

November 30, 2018

Ohio Statehouse Insurance Committee

RE: HB440 - Proponent Testimony to Ohio Statehouse

My story is not a dramatic one; at 67, I have, fortunately, never had a life threatening illness. However, my story is what I believe to be a more common one, one that left me moderately impaired and financially strained for a long period of time. And it is two-fold: first, from a patient standpoint attempting to obtain insurance and treatment when I needed it; second, from a professional standpoint as a psychologist providing therapy to individuals with a wide range of mental and emotional illness.

In my late twenties I developed chronic migraine headaches. I graduated from profession school in my mid-thirties and, soon after obtaining my Ohio Psychology licence, opened a private practice. Since I was self-employed, it was difficult to find affordable, individual health insurance policies. If the premiums were affordable, the deductibles and copayments were very high; the result was that, even though I had healthcare insurance, I often could not afford to get treatment because the out-of-pocket expenses were prohibitive. In addition, I had to change policies fairly often as insurance companies would withdraw from Ohio, or premiums for an individual policy would be raised to so high I could no longer afford them. After nearly 25 years struggling to complete my education and keep my private practice afloat during regular periods of illness, I made it through the two-year exclusion period of the policy I had at the time. I was finally able to obtain treatment and gain control of my chronic head pain. But insurance premiums continued to rise while the rate of reimbursement for the services I provided steadily declined. I ultimately decided to close my practice, giving up on my life's dream. I obtained a therapist position at a local behavioral healthcare center in order to have a steady income and health insurance benefits.

Throughout my career I have listened to the struggles of many clients who experienced similar difficulties in obtaining health insurance and treatment; most fell into the category of the working poor. Many were stuck in low-paying, highly stressful jobs because they had no other options for healthcare; even so, what insurance was provided (if they were lucky enough to have insurance at all) was usually inadequate and still expensive when compared to the low wages they received. Many women felt trapped in abusive relationships, in part because their husbands or boyfriends carried the health insurance policies for their children. In many cases, the client or a family member had a pre-existing illness and could not get adequate coverage. Some parents had coverage for themselves through their employer, but not for their children. Others made sure the children had coverage, but by doing so, were unable to afford healthcare for themselves, putting the family at risk if a parent was unable to get treatment for an illness or accident that prevented them from working for a time. Children often missed a lot of school or fell behind in their work because the family could not afford care for medical conditions that could have been easily prevented or treated. Parents who cannot take their children to a doctor,

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dentist, or optometrist for the even the most basic of health care services, carry tremendous anxiety and a sense of shame.

While the dramatic, tragic stories resulting from our dysfunctional healthcare system deserve every bit of media and public attention they receive, it seems to me that the more common healthcare struggles of the working poor and the middle class are discounted, if not completely ignored. As you consider your vote on HB440, please remember the hundreds of thousands of Ohioans whose lack of adequate healthcare results in chronic stress, suffering, and anxiety. Over the last several years I have learned about healthcare systems in other countries. I have learned that a medicare-for-all type system actually saves money, increases life expectancy, and increases the quality of life.

In closing, let me state that I see health care as a human right. No one should have to withstand the pain, suffering and indignity of not being able to get healthcare when needed.

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