

Testimony on HB 2922

House Health care Committee

May 13, 2013

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Oregon Rural Action

A Rural perspective on HB 2922

My name is Bill Whitaker, Professor Emeritus of Social Work at Boise State University. Before retiring I taught social welfare policy for more than 30 years.

I live in La Grande, Oregon, serve on the board of Oregon Rural Action and as co-chair of the ORA Health Care Reform Action Team. Our action team is working with more than 350 eastern Oregonians in Union, Baker, Malheur, Wallowa and Umatilla counties who are deeply concerned about access to and ability to pay for health care for themselves, their families and neighbors and for all Oregonians. We believe these concerns are representative of those throughout rural Oregon.

A few weeks ago an action team member who is a business professor at Eastern Oregon University assigned a civic engagement project to her class of sophomore business administration students. An option for one part of the assignment was to survey five persons about their health care and health insurance experiences. One hundred twenty eight surveys were completed. While this is not a statistically random sample, we believe the respondents are similar to many rural Oregonians.

Those interviewed were asked a set of questions providing opportunity to share their health care stories. I want to share with you some quotations from those stories and experiences. One in three respondents reported significant problems paying for health care.

Some comments were by ordinary Oregonians struggling to do what's right:

- "40 year old suffering from PTSD symptoms paying for medical bills out of pocket for entire family"
- "Haven't had insurance for most of my life, just try to lead a healthy lifestyle"
- "I pay a lot for health care when not insured and pay high deductibles (\$3000) and co-pay (20%) when covered—either way it is a high percentage of my income dedicated to health care."
- "Past 25 years have had employer-provided insurance. Then quit job to run own business, entered private health insurance market. Keeps rising over past four years."

Others described personal consequences of being unable to afford care:

- “Type 1 diabetes and have a very hard time affording the insulin I need to survive—hospitals are expensive.”
- “Developed seizures from not taking medication because it was too expensive”
- “Loss of most of my teeth because I can’t afford insurance or to pay out of pocket...Insurance through my job costs over 50% of my monthly paycheck so that’s not an option...”
- “I do not have dental or vision coverage. I have high deductible insurance through employment so I don’t go to the doctor like I should. Preventive not being cared for.”
- “Got in a wreck, have problems with head, arm, leg, back”

Some respondents described personal situations in which they did not seek care because of costs:

- “Most medical facilities want high payments if you don’t have insurance which I can’t afford.”
- “No problems when I was on parent’s insurance but the college plan costs way too much so health care is on an emergency basis.”
- “\$1300 ER visit for a lung infection. I am a single, white male with no dependents. I don’t go to the doctor due to the high unreasonable costs of walk in visits, as I also cannot afford insurance.”
- “Costs from ER visits. Only major emergency accidents at ER. Haven’t had a doctor since I turned 18. All other issues I have just took care of myself at home.”
- “Dental care was far too expensive.”
- “Prenatal health costs. ...I unexpectedly got pregnant. Dad’s health insurance which could cover me would cost \$750 a month. Stupid.”

Several respondents talked about the difficulties small business owners face providing health care for their families and employees:

- “Parents both own businesses. Premiums are too high. All health care is paid out of pocket.”
- “My dad owns his own business and the health insurance he pays for my family is insane and doesn’t even cover much”
- “My dad owned his own business so he had to buy a private healthcare package for my family. It is super expensive and isn’t very useful.”

Others described unaffordable debt that resulted in being involved with collection agencies or bankruptcy:

- “Bankruptcy filed due to medical bills”
- “Child buried left us with \$34,000 in medical debt that insurance wouldn’t cover”

- “I have medical bills at collection and I can only pay \$20/month and my balance is \$9,000.”
- “Lots of health problems—back arthritis, but no insurance—cannot pay fast enough, went to collections”
- “Fixing back problems is too expensive for minimum wage jobs when you don’t qualify for OHP. Government garnished my wages for medical bills.”
- “Lots of health problems but no insurance to get help. Hospital ER debt.”
- “...struggling to pay the medical bills due to financial problem. Medical debts in collection agency.”
- “The cost of (a procedure) which I had to pay out of pocket took a year to pay off.”

One in seven persons answering our survey reported staying in a job in order to have health insurance.

- “Had (medical problem), had to keep a job I hated because I need insurance so I could get prescription pills and in case of surgery I would be able to pay.
- “Hate job—but need insurance”
- “Staying in stressful job because of health care benefits.”
- “His job sucks but Health Ins is great.”
- “Mom stayed at job to provide health care for family”
- “Mom kept job with better insurance for me.”
- “My daughter has asthma so she keeps her job in order to pay insurance.”
- “Worked at hospital for surgical benefits.”
- “Couldn’t afford to pay insurance otherwise.”
- “My mother hasn’t quit or applied at a new job because of her health insurance and rate of pay.”
- “Had to move to a new job just for health care.”
- “They couldn’t afford to pay their medical bills otherwise.”
- “Took cut to half time in order to maintain health insurance”
- “My parents would not have had health insurance unless my mom was employed, since my dad was self-employed”
- “My dad is self employed. My Mom works for insurance.”
- “Had to keep job to cover wife and kids medically”

Miscellaneous comments:

- “I come from a family who has worked hard forever for everything we have. My dad got cancer right when my Mom changed insurance and they wouldn’t accept him. My parents worked their tails off to pay without asking for help.”
- “I was on Oregon Health Plan while pregnant. Due to not filling out one form through a miscommunication, I was removed from the program without an option to return because of their limited funds.”
- “I had Oregon Health Plan once as a kid. As an adult, I’ve only had insurance once, through a job.”
- “Health care costs are way out of line.”
- “After retirement could not afford insurance”

- “High cost of radiology expenses”
- “Paying bills. Had to be on a waiting list to get insurance”
- “Did not reach deductible and had to pay out of pocket”
- “Too many emergency room visits”
- “I come from a large family and have not had consistent health care.”
- “I had children at an early age, used Medicaid, couldn’t afford to go to work because I would lose Medicaid for my kids.”
- “Rude nurses of doctors because family members don’t speak English”

These personal situations are some of the reasons that Oregon Rural action strongly supports HB 2922.

In the five rural counties in which we are organizing in eastern Oregon an estimated 33,941 of our family members, friends and neighbors are uninsured.¹ Percentages of the uninsured population in these rural counties range from 27 percent in Malheur County to 19 percent in Union County.²

Healthcare costs are skyrocketing out of control, placing all of us at risk for losing health insurance through no fault of our own. In today’s rapidly changing economy, job turnover is at an all-time high. This means that all of us who are not yet eligible for Medicare are just one pink slip away from being uninsured and risking financial catastrophe. This is true whether we live in rural or urban Oregon. Oregon Rural Action believes that it is our shared responsibility to ensure that every Oregonian can have the security from health care costs that they need in order to take care of themselves and their families.

We call upon our elected representatives and senators to protect all of us from financial ruin by enacting HB 2922 The Affordable Care Act for All Oregon Plan Act.

¹ <http://www.countyhealthrankings.org>

² Malheur County 27 percent—6,200 individuals—uninsured; Umatilla County 23 percent—18,972 individuals—uninsured; Wallowa County 22 percent—1,542 individuals uninsured; Baker County 20 percent—3,227 individuals uninsured; Union County 19 percent—nearly 4,000 individuals uninsured.