## Health Story Testimony in Support of



# New York Health Act (A 5248, S3577)



Offered to Joint Senate & Assembly Health Committees Hearing, May 28, 2019

My name is Judy Esterquest. I live on Long Island and volunteer for NY Health.

I was raised in reliably Republican southern Ohio by deeply Republican parents. We valued community, civility, and the Golden Rule. Wasting money — particularly public moneys — was scorned.

Today, I serve as a Trustee at my local public library. NY Health will save our \$5M budget at least 12%. Ditto for our \$97M school budget. And 20% savings for our town. I am appalled that we waste public funds on corporate insurers that harm our health and deliver no benefit.

This booklet, that Barbara Estrin and I submit today, contains my story.

Union solidarity is wonderful. For-profit insurance is not.

My beloved husband Michael was a proud union guy, with amazing union health insurance. His last two years, he was hospitalized 520 days. Our cost: about \$30K — for 6 weeks at the SNF where he died.

#### Great insurance, except for the human cost

Except for the hundreds of hours his doctors and I spent managing the paperwork, authorizations, denials—collections agencies and debt collectors— away from his room so he wouldn't worry. Nevertheless my husband, a realist, regularly had nightmares about his death leaving me homeless or in poverty.

### Great insurance, except for physician health

Doctors would visit at night, morose after hours of appealing denials. One explained, "Patients heal my spirit." NY Health may reduce physician suicides, the highest rate among all professions, twice the rate of police.

#### Great insurance, except for homecare

After 280 continuous days of hospitalization, when Michael came home, the nightmare of "covered homecare" began. Because he was almost completely immobile, with GVHD of the gut, I changed his bedding and cleaned him up to 25 times per day, administered IV medications, slept near his hospital bed, and wrangled him into wheelchairs and stair-lifts for weekly doctor visits.

Insurance covered 12 hours of homecare per week — theoretically. His 20-plus hospital admissions over the course of 240 days — often only a day or so — meant homecare was always "starting over," suspended until managers could schedule a home visit to evaluate him and authorize restart. After each hospitalization, he got new aides/therapists. Most aides arrived untrained and exhausted, having traveled by bus 4-5 hours RT to spend 3 hours with him, thus earning about \$5/hour.

I am extraordinarily thankful for the doctors, nurses, therapists, and aides who helped Michael beat cancer, even if he didn't live to enjoy it. I'm thankful not to have incurred millions of dollars of debt. I'm thankful to his union, who gave up decades of wages to ensure his insurance was as good as it was.

But I'm also angry: we are wrong to waste tens of billions of public dollars on for-profit "health" insurers — who put shareholder returns over patient health, caregiver health, and even provider health.

### NY Health — provides transparency, controls costs, saves money, saves lives

This legislation will make healthcare issues easier to solve. Its affordable care will make public health disparities easier to address. It will eliminate nightmares about financial ruin. It will control future costs by eliminating waste, predatory bureaucracy, and out-of-control for-profit corporations that benefit only shareholders and the executives who lead them. It's mission will be efficiently providing care, not profitably denying it.

NY Health's biggest hurdle isn't confusion over what's economically rational, fiscally prudent, or better for public health. It's about finding the courage to do what is right — to heed the simple morality of the Golden Rule — and pass NY Health.