

Alice Carli

Testimony before the Rochester hearing of the Senate and Assembly Health Committees concerning the
New York Health Act

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My name is Alice Carli. I'm the Conservator at the Sibley Music Library at the Eastman School of Music. It's work that takes great attention to detail, and the ability to design systems that work. I'm a systems person.

I also have great health benefits from the University of Rochester, which has a world-class teaching hospital, and is self-insured. If I choose medical providers from a special tier, called Accountable Health Partners, mostly Strong hospital doctors, my family plan deductible, covering myself, my husband and one child, is limited to \$3,000. That's only \$500 more than the Flexible Spending Account I can have deducted at the rate of about \$200 per month, kind of like a payroll tax, from my biweekly salary, and that is very helpfully made available in full at the beginning of the year. So I personally don't have to worry about coming up with the first \$2,500 of my deductible.

It's been that way since the ACA, and it's worked for me, til two years ago I got breast cancer shortly after my husband was diagnosed with atrial fibrillation. So I was very grateful for the fact that in that Accountable Health Partners tier the annual out-of-pocket limit for my plan is only \$6,000. It's \$8,000 for the "normal" top tier. So, between August and December of that year, two years ago, I didn't have to pay for follow-up visits, or even a second surgery that was needed. It was a god-send, even though I was still, of course, on the hook for \$8,000, since an expensive genetic test was done by a well-respected firm in California.

I'm still paying off the tail end of that, some of which went on a credit card to that California firm. And I am also paying on hospital bills from follow-up care and testing done last year, before we reached the \$6,000 out-of-pocket limit for that year. We recently reached that limit this year, what with my continuing follow-up and my husband's heart treatment. I don't actually know when we are likely to catch up on paying medical bills, because it's hard to set aside \$500 a month from the \$3,200 I get from my salary, which also needs to cover the mortgage, property taxes, car repairs, and so forth. My husband is self-employed and adjunct faculty; his income comes to roughly \$1,000 a month and covers groceries and household expenses.

So I like 4 things about the New York Health Act. First, everyone in the state can get what my FSA offers – pay a steady and known amount each month, rather than a deductible.

Secondly, that amount would be based on income, not illness, so no one has to pay more than they can afford. Estimates are that on my income I would pay \$50 to \$100 every month.

Thirdly, because the Act calls for public meetings across New York where providers are required to say what treatments they did, how much they charged, and how successful they were, everyone will be able to learn about who are who are the truly accountable health practices.

Finally, I was very lucky with my breast cancer. I live in a city with great providers and have regular mammograms, so it was caught early and treated appropriately. So it was just a matter of a couple operations, a lot of nervousness, some missed work, and those pesky bills.

One in five women now get breast cancer. That's a lot. We've gotten very good at treating it. But what about preventing it? There has not been a whole lot of research on that. It would save one in five women from an experience that can range from scary and expensive like mine, to life-altering (not in a good way) or life-ending. If the New York Health Act were in place spreading the cost of cancer on the basis of income rather than illness, then finding a way to prevent breast cancer would save everyone, especially the wealthy, a ton of money. What odds do you want to lay that we would see more preventive studies?

I've got a little time left. [turn around] Everyone here who has health insurance, raise your hand. [turn back] New York has done a good job providing health insurance. Now, if your insurance does not cover eye care, put your hand down. If no dental care, put your hand down. We now know that has significant impact on heart health. If your insurance does not include mental health care or substance abuse care, put your hand down. That's important right now. Everyone who is staying in a bad job, or delaying retirement, only because of health care, put your hand down. Everyone who would like to start a new business, or who has tried, but can't afford health coverage, put your hand down. Everyone who is still paying medical bills from a previous year, put your hand down. Everyone who has delayed care because of the cost, put your hand down.

The state constitution charges this body to protect and promote the health of the inhabitants of New York. It is clear that right now that protection and promotion is not sufficient. Health care has become a privilege for those lucky in their jobs or family, rather than a right for all inhabitants, as the constitution calls for. The New York Health Act is a real opportunity to put this right, and I ask you to enact it.

Thank you.