people engaged at a much deeper level.

Louise [01:47:33] Right. True dat.

Debbie [01:47:35] And did it work?

Louise [01:47:43] Jeff, you tell us.

Jeff [01:47:46] Well, I don't know. We got some form of health care. We didn't get Employee Free Choice [Act]. You tell me, did it work?

Louise [01:47:52] Well, I guess the "did it work" for me is that regardless of the health care [reform], the Employee Free Choice Act, we got this new structure --

Jeff [01:48:03] Yes.

Louise [01:48:03] that's engaging our members. And that's pretty powerful. We didn't get the Employee free Choice Act. The Obama plan was -- I'd have to go back and go through my list of criteria for reform and see how it fared. But, it might be a "C" but it might be a "D" (laughs) because what we were looking for was getting health care off the bargaining table and getting some real relief for our collective bargaining and it did not deliver on that. It did expand access to health care, it expanded Medicaid. It put in these new marketplaces for the uninsured to get health care at affordable rates which was wonderful. That was remarkable. That was the greatest thing we've ever done since the Medicare and Medicaid Act. But it didn't help us at the bargaining table.

Louise In addition, one of the features they put in the plan was an excise tax on what they called high-cost health plans, which were our plans. We had to rally against that. We had to mobilize against the excise tax and show that it would hurt our plans. We were able to get as a result some exceptions for plans with older folks in them. Our members tend to be on the older side. And for high-risk jobs. Some of our jobs fall into the category of high-risk jobs. And another thing we got, little known fact, the one company who was working with us at that time was Verizon, believe it or not. The woman who was the head of the DC office. Debbie, I know you know her, and I'm blanking on her name.

Debbie Kathy Brown.

Louise Yeah. Kathy Brown. She was a Democrat in that office and she was constantly looking for ways to work with us. And we were trying to recruit Verizon into being the Ameritech of the time. No such luck, of course. She did agree to work on a retiree health care group. It was CWA, IBEW, and Verizon. We developed an approach about creating subsidies for employers who were providing retiree health care because my great fear was that other employers were already trying to unload the obligation they had for retiree health care, and they'd dump them on to these new marketplaces. So there was a provision put in the bill to offer employers who were providing retiree health care subsidies for a few years, I've forgotten how long it was, it didn't last forever, but it was intended to

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provide some relief for this initial period of time. And that got put into the Obama health care plan. So yeah, we worked with Verizon on that.

Debbie [01:52:42] As I recall, the excise tax or the Cadillac --

Louise [01:52:46] The Cadillac tax.

Debbie [01:52:47] plan wasn't going to kick in for ten years or something. There was a big delay.

Louise [01:52:58] You're right. That was another thing that we were able to do is delay it. But anyway, it still got put in. That became an issue in bargaining too, not only are costs rising, but they're going to slap on this additional tax.

Debbie [01:53:20] We could talk about many, many other things, but I think you've given quite a broad overview of let's say from [19] 89 until you retired in what year?

Louise [01:53:33] [20]18.

Debbie [01:53:34] Okay. Almost 30 years of working on health care. Do you want to give any summation or broad comments about unions and negotiating about health care. Any thoughts about it?

Louise [01:54:01] Again, back to the principles that we developed. It does seem to me that those are the things that we believe in as a union. Everyone should have health care, that they should have all the health care they need. So universal comprehensive. It has to be affordable. And we want quality health care. At the time, we defined quality health care as including a unionized health care workforce, that's how you ensure patient quality of care. And then, oh, the accountability part. In our bargaining, the accountability part became the Joint Health Care Committee and the benefit coordinators. Anyway, those pieces became, as I said, sort of guideposts for where we're moving to. We have learned as these stories tell that progress can be painfully slow. (laughs) And so the Obama plan has advanced our national health care to the extent that we've got more people [insured]. At the time, in 1989, there were 30 million uninsured and it grew and it grew and it grew until the Obama plan. And now, that uninsured number every year since Obama has been declining so we should take credit for that, even though it didn't meet all of our criteria. But that's the painfully slow part and accepting that can be tough. But if you have the principles that guide you, you can mark your progress by those principles and keep going and keep being creative to find and figure out the next step.

Debbie [01:56:20] Hannah. Your turn.

Hannah [01:56:24] Sure. So in your notes, Louise, you said in your early years you had a memorable experience of your first time at the bargaining table in 1983 at Trover Clinic.

Louise [01:56:34] Oh god.

Hannah [01:56:37] And it was heartbreaking when the unit was later decertified. So I was wondering if you could tell those two stories.

Louise [01:56:45] Yeah. The Trover Clinic. Does it say what year that was? Now I've forgotten.

Debbie [01:56:52] 1983.

Louise [01:56:57] So that was very early in my career. I had just moved into the research department from the labor-management pension fund. This group of health care workers, predominantly female health care workers, organized at this clinic somewhere in Kentucky under the noses of these doctors who owned the clinic. The doctors were taken by surprise when they delivered their union cards. There was an election. They won. It was just this amazing story in this very anti-union climate. And these arrogant doctors who owned this clinic who thought they knew better than these young women who organized themselves. They had a pension plan and I don't remember all the details of the plan but they were trying to cut them out of the pension plan or at least cut the benefits in the pension plan at the bargaining table when we went for the first contract. Ed Schultz was the national director of Public Workers at the time. So this is pre-Connie Bryant. He came out of the county workers in New Jersey and he had never negotiated a private-sector contract, so he was having a rough time. In addition, the doctors had hired this rabid union-busting law firm and they were eating him up. Ed was having a hard time. The young women who were on the bargaining committee were feeling very battered from the beating they're taking from these anti-union lawyers.

Louise Any rate, there's this pension issue and there's this simple question that they put to the union that we had to assert that the plan was an IRS-qualified plan. I used that as a leverage point to start asking questions. To make it certified, you had to show that it did not favor higher-paid employees. And so I started asking questions about this. Ed didn't want to talk about it. He brought me to the bargaining table. First time I'd ever been to the bargaining table. I'm a young, sweet thing, and I'm showing you how I sat. Well, you can't see. But I was so nervous when I held my papers, I shook. So I put my paper down on the table and sat on my hands (laughs) and started asking them these questions that related to is this a qualified plan. One of the questions I asked was how much all the doctors are paid because I needed to find out if the plan favored highly-qualified individuals. The bargaining chair for the other side, this very prim, straight-laced, his jacket just so. He was very pressed, he looked very neat and tidy. I don't know, Debbie, if you knew Ed, but Jeff, I think you knew him. Ed was the kind whose papers were all over the table.

Jeff His lunch was on his tie.

Louise His lunch was on his tie. They were just total opposites. Anyway, I asked a bunch of questions and the negotiator for the management got so pissed off, honestly, you could see his face turning red and he finally just snapped. "This session is over." And he slapped his stuff together and they all stormed out of the room.

Louise [02:02:19] I just sat there with my hands still under my legs. There was total silence for a moment. And then these young women who'd been just feeling so oppressed, leapt up and started whooping it up. They felt empowered. The next time I went back to the table and the clinic still wouldn't give us the information. So what I did was, and [research director] George Kohl helped me with this idea. They wouldn't give us the information so I made some assumptions about what these doctors might make. And I did these calculations based on what their pensions would be under different wage scenarios. (laughs) The guy was just furious because under each scenario, it showed that the plan favored highly-compensated employees and so would not be qualified under IRS rules.

At any rate, he stormed out again. The next time we met, the third time, they were ready to settle. We got a double-digit wage increase and the pension plan was preserved. Ed couldn't have been happier. The women couldn't have been happier. It couldn't have been a better experience for me, a first time at a bargaining table. And so it was glorious.

Louise [02:04:07] Then the sad part of the story. Next time around, the company started a decert[ification] campaign. It was a great disappointment. There was nobody paying attention. This unit was in Kentucky in District Three, it was unusual for that area. The District didn't know how to deal with health care workers. And when the decert came up, there was no staff in charge to help them. There was no one who could take it on. And the young women who fought so hard to organize and to bargain the remarkable first contract couldn't keep the unit together. It was decerted. That was pretty heartbreaking. I know that Larry Cohen has used this story at times to talk about our responsibilities and our need to service every unit and find ways to do it. If we don't know how, we must find a way to do it. Yeah, that was a great disappointment.

Debbie [02:05:43] Hannah, you're going to have to leave us soon. Can I continue for a few minutes? You want to ask anything else? I'm glad you asked that because I think it was a graphic story and it told a lot about who you are Louise. (she laughs) Tenacious. Focused on the members. I'm getting to the end also of my questions. I wanted to ask you. You were the first woman research director for CWA.

Louise [02:06:17] No I wasn't. There was a woman back in the day. I can't remember her name. The director before Ronnie Straw, who hired me, was a woman.

Debbie [02:06:35] Okay. I was going to ask about the changing role of women within the union. That's a question.

Louise [02:06:47] I couldn't be more pleased that the two people who followed me as research director are women. I think that's very cool. You look at the staff roster now and there are a lot of women in the jobs that have previously been male. Both in elected positions and on staff. That is wonderful to see.

Debbie [02:07:28] One other thing that I wanted to ask you about when you were talking about the LPATs. It came to my mind that what you were describing as the change in the legislative program was applying the concepts of mobilization to a legislative program.

Louise That's right. The concept of mobilization in the sense that it was that structure, the mobilization structure. We had our team going out into the locals and forming local teams and activists there that would then mobilize around these particular issues. I assume they're using them now for just about everything, right?

Debbie [02:08:32] But the concept that our power was not a lobbyist in Washington. Our power the power of activating our membership and educating the membership.

Louise [02:08:44] Right. The keys to mobilization was you educate and then mobilize them. That was definitely what that was all about. You know, Annie Hill was put in charge of that SIF in developing that program. That was how she operated in her District [Seven] when she was vice-

president and really saw the value in that model both from the bargaining table and otherwise. So it became a key part of the structure.

Debbie [02:09:30] What did your 40 years working in the labor movement in CWA. What did that mean for you? What did it mean for your life?

Louise [02:09:44] I have to say, when I started at CWA I had no notion that I would be there that long. It gave me the meaning that you want out of a life, a sense of cause, and as I told you, I'm sure the sense of mission that I got back in Cape Canaveral under my dad's watchful eye. There's just nothing like it. Someone had this phrase that I have never forgotten. And it really speaks to my experience at CWA. Everybody has two ambitions. One is to be somebody, this person said. And the other is to be part of something. And CWA allowed both for me. So I got to blossom in all these arenas that I never imagined growing up, but I got to blossom with this wonderful organization that just led me down a path that was meaningful to me. Period.

Jeff That's our sound bite.

Debbie [02:11:27] Jeff, any more that you want to add or ask?

Jeff [02:11:34] That last little segment there, that's our little soundbite. I think that encapsulates what I haven't ever been able to put it into words. You want to do something and you want to be part of something. And being part of a union has enabled us to accomplish both of those things. That's really remarkable when you think about it because not everybody gets that opportunity to be part of an organization that is a collective rather than a top-down hierarchy.

Louise I feel very lucky. Very fortunate.

Jeff [02:12:21] I know that feeling.

Debbie [02:12:25] And the union was very fortunate to have you.

Louise [02:12:28] Oh, my.

Debbie [02:12:29] Do you want to add anything? I know there's so much else we could have talked about.

Louise [02:12:35] Yeah. I have to say, not for the history, but just the experience of having to think about my career, to be honest with you, that I think about how lucky I am. But I hadn't really thought about specific things. So the questions that you posed to me in your email about what to expect made me think a lot and appreciate even more the career that I had. And thank you for taking me down that lane.

Debbie [02:13:19] Thank you so much.