

Every Day Two Ohioans Die Because They Lack Health Coverage

On March 18, 2008 Families USA, a national advocacy group for health care expansion, reported that every day two Ohioans die due to the lack of health coverage. FUSA's report *Dying for Coverage in Ohio* builds on the Institute of Medicine's 2002 finding that 18,000 working-age adults died in the U.S. from lack of health coverage, and the Urban Institute's updating of that figure to 22,000 in 2006. FUSA applied this data to the states. Based on 6,054,000 Ohioans between the ages of 25 and 64 and a 12.7 percent uninsured rate, Ohio experienced 750 deaths in 2006—two per day—that can be attributed to the lack of health coverage. "Across the United States, in 2006, twice as many people died from lack of health insurance as died from homicide," the report states.

Donna Woods from Gladden Community House in Columbus told the story of "Claire" (a pseudonym). Claire's husband left when Claire (see *Dying*, page 2)

Two Upcoming Cleveland Presentations

On **March 27, 2008** at 10 AM Kathleen Gmeiner, UHCAN Ohio's OCHC Project Director, will speak on "**Decisions About Your Health Care Coverage Being Made in Columbus**" at Community Shares, 3631 Perkins Avenue, 3rd floor, Cleveland, in the large conference room.

On **April 11, 2008** Cathy Levine, UHCAN Ohio Executive Director, will speak on "**The Governor's Proposed Connector – What It Could Mean to Expanding Health Coverage in Ohio**" at the Cleveland Food Bank, 15500 South Waterloo Road, Cleveland, OH 44110 at 12:00 noon. If you would like to attend either of these presentations RSVP to Lisa Baskin at lbaskin@uhcanohio.org or call 216-241-8422x21

Would you like us to speak about Ohio health care reform at your next meeting?

Contact kgmeiner@uhcanohio.org. or (614) 456-0060.



OCHC Calls on Presidential Candidates to Insure Affordable Health Care for Everyone

The Ohio Consumers for Health Coverage asked all Presidential candidates to put health care at the top of their agenda as the candidates criss-crossed Ohio in the lead-up to the March 4th primary. In press releases and flyers OCHC called on the candidates to

- Make health coverage expansion their number one priority;
- Ensure that ALL Americans will have access to affordable, quality health care regardless of income, employment, or pre-existing conditions; and to
- Allocate significant federal leadership and revenue for health care reform.

Flyers were handed out in Cincinnati, Cleveland, Columbus, Dayton and Toledo at events sponsored by Senators Clinton, McCain and Obama. □

Cincinnati and Area

The Southwest Ohio Consumers for Health Coverage met on March 12th and planned next steps around raising the level of awareness of decisions that will soon be made at the State Capital about health care. They hope to raise the visibility of people who have lost their lives to lack of health coverage. People who are aware of someone in that situation should contact Lesley Jones at (513) 560-1993 or ljones@uhcanohio.org. Date of next meeting to be announced.

Timetable Set for Governor's State Coverage Initiative Recommendations

At the March 6th meeting of the Governor's Healthcare Reform Advisory Committee, it was announced that the recommendations to the Governor from the Committee will be made by the end of May. Doug Anderson, Assistant Director of Health Coverage Policy, distributed a list of health care reform priorities that the State Coverage Initiative team (the 12-member core of the reform process) ranked during its February retreat. Expanding Medicaid and creating a "Connector" were at the top of this list. Also included was: moving toward community rating, creating a reinsurance program and establishing guaranteed issuance of coverage for individuals.

What does all this mean? OCHC is glad that the SCI team sees the important role that Medicaid can play in making health care expansion a reality—Medicaid brings in nearly 60 cents for every 40 cents that that state pays. Moving toward community rating and "guaranteed issue" made it into the top category, which is also encouraging. Guaranteed issue means that insurers can't refuse a policy because of an applicant's medical condition or pre-existing condition. We heard a lot about this during last summer's joint hearings by the House Committee on Healthcare Access and Affordability and the Senate Health, Human Services and Aging Committee. Community rating means that insurers can't charge a lot more money to those with a medical condition. OCHC supports insurance reform that will move us in the direction of making health insurance available and affordable without regard to medical condition or pre-existing condition.

We are also encouraged that the SCI team is moving toward "reinsurance" rather than a high risk pool. Reinsurance means that the state will pay a certain percentage of the claims of people with higher risks of illness. High risk pools also help people with medical conditions to get insurance, but they actually buy high priced insurance and thus aren't as efficient from a consumer/taxpayer standpoint.

(See **Timetable** - Continued page 3)

We Need Your Story!

If you are uninsured or have been uninsured and have experienced serious medical issues because of delaying care we'd like to talk to you. If you've been turned down for insurance because of a medical condition or pre-existing condition we would like to talk to you. If you are insured but unable to access health care because of high deductibles or co-pays, we'd like to hear from you. In 2008 the Ohio Consumers for Health Coverage will be co-releasing with Families USA a number of reports on various aspects of health care access. When we do this, we like to show the media how the policies discussed in the reports affects real people. Let us know if you are willing to share your story. Send an e-mail to Audra Teague at ateague@uhcanohio.org or call (614) 456-0060. □



OCHC-related Available Positions

Field Director—This person will coordinate OCHC's grassroots work. He/she will work with the Project Director to organize and mobilize a groundswell of visible support for affordable, accessible high quality health coverage for all Ohioans. Detailed job description at www.uhcanohio.org

DYING, (continued from page 1) was in her late 40's and this resulted in her loss of health coverage. Over the next two years Claire held multiple part time jobs, always looking for more hours and benefits, but she never obtained medical coverage. She could not afford continual access to medications to treat previously diagnosed medical problems. In November 2004, Claire became ill. When she couldn't breathe a day after Christmas 2004, she had to call the emergency squad. She was diagnosed with pneumonia, but it was found that she had advanced stage lung cancer. She received treatment and continued to try to work to pay her bills. However, by August the cancer had metastasized to her brain and liver, and Claire died in September, 2005. To read the report go to <http://www.familiesusa.org/assets/pdfs/dying-for-coverage/ohio.pdf> □

(**Timetable** – Continued from page 2)

Concerns: Finding a way to keep the dollars spent directed to health care and not insurance company profits is one of our biggest concerns. Despite consumer requests that the Ohio Department of Insurance provide the likely costs and benefits of a single payer form of health coverage, the Governor has resisted that since the beginning of the Health Reform Initiative. There also are some key unanswered questions, including the extent of subsidies and limitations on cost-sharing.

The Advisory Committee also heard some of the mechanisms for financing health care reform, and after reviewing them, offered the “pros” and “cons” to each.

Detail on what these would look like will be forthcoming in the next newsletter:

- Medicaid waiver
- Medicaid expansion
- Redirection of safety net funds (Health Care Assistance Program--HCAP)
- Hospital/provider/physician revenue assessments
- Mandates on employers/ assessments on employers not providing coverage
- Sin taxes (tobacco, alcohol, fast foods, other)
- Assessments on health insurance carriers
- Redirect reduced spending in other areas to coverage/capturing savings from less uncompensated care and improved health status
- Mandates on individuals
- Three-share programs (employer, employee, state all contribute)

The next Health Advisory meeting is March 25th at the Old Lazarus Building in Columbus from 9 AM to 4 PM. For more information on the Health Care Reform process go to

<http://www.healthcarereform.ohio.gov/index.aspx> □



Cover the Uninsured Week Coming

Mark your calendars. This year Cover the Uninsured Week will be April 27-May 3rd

For Cincinnati activities go to <http://www.covercincy.org/about.html> or <http://covertheuninsured.org/>. Columbus and Toledo activities will be posted in the April Regional Newsletter.

Current List of Ohio Consumers for Health Coverage Endorsers

(Statewide Organizations Only –a full list will be included in the April newsletter)

- AARP Ohio
- ACORN
- AFSCME Ohio Council 8
- American Cancer Society
- Cerebral Palsy Association of Ohio
- Children’s Defense Fund Ohio
- Hunger Network in Ohio
- NAMI Ohio
- Ohio Academy of Family Physicians
- Ohio Alliance for Retired Americans
- Ohio Association of County Behavioral Health Authorities
- Ohio Association of Free Clinics
- Ohio Association of Second Harvest Food Banks
- Ohio Citizen Advocates for Chemical Dependency Prevention & Treatment
- Ohio Council of Churches
- Ohio Council of Healthcare Providers
- Ohio Empowerment Coalition
- ORGANIZE Ohio
- SEIU District 1199
- UHCAN Ohio
- Voices for Ohio’s Children
- We Believe Ohio