

AFT and U-M partner to increase profits at Michigan Medicine and suppress workers' opposition

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In February, the University of Michigan Board of Regents enthusiastically recognized a new American Federation of Teachers (AFT)-affiliated local as the bargaining agent for 900 diagnostic technologists at Michigan Medicine's main hospital, located in Ann Arbor.

According to a report by the AFT, local 6739—called United Michigan Medicine Allied Professionals (UMMAP)—was established when the union's majority support from workers was verified by an unnamed and officially neutral third party after two years of organizing.

Among the members of UMMAP are hospital employees who conduct scans and other studies involved in patient care such as radiology (x-ray technicians), phlebotomy (blood-drawing technicians), clinical pathology (chemistry, hematology and microbiology technicians), electrocardiography (EKG technicians), and sonography (ultrasound technicians). For years, the workers have been demanding pay increases, a benefits package and improved working conditions at the hospital.

However, the establishment of the AFT-led UMMAP will not address the concerns of diagnostic technologists. On the contrary, the union has been welcomed by the university and hospital administration in order to isolate the workers from other hospital employees and suppress their fight against the \$7 billion health care system.

Chronic and intolerable understaffing is an explosive issue among nurses and other employees at Michigan Medicine and at health care systems across the US. Last summer, only the adamant refusal of the Michigan Nurses Association (MNA) and its Ann Arbor affiliate, the University of Michigan Professional Nurse Council, to call a strike prevented a walkout by 6,000 nurses over understaffing and mandatory overtime. Weeks after the previous contract had expired and despite a 96 percent strike authorization vote by the rank and file, the union leadership opposed strike action and pushed through a sellout contract.

Moreover, as the WSWS has explained, U-M graduate

student instructors currently on strike, who are members of the AFT-affiliated Graduate Employees' Organization (GEO), have been forced by the union to fight alone for improved wages and benefits against a vicious and intransigent university administration.

Even though there are 1.7 million members of the AFT nationally and 35,000 in the state of Michigan, including physician assistants (United Physician Assistants at Michigan Medicine--UPAMM) as well as the newly established UMMAP, union officials have blocked a nationwide mobilization against the exploitation of educators and graduate assistants by schools, colleges and universities.

The university and Michigan Medicine management were looking for and believe they have found in the AFT a union that will do everything it can to isolate and contain any movement of employees that threatens the financial, corporate and political interests controlling the rapidly expanding health care system that is based in Ann Arbor.

In a press statement published on Michigan Medicine's news site, David C. Miller, president of Michigan Medicine, said, "We look forward to working collaboratively with the new union that represents our valued diagnostic technologists, who play an important role in our patient care teams."

As both a professor of urology at U-M and president of the hospital, Miller has an annual compensation of \$490,000, while the wages of a Michigan Medicine radiology technologist, according to glassdoor.com, are approximately \$65,000.

The AFT itself has issued statements hailing the recognition of the diagnostic technologists local as an opportunity to team up with Michigan Medicine management. A March 7 report on the union website quoted the comments of a union member, who said, "Unionizing helps us to work collaboratively with hospital administration." She went on, "Michigan Medicine has been

great in working with us. It is a great place to work. We want a seat at the table and our opinions to matter.”

Significantly, the AFT also published a statement from Paul Brown, chair of the Board of Regents of the University of Michigan, celebrating the establishment of the technologists’ union. Brown said, “Unions are a positive thing for Michigan Medicine and the University. Diagnostic technologists and all Michigan Medicine health care workers are the heart of Michigan Medicine, and we are looking forward to working closely with UMMAP in providing high quality patient care.”

Brown has reason to be positive about labor-management cooperation at the second largest hospital in the state of Michigan. Brown, in addition to serving as chairman of the university Board of Regents, is co-founder of eLab Ventures, located in Ann Arbor.

With an office in Silicon Valley, eLab Ventures was founded in 2012 and provides seed money and start-up capital to approximately 30 tech companies across a broad range of industries, including automotive, banking, artificial intelligence and environmental sciences.

Among the multi-million-dollar investments in the portfolio of eLab Ventures are tech startups in the health care industry. These include Akadeum Life Sciences, a startup developing new approaches to cell therapy and bioprocessing, and Strata Oncology, a startup in innovative cancer treatments. Both businesses are based in Ann Arbor.

The intimate connections between the ostensibly public and non-profit Michigan Medicine and private business and financial interests in the health care industry are exposed by the fact that the chief medical officer of Strata Oncology, Dr. Scott Tomlins, is also an associate professor of pathology and urology at the University of Michigan Medical School.

In collaboration with the University of Michigan Health Rogel Cancer Center, Strata Oncology is conducting clinical trials of its test product called StrataMRD, which aims to provide cancer treatment that is personalized, based on genetic information. According to a recent report in *Forbes* magazine, the development of precision medicine is the “holy grail” of medical treatment, with a massive payoff for the first companies to market such solutions.

The cozy relationship between the AFT and the administration of Michigan Medicine and the University of Michigan is not surprising. After decades of selling out teachers and educators across the country and ensconcing itself in the Democratic Party, the AFT rebranded itself as an organization of professionals, including nurses and health care employees, to expand its dues base and the salaries of the union bureaucrats by further demonstrating its value as a defender of the capitalist system.

AFT President Randi Weingarten is a multimillionaire

whose salary as union president in 2021, according to the AFT’s filing with the Labor Department, was over \$426,000. The combined salaries of the four top national AFT officers was well over \$1 million.

The AFT-affiliated physician assistant local at Michigan Medicine, UPAMM, was established in 2020. In 2021, in the midst of the coronavirus pandemic, AFT-UPAMM signed a three-year contract with Michigan Medicine that locked in salary increases far below the rate of inflation.

The opening passages of the contract recognized UPAMM as “sole and exclusive bargaining representative” in exchange for a no-strike commitment from the union and an agreement that “every employee” covered by the contract will have union dues deducted from his or her paycheck every month.

The enthusiastic response of Michigan Medicine management and the university administration to the recognition of UMMAP is a striking example of how the official labor organizations have become part of the corporate-government setup against the working class.

The only way for diagnostic technologists, nurses and hospital employees in general to fight against the corporate and financial interests is to organize independent rank-and-file committees that will fight for the needs and concerns of the workers.

Through the organization of rank-and-file committees that are controlled democratically and are only answerable to the employees, with no ties to the capitalist elite, the employers or the Democratic Party, health care workers can unite with other sections of the working class in the US and internationally and advance their fight for improved living standards, benefits and working conditions.

Moreover, the call for the formation of a network of rank-and-file committees advanced by the WSWS is the foundation for a struggle by the entire working class against the capitalist profit system and for a socialist society where health care, education and all essential services are based on the needs of the public and are not subordinated to the accumulation of wealth by a handful of billionaires.



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