

Charlotte Adamis

████████████████████
████████████████████
████████████████████
████████████████████

May 28th, 2019

My name is Charlotte Adamis, I am a public school librarian and a resident of Kingston, N.Y. I want to thank the sponsors of the of NYHA, Senator Rivera and Assembly member Richard Gottfried for holding this public hearing today.

And I especially hope that all of the elected officials who represent my county, Ulster County, are here today listening to these testimonials: Assembly member Kevin Cahill, Assembly member Brian Miller, Assembly member Christopher Tague, Senator George Amedore, Senator Jen Metzger, Senator James Seward, and Senator James Skoufis.

I am here today to speak about health care because I am a person of privilege. As a member of a teacher's union that has successfully negotiated excellent health insurance for its members for decades, I know, as do all of the elected officials in this room, what it means to have health care. True health care. And, as a person of privilege, I am also here today because I believe it is my duty, my responsibility to take up the call for equity, to be a voice for my neighbors, my friends, the members of my community, too many of whom pay, and pay grandly, for what we call "health insurance" - which, in reality, does not serve to provide as anything that resembles health care.

Here's the sad, but honest, truth about my own journey to this place, where I am standing today. As a person of privilege, it was all too easy for me to ignore the problem of inequity. It always is for those of us in powerful positions, isn't it? We can go to bed at night knowing that we ourselves, and those we love best, our husbands, our wives, our children are protected. Until, of course, we aren't. The way our system works now, at the age of 26, our "children" leave the health insurance nest. And one day, maybe not so far in the distant future, one of us may lose our job with those excellent benefits, or our spouse will—and we too will fall out of the comfortable nest. But even if we keep our excellent insurance, and we save diligently for retirement, and we are lucky enough to live long, healthy lives, we may still have to face the prospect of having to bankrupt ourselves in order to pay for long-term care.

In other words, the vast majority of us—dare I say, 99%, will, as long as the current private, for-profit health care system is in place, be participating in a Russian Roulette game. It's only a matter of time before the gun is pointed at our own head, or at the head of someone we love.

But that is also the self-centered, privileged argument, isn't it? That it could be us who is disadvantaged? Our circles are so small.

Perhaps the more compelling argument to change the game so that we are all winners, and there are no losers—so that all of us, rich, poor, young, old, documented, undocumented, receive equitable health care, including access to health care—is that to boldly proclaim that the current system is immoral. Once we agree on that, we can begin to dismantle it. Nobody really wins right now—even those who are profiting. Because to profit from another person's loss is inhuman. Nothing can be worth losing our humanity.

If nothing else, I have the Trump election in 2016 to thank for my wake-up call. I joined a local activist group to do something, anything, and I was thrown onto a committee to advocate for a bill I'd never heard about before, the New York Health Act. Of course, I knew about universal care in Canada and Europe. But I had no idea that such a proposal even existed in my very own state, and had for years! I remember listening to another activist who had come to educate us on the bill. He said, "Think of it as a paradigm shift – we are talking about health care. Not health insurance."

It is perhaps cliché, but true, to say that suddenly, my eyes were opened. And so were my ears. My fellow activists and I began to ask and we began to listen to the stories—the stories of the have nots. The stories of the people who were not in my union—the stories of my neighbors, my friends, my community members.

I understand that there is published data that shows that people in the U.S. who have insurance are "happy" with what they've got. But how does that explain that in the 2 ½ years that I've been listening to the stories of the people in my community, not one person, outside of my fellow union members, claims to be "happy" with their insurance? In the past 2 ½ years, I've heard nothing but pain and sadness.

In the spring of 2017, I organized a lobby visit to Senator Amedore to talk about the NYHA. Unfortunately, the Senator chose not to grace us with his presence that day. If he'd been there, he would have heard Bill Van Vorhees, a Vietnam veteran who had gone back to work after retirement, just to have the privilege of purchasing a health care plan. Yes, Bill was covered as a vet, but his wife and daughter were not. Bill basically returned to work after retirement so that he could pay for health insurance for his family. His policy cost him hundreds of dollars a month, and yet what he got in return, wasn't even enough to take care of his family's actual health care needs. He found himself dipping into his retirement savings and worrying about his and his family's future.

"I feel like I did everything right," Bills told me. "I served my country. Worked all my life, saved for retirement, and it still wasn't enough."

Another activist and I tabled for months at the YMCA in Kingston so that we could inform members about the NYHA and hear their stories. The stories ranged from the ridiculous to the

outright tragic. There was the self-employed real estate business woman who pays \$17,000 a year for her family to be insured, and yet has to meet a \$7,000 deductible —per person—to actually receive any health care. That was the ridiculous. The tragic? The worst that I recall was M, who does not wish to share her name. M is a woman who works in the health care industry, taking care of developmentally disabled adults. M pays hundreds of dollars a month for health insurance and gets virtually nothing in return. Two years ago, she became critically ill and was hospitalized in Kingston for an extended period of time. Her “insurance” didn't cover much of the cost of her hospitalization. M's bills from that illness are astronomical and, at the salary she earns, she can't afford to pay them. She is still not well—but with the mountain of unpaid medical bills, she is afraid to go back to the doctor for care.

In March, as part of a group of activists in Ulster County, we organized an educational forum on the NYHA at the Kingston Public Library. The panelists who spoke, all Ulster County residents, included one of the members of our city's Common Council Rita Worthington. Rita spoke about her husband's successful heart transplant. The happy part of the story is that when he had his procedure, he was covered through his school district union's health insurance plan. That, as Rita describes, was “good” insurance. Only later, when his continuing disability required that he retire early, he had to switch to a privately paid insurance plan. That, as nearly impossible financial burden of 30 daily prescription medications hit. Even the cost of just one of his pills—at \$1200 a month—was completely out of reach for his family.

Business leader and community activity, Pat Strong, talked at the forum about her family's horror when her uninsured adult son was released from a month-long emergency hospitalization only to be faced with a \$100,000 bill.

I ask you, is there anyone in this room, anyone at all who could pay that bill without forfeiting everything you own?

Pastor Erick Mercado, another forum speaker, told of his young daughter's chromosome imbalance that requires that she be fed a special milk each day to stay alive. This is a life-long condition, yet every month, Pastor is required to re-submit his claim and wait for authorization to obtain this life-saving formula. Sometimes, Pastor Mercado said, it takes days and even weeks to receive the authorization. How can this be?

The health insurance companies. The drug companies. The medical device companies. And those of us who accept things as they are. We are all complicit.

The greatest health care system in the world? I think not.

Senators, assembly members. You know, and I know—and everyone in this room knows—that our for-profit health care system is indefensible. To defend it requires that we put aside our logic. Our humanity. Our decency. Our Democracy.

I am choosing not to. I am choosing to listen. To speak up, when possible. And I am asking for you, as our elected representatives, to do nothing less—and hopefully, much more. I am asking you to put your full weight behind the passage of the NYHA. It's time. It's way past time.

Thank you for this opportunity.
