

Katie Barrett, Marcellus - draft testimony - October 2019

My name is Katie Barrett. I come to you from Marcellus to share our family's experience with the health system in New York. Our family healthcare story is an inbetweener story. For many years, we have had health insurance through my husband's employer, Carrier, for myself, my husband Joe, and our 4 children. Although the premiums kept going up and took a huge chunk of his take home pay, we were protected. But when he retired, we lost our insurance coverage. Although healthcare benefits were promised to workers through the years through contracts negotiated by their union and many retired from Carrier with insurance, by the time my husband retired, it was gone from the benefit package. He went on Medicare and I went into the Marketplace to buy my own insurance.

My husband was diagnosed with diabetes about 20 years ago. We have watched with horror as the cost of insulin has skyrocketed over the years. Especially since he went on Medicare. In 2017 he paid \$6500.00 out of pocket just for his prescriptions. This is not doable for most retirees. The costs are difficult for us, but we feel fortunate to be able to afford his insulin as people are rationing insulin and dying around the country.

My insurance is the cheapest available on the NY State of Health marketplace, \$386.00 a month with Fidelis. I have a \$4000 deductible and \$7000 out of pocket cost yearly. The insurance company negotiates for lower costs and the rest is up to me. So I pay almost \$5000.00 a year for an insurance policy that basically pays nothing else. I have an autoimmune arthritis that flared up last year and attacked my eyes. It was very scary and costly. The out of pocket went way over \$1200.00 just to see doctors that took my insurance and for them to run tests. This did not include my Ophthalmologist, who does not take my insurance, and nor does it include prescription costs for the steroids that brought my arthritis under control. The cost keeps going up, the benefits never improve, and the out of pocket costs rise with the cost of healthcare. How is any of this sustainable?

I have five more years before I will be eligible for Medicare. So I live in this limbo and carry horrible insurance coverage that I need just to keep from going bankrupt in the event of a medical emergency. The New York Health Act is the answer for so many of us caught in this mess. I would pay less for better, comprehensive coverage. With Fidelis care, when I go to the

doctor, I have to choose from their list. Although I have finally found good doctors in the Fidelis network, when I was desperate and sick because of my flareup, I had no luck. When I tried the numbers provided, I was met with "we do not participate with that insurance" over and over. This was the Fidelis list. Calling the company itself, I was connected to people working from the same list. My Ophthalmologist called a specialist directly to get me care. That was how I finally was treated. When I had to find a primary care doctor, again, it was very difficult. Many providers on the Fidelis list were not taking new patients. After numerous calls and rejections I found one Nurse Practitioner who accepted me. What good is insurance if you cannot find someone to even see you as a patient? For me and my family New York Health cannot come soon enough. With the NY Health Act, we would no longer have to deal with restricted provider networks. I could stop worrying about losing everything to medical costs. Everyone in the state would be healthier as people would address medical issues before they become emergencies. New York should lead the way for this very basic human right to healthcare.