

My name is Tiffany Lee Heath and I live in the City of Rutland, Vermont. I am 38 years of age and on Medicare and Medicaid. I am physically challenged and required to have these insurance coverages. I adapt well, although there are two main reasons why these coverages are mandatory.

I've used ventriculoperitoneal (VP) shunts since infancy. In 1999, I had the first VP shunt revision. I became allergic to the anesthesia, which resulted in extreme physical sensitivity. To control the symptoms, it's mandatory for me to be on allergy medication – specifically Loratadine.

I've had five brain surgeries during my lifetime. Because of these surgeries, there are times when my memory is slow, and I have a blockage. I never know when this is going to occur, so I thought it best to have someone else read my testimony. Looking at the whole scenario, I am at high risk for other conditions due to the shunt, such as a stroke, meningitis, to name off hand. Should I need hospice, I really don't need to be in a financial bind and have any of the coverage from these insurances be cut. In fact, coverage should be increased in many areas.

For my sake – and especially for the sake of people in need of this type of care, please do not cut or eliminate Medicaid or Medicare.

Thank you.