Rebecca Buck

From: Theresa Utton

Sent: Thursday, February 16, 2017 1:19 PM

To: Rebecca Buck

Subject: FW: Written Testimony for Appropriations Public Hearing

From: VT Coalition of Clinics for the Uninsured [mailto:vtcoalitionofclinics@gmail.com]

Sent: Thursday, February 16, 2017 12:41 PM

To: Theresa Utton

Subject: Written Testimony for Appropriations Public Hearing

Hello,

I am unable to attend the Appropriations committee's public hearing at the Statehouse tonight at 6pm and would like to submit written testimony. My testimony is as follows:

Dear committee members,

I have lived in Vermont for 17 years, all of which have been spent working with some of the state's most vulnerable people both professionally and as a volunteer. I have served as a guardian ad litem, worked in multiple nonprofits and Burlington city government, and have helped 22 local families access services through the state when they couldn't find help elsewhere. My life has been spent in the trenches making sure my fellow Vermonters have their basic needs met. I've seen the good, the bad, and the ugly. Time and time again I've seen systems that are convoluted, difficult to navigate, disconnected from each other, and dehumanizing to use. For the last two years I've had the privilege of serving as the executive director of the VT Coalition of Clinics for the Uninsured (VCCU) - a coalition of ten free clinic programs throughout the state - and this is the first time I have worked with staff who consistently treat every person who walks through the door with dignity and kindness, regardless of circumstances, and literally save lives. The VCCU's number of Vermonters served has grown each year in the 22 years it has been in existence, and after small drop in people served in 2015, we reached a new high in 2016 with over 8,000 people coming through our doors for assistance enrolling in VT Health Connect programs, on-site healthcare, affordable prescriptions, dental care, mental health treatment, help accessing charity care programs, and much more. For instance, the Rutland Free Clinic shared this story with me:

"On July 14, the Rutland Free Clinic assisted a 68 year old female patient complaining of dental pain. Like so many others, this patient did not have health care insurance, dental insurance, no primary care provider or dental professional. This patient learned of the Rutland Free Clinic through a friend and called looking for help. Having no transportation of her own, transportation was provided by clinic staff to and from her appointment(s).

This patient was seen by one of our volunteer providers, a lifelong, highly respected Rutland area physician. During his consultation with this patient, he conducted a routine physical exam where the provider located a large pulsating mass in her abdomen. Additional testing was ordered to include a CT Scan where a 6.0cm AAA (Abdominal Aortic Aneurism) was confirmed. Given several options for additional treatment locations, the patient accepted a referral to Dartmouth Hitchcock Medical Center for a consultation and additional treatment. Along with the referral to Dartmouth Hitchcock Medical Center, the patient was assisted with obtaining health care insurance through Vermont Health Connect by Rutland Free Clinic office staff.

On February 9th, a surgical procedure was conducted on this patient to repair the AAA. On February 15, this office received notification the patient was recovering well, being released from the hospital to home care with an expected full recovery."

Thankfully, that woman ended up at the Rutland Free Clinic and left with a major emergency averted, health insurance, and a provider relationship. The hope for every patient our free clinic programs see is that they will enroll in insurance and accept a referral to a medical home. But that isn't always the case, and no matter what the insured rate is in the state, there will always be people who need the free clinics like this patient at the Bennington Free Clinic:

"Sixty year-old Carl was first seen at the Bennington Free Clinic in January of 2016 when he started having episodes of extremely rapid heart rate every three or four days that were compromising his ability to work at his full-time factory job. He was found to be eligible for a commercial health insurance program through Vermont Health Connect. Based on his salary of \$21,000 per year, his take home pay is \$1512 per month, out of which he pays \$300 in alimony, leaving him with \$1212 for shelter, utilities, food, car payment and car insurance, and gasoline to travel the 12 miles each way to and from his job. The average silver plan under Vermont Health Connect would cost him \$99 per month. Even with the cost sharing reductions provided by the Silver 87 plan for which he qualified, Carl calculated that he would not have the \$700 medical deductible plus the \$100 pharmaceutical deductible, never mind the \$40 per month co-pay required for monthly visits to a primary care physician and the cardiologist and the \$50 per month co-pay for his single prescription "I already have no money at the end of the month", says Carl. "Where am I supposed to find \$189 per month to buy and use insurance? Carl remains a patient at the Bennington Free Clinic where he is seen monthly or more often by an internist and where he receives his prescription medication free of charge. Clinic staff are currently helping him to qualify for free care at Dartmouth Hitchcock Medical Center so that he can undergo a cardiac ablation to permanently cure his arrhythmia. Even with the prospect of free care at Dartmouth Hitchcock, Carl worries about how he will be able to take time off from his job for the procedure."

The VCCU is grateful for the state allocation of \$688,000 it has received through the Dept. of Health's budget, but after being level funded for the last six years while patient numbers have grown, I am asking that the committee consider an increase this year. We've already seen more people coming through our doors in the last few months looking for assistance, terrified of what changes to the ACA will mean for their healthcare, and we need the state's support to make sure Vermont's most vulnerable people have access to quality care, regardless of their ability to pay.

Sincerely,

Laura Hale

Burlington, VT

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