

Testimony to the U.S. House of Representatives Committee on Energy and Commerce
Subcommittee on Health

“Obamacare Implementation Problems: More than Just a Broken Website”

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Chairman Pitts, Ranking Member Pallone and members of the Health Subcommittee:

My name is Reverend Marilyn Dixon Hill. I was a registered nurse for 30 years and currently serve as Associate Pastor at Camden Bible Tabernacle Church in Camden, New Jersey. Camden has been my home for 40 years and I am very active in my community, especially as a clergy leader with Camden Churches Organizing for People (CCOP) – a PICO National Network affiliate. With more than 1,000 member institutions representing one million families in 17 states, PICO is the largest and fastest growing network of faith-based community organizations in the country. Today, I am here to share my story with you as a representative of PICO and the hundreds of thousands of people of faith who belong to our network.

The value of people being able to access care is very real to me. The day November 10, 2010 will be a day I remember forever. On that day, almost exactly three years ago, I received what should have been a routine flu shot – but that shot ended up being anything but “routine.” Due to a very rare side effect I became completely paralyzed and nearly died. Today, although I have recovered somewhat, I am disabled and live with Guillain-Barré syndrome.

Although there are many lessons I learned from this challenging time in my life, one that brings me here today was my firsthand experience of how broken our health care system was. When I was released from rehabilitation – finally able to sit-up and even stand for short periods of time – I discovered that I could not financially afford to continue my care. Paying for COBRA was too expensive for my tight budget and my disability benefit was too high to qualify for Medicaid. In short, the very health insurance that would have made it possible for me to continue to rehabilitate, and eventually enter back into the workforce, was unavailable to me.

I spent two years caught in this painful care gap before finally qualifying for coverage through Medicare. Sadly, many going through health coverage challenges like these never make it to getting care the care they need. That was the case for Ronald Butler – an uninsured 56 year-old former member of my congregation who died from a brain tumor. Despite two trips to the hospital, Ronald’s tumor went undetected until a week before he died – all because he lacked insurance for proper testing.

Surely it was tragic for both Ronald and me to have such serious health problems, but the true tragedy is that it didn’t have to be as painful, terrifying and isolating as it was. Our lives could

have been improved, sustained, and - in Ronald's case – even saved, if we had received the care we needed and ought to have had.

My experience – echoed in the experiences of so many in Camden and throughout the United States – motivated me to get involved in reforming our health care system. And, my firm belief that we are all children of God and are called to love and care for all those in His beloved community, inspires me every day to ensure everyone has access to the affordable care they need.

Now, with the Affordable Care Act (ACA) being fully implemented, my community and communities like mine across America are mobilizing to bring affordable care to the people who need it most. In doing so, we are beginning to heal from years of avoidable tragedies.

We are bringing enrollment opportunities to our congregations, to our food pantries, to our schools, and to our neighborhoods because we know that (1) there is a hunger and deep need for health insurance among our people, (2) accessing affordable care strengthens our communities and helps us thrive; and, (3) it is good, sound economics for our cities and states.

First, as we have seen in media coverage and reports on the progress of ACA implementation, Medicaid enrollment is up – just as was expected. This is a good thing! It shows that the bill got it right and is working to get people living without health insurance the coverage they need. As of October 24, in Camden alone, the County Board of Social Services received 609 direct applications – at least 134 of which would not have been eligible for coverage before the ACA. That is 134 people just like me and families just like mine who are receiving the benefit and security of comprehensive, affordable health insurance for the first time in a long time – maybe even the first time ever.

Second, we know both from our lived experiences and from substantial research, that a healthier society is a more productive society. You need look no further than my own story – my lack of access to affordable care prevented my full rehabilitation and return to working as a nurse.

Another example of this is the findings from Oregon that showed families receiving Medicaid coverage under their state's expansion saw catastrophic health costs essentially disappear. Health insurance, and especially Medicaid due to the populations it serves, helps low-income families move beyond living paycheck-to-paycheck and begin to move out of poverty. Affordable and accessible coverage is an essential ingredient in living the full, productive, healthy life God intended for each of us to live.

Finally, third, Medicaid programs are good for our local economies. Not only, as I just mentioned, does it keep people from drowning in catastrophic medical debt, but it is also a proven economic stimulator. And, with the federal government covering up to nearly 92 percent of the cost of Medicaid expansion over its first 10 years, the cost to state and local

governments has the potential to be completely offset by savings in state programs that serve uninsured people.

Governors, chambers of commerce, and hospital associations across the United States – from New Jersey to Ohio to New Mexico to California – are clear on this benefit and are joining with faith and community organizations to bring the full benefits of the Affordable Care Act to every state in the country.

Mr. Chair, Ranking Member Pallone, and members of the Health Subcommittee, access to affordable health care saves lives, supports families, and helps communities thrive. The Affordable Care Act, with its spectrum of coverage options, is intentionally designed to meet the needs of every American – regardless of where you live or how much money you have. High rates of enrollment in Medicaid are a sign that people in need are getting the coverage we planned for. I see this, and I hope you will too, as a sign of hope and healing and God’s love at work in our country.

Thank you for your time today and the opportunity to speak with you.