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Those battling illness may get easier access to insurance

Ending exclusions for pre-existing conditions will add to costs, critics say

By Liv Osby
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Nancy Richey wants health insurance, but crippling migraines and depression make the price tag unaffordable.

Legislation recently introduced in Congress would end insurance exclusions for pre-existing conditions like Richey's, enabling coverage for Americans with illnesses from asthma to cancer.

And while the bill is supported by patient and consumer groups, it faces criticism from some who say it will increase costs.

Richey, of Simpsonville, said she's tried to buy insurance. But on her \$800 net monthly income, she can't pay the 12 months to 18 months of premiums without coverage and still pay for doctors and medication. Most plans require a waiting period to cover pre-existing conditions.

"Pre-existing conditions are the reason I need insurance," she said. "It's the classic Catch-22."

Democratic U.S. Sen. Jay Rockefeller of West Virginia, sponsor of the Pre-existing Condition Patient Protection Act of 2009, said millions of Americans are living with chronic illness and insurers shouldn't profit by denying them care.

U.S. Rep. Joe Courtney, a Connecticut Democrat who co-sponsored the bill, said the practice also keeps people from changing jobs because they fear losing coverage.

Sen. Jim DeMint, a South Carolina Republican, opposes the bill, saying it will increase premiums.

"The best thing we can do to help Americans with pre-existing conditions is to empower them with the ability to access plans they can own and keep," said his spokesman, Wesley Denton.

Sen. Lindsey Graham is waiting to take a position on the bill but believes pre-existing conditions must be tackled, said Kevin Bishop, spokesman for the South Carolina Republican.

U.S. 4th District Republican Rep. Bob Inglis said the bill is "the right sentiment but the wrong solution." For it to work, he said, everyone must be covered to spread the risk so premiums are affordable.

"Figuring out how to do this in a way we can afford is a huge challenge."

America's Health Insurance Plans, the trade group for insurers, has agreed to end these exclusions if coverage is mandated for everyone, spokesman Robert Zirklebach said.

Even that would require federal subsidies so premiums are affordable for low-income people, he said. AHIP members also will stop charging premiums based on health status if coverage is mandated.

The National Patient Advocate Foundation, one of at least 22 groups endorsing the bill, says it will protect Americans. And Susan G. Komen for the Cure also supports the concept, saying, "Fighting cancer is bad enough. People shouldn't have to fight for insurance too."

It's an issue that hits home for Sue Berkowitz, director of the South Carolina Appleseed Legal Justice Center. She worries her son, who has a heart condition, won't be able to get insurance as an adult.

"The whole point of insurance is to get coverage for the problems we have," she said. "It's critical that we start to address this."

Others, including John Ruoff, research director for South Carolina Fair Share, say the problem highlights the need for an overhaul of the system. By cherry-picking low risks, he said, insurers avoid risk rather than spread it, pushing health-care costs onto public programs, back to the insurance system through cost-shifting, and onto the healthy.

"That's why comprehensive reform that ensures affordable health coverage for every American is so important," he said.

Dr. Allan Brett, director of general internal medicine at the University of South Carolina School of Medicine, said he sees these exclusions regularly.

One patient passed on surgery because the plan at her new job wouldn't cover her previously fractured elbow, which had become increasingly painful. It was either pain or face tens of thousands of dollars in debt, he said.

"This is one reason that to me the only rational solution is to move to a single-payer system like Medicare," he said. "The legislation in a piecemeal system sounds like a good thing, but it's another Band-Aid, and I find it more and more difficult to talk about these Band-Aids without stepping back and looking at the whole system."

The bill has been referred to the Senate Committee on Health, Education, Labor and Pensions, and Richey, 50, says she hopes it will gain support.

"This bill has been a long time coming," she said. "I just pray that it will pass."
