

SENATE HEALTH & WELFARE COMMITTEE
Tuesday, February 2, 2016

ATTACHMENT 8

Chair Heider and Vice Chair Nuxoll:

My name is Linda Anderson. I am a resident of Boise.

I greatly appreciate your giving the public a chance to weigh in on this critical issue.

Like all of you, I am one of the lucky ones. Thanks to my late husband, I have Federal employee health care for life.

If you have suspected cancer, your primary care physician orders an MRI or a CAT scan and sends you to an oncologist. If you break a bone, you are sent to an orthopedic surgeon, and if you have serious depression, you are referred to a psychiatrist. You understand what I mean.

But the hard working ladies who clean my house every two weeks don't have that luxury now and would not have it under PCAP. Under Governor Otter's proposal, the 78,000 uninsured Idahoans would not be referred to a specialist, have advanced diagnostic tests or even expensive drugs. Because it is financially within easy reach, it seems highly unfair to deny our fellow citizens the services, which we take for granted. I haven't talked to one physician who feels that the PCAP is an adequate plan.

The Idaho Legislature prides itself on being fiscally conservative. If we were talking about a budget-breaking expense, you, of course, would reject it. However, the expansion of Medicaid is expected to save our state \$173 million. This is money we would otherwise be leaving on the table. Instead, you are considering spending \$30 million per year, funded by tobacco and cigarette taxes, a declining source of revenue. Think of the impact those funds could make on infrastructure, education or even tax cuts.

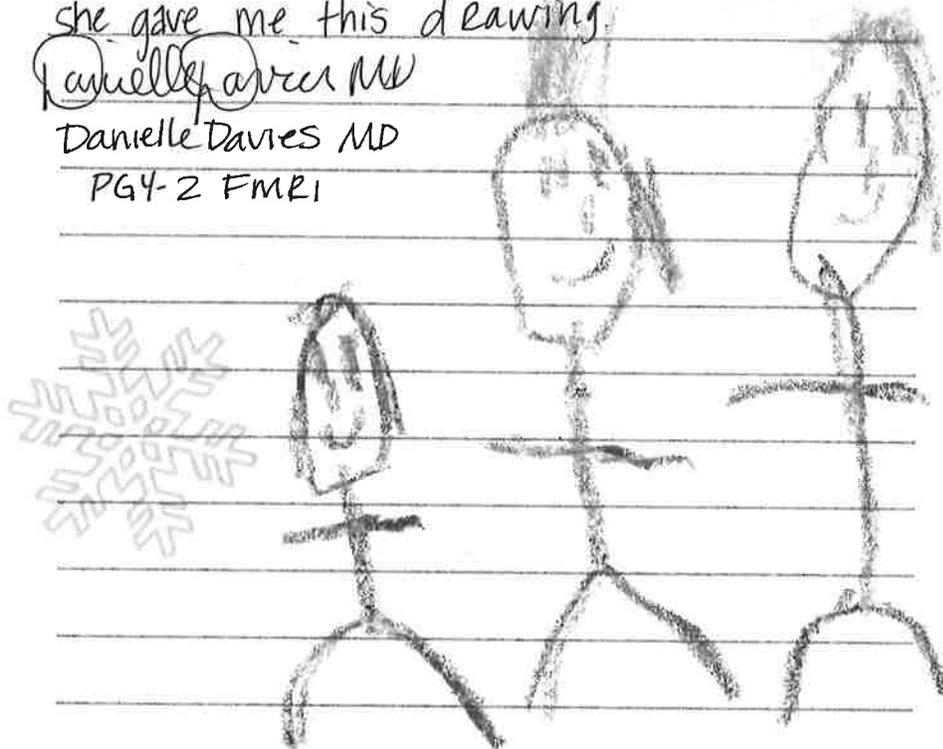
I urge you to think about your 78,000 underserved constituents and to take the humanitarian, fiscally-common-sense path of Medicaid expansion. All of Idaho will be healthier!

Thank you.

just a note

Lily told me she wished
her mom could afford
her medication so her
tummy wouldn't hurt so much
and she would smile more when
she gave me this drawing.

Danielle Davies MD
PGY-2 FMRI



My name is Clella Steinke. Our daughter-in-law was Jenny Steinke of Idaho Falls. Jenny had asthma, and because she was in the coverage gap, she did not have access to medical care for asthma. On September 1st, she had a severe asthma attack, stopped breathing, and died six days later. It is painful to share this story, as our family is still grieving. I want to thank you for holding this hearing and I implore you to take action to prevent more tragedies.

Jenny was the light of our son Jason's life. She and Jason struggled to make ends meet, but they were always working. Jenny worked as a caregiver most of her life and when grandma passed, she got a part-time job. Jason struggled to find full-time employment and was thrilled when he landed a full-time job in July that would provide insurance for both of them. The insurance took effect the day Jenny went to the hospital. In the months before her death, her asthma had worsened. She was getting inhalers from a local community clinic when she could, or buying them from friends. Jenny's lack of access to comprehensive health care caused her death.

September 1, Jenny went to work. She was not feeling well when she got home. We know now that she was suffocating. She got a neighbor to drive her to the hospital. That drive took 3 minutes and 52 seconds. When they arrived, she had stopped breathing. Jason rushed to the hospital and spent every hour of the following six days with her. Jenny's son, pregnant wife and I were at her side too. We had to say good-bye to Jenny on September 6th. She never got to meet her beautiful grandbaby, born in November. In December, Jason marked Jenny's birthday and his birthday without her. He suffered through their 10-year wedding anniversary alone.

My husband and I lived in Idaho Falls for 25 years (he was a nuclear engineer at INL and I was a speech-language pathologist in the Jefferson School District #251). We moved to Wisconsin last April. We have asked a lot of what-ifs: *What if we had still been in Idaho? What if we had realized how severe her condition was?* Nothing will bring Jenny back. We want to make sure this does not happen to another family.

We know you are considering a primary care plan for Idahoans like Jenny. This may have helped. It is not the same as health insurance. Jenny needed prescriptions and an asthma specialist. She needed coverage, just like thousands of Idahoans with medical issues not being addressed with primary care.

When Jenny died, I was struck by the contents of her purse. You can tell a lot about what someone is going through by what they carry. She had a dollar bill, two inhalers, an oxygen meter and an advertisement from the local paper. This is what "Death by Poverty" looks like.

This should not happen in our great State. I ask you to find a complete solution to the coverage gap and pass the Healthy Idaho Plan.

Respectfully Submitted,

Clella Steinke

Remembering Jenny Steinke



Jenny with her son James at his wedding, August, 2015

Dear Chairman Heider and members of the Senate Health and Welfare Committee:

My name is Clella Steinke. My daughter-in-law was Jenny Steinke of Idaho Falls. Jenny had asthma, and because she was in the coverage gap, she did not have access to the correct kind of inhalers. As a result, on September 1st 2015, she had a severe asthma attack, stopped breathing, was declared brain-dead 5 days later and became an organ donor. It pains me to share this story, as our family is still dealing with so much grief, but I am writing to thank you for holding a hearing on the Healthy Idaho Plan and to implore you to take action to close the coverage gap in Idaho.

I wish I could be there in person today. My husband and I lived in Idaho Falls for 25 years (he was a nuclear engineer at INL and I was a speech-language pathologist in Jefferson School District #251), but we moved to Wisconsin last April. I deeply appreciate you taking the time to learn more about our beloved Jenny and I hope that you can prevent a tragedy like this from happening to another Idaho family.

Jenny was the light of our son Jason's life. She was a deeply caring and compassionate person. Jenny was born in poverty and lived her life in poverty. Jenny and Jason had struggled to make ends meet for years, but they were always working. Jenny earned her GED in Idaho Falls, and worked as a caregiver, most recently, her grandmother. When grandmother passed, Jenny got a part-time job at U-Haul late August. Jason had struggled to find full-time employment and was thrilled when he landed a full-time job in July that would provide insurance for him and Jenny. The insurance took effect the day Jenny went into the hospital. However, in the months before Jenny's death, her asthma had worsened and without access to a specialist to treat her asthma, she was getting inhalers from a local community clinic when she could, or buying them from friends. Jenny and Jason did not realize that those inhalers were actually worsening her condition.

Jenny's lack of access to comprehensive health care caused her death. I told Dr. Krell, the attending physician, her death certificate should read "Death by Poverty."



Jenny and Jason August, 2015



Jason saying Goodbye



Jenny's granddaughter born November, 2015

On the day Jenny died, she went to work in the morning, came home after lunch and was not feeling well. We know now that she was suffocating—her inhalers had stopped working. She was able to get a neighbor to drive her to the hospital. That drive took 3 min and 52 seconds. By the time they arrived, she had stopped breathing. When the hospital called my son at work, he rushed to her side. He spent every hour of the following six days with her.

I flew from WI. Jenny's son and pregnant wife flew from OK. Jenny's family drove from CA. We had to say good-bye to Jenny on September 5th. She never got to meet her beautiful grandbaby that was born this last November. In December, my son marked Jenny's birthday without her. A few days later, he suffered through their 10-year wedding anniversary alone and his birthday without her.

In the months since Jenny's death, my husband and I have asked a lot of what-ifs: *What if we had still been in Idaho - could we have done something? What if Jason and Jenny had realized how severe her condition was? What if she had had health insurance earlier?* Nothing will bring Jenny back. Now we are doing all we can to make sure this doesn't happen to another family. Jenny and Jason worked hard, they contributed to their community and they were loved by family and friends. We loved them, just as you love your children and grandchildren.

We have heard that the legislature is considering a proposal to offer primary care to Idahoans like Jenny. We hear that maybe this would have helped her. However, access to primary care is not the same as access to health insurance. Jenny needed prescriptions and an asthma specialist—Jenny needed health care coverage. There are tens of thousands of other Idahoans with serious medical issues that cannot be addressed in a primary care setting only. We ask that you please provide a complete solution to the coverage gap and pass the Healthy Idaho Plan.

After Jenny passed away, I was struck by the contents of her purse. You can tell a lot about what someone is going through by what they carry with them. All she had in her purse was a dollar bill, two inhalers, an oxygen meter and an advertisement from the local paper. This is what "Death by Poverty" looks like. This should not happen in this great country or in our great State of Idaho. Thank you for listening to our story. Please close Idaho's coverage gap.



The contents of Jenny's purse when she passed away



The onesie of her soon-to-be-born granddaughter

Respectfully Submitted,

Clella Steinke