

Op-Ed

In the end, it's about the people

By Dr. Rhonda Medows, Commissioner of the Georgia Department of Community Health

Georgia, like many states, faces declining state revenues and its projected shortfall is approaching \$2 billion. All state programs are being evaluated including Medicaid, which provides health care to children in low income families, fragile elders surviving on limited means, and the severely disabled with long-term health care needs. More working families without access to affordable health insurance are seeking the Georgia Department of Community Health's assistance. When working people with limited resources become uninsured, they either receive uncompensated acute ER care or services provided through taxpayer-funded government programs like Medicaid and PeachCare for Kids™.

Unaffordable health insurance and the high cost of health care have contributed to the shift from private health insurance coverage to taxpayer-funded government programs each year. More than half of Georgia's population is excluded from private health insurance. Approximately 38 percent of Georgians receive health care through government-funded programs, i.e. Medicare, Medicaid, PeachCare, etc. An additional 17 percent are uninsured and receive some care from safety net clinics funded in part by local, state and federal governments.

In today's economy, when working people with limited resources become uninsured or unemployed, preventative health care is delayed and avoidable illnesses occur. In addition, our society bears the cost. From a public health perspective, the spread of communicable diseases becomes a concern and from a workforce perspective, worker productivity declines due to worker illness and absenteeism resulting when workers take time off to care for their sick children or aging parents.

Today, 33.3 percent of the parents of children enrolled in Medicaid are employed, uninsured and have low incomes. Unfortunately, we anticipate more working people falling into the ranks of the uninsured and underinsured as their income is consumed by cost of living increases, including rising health care costs.

Families in need who request assistance from Georgia Medicaid and PeachCare include:

- Working families whose small business employers cannot afford to offer health insurance
- The self-employed worker who finds himself or a family member uninsurable because of preexisting illness and yet is still in need of ongoing health care for multiple chronic illnesses
- The mother of a special needs child with severe disabilities who needs ongoing costly services that are either not covered by her private health insurance or that have exhausted the policy's limits
- The entry level worker who independently seeks health insurance and finds that the few available commercial low cost insurance options specifically prohibit participation by low income people who are Medicaid eligible
- Low wage employees who are offered PeachCare information by employers instead of employer sponsored health insurance
- The spouse of a retired worker who is struggling to live on social security and is seeking assistance with nursing home services not covered by Medicare
- The adult with disabilities seeking independence and wanting to work but who must first seek assistance to receive needed home and community based health care services
- The clerical worker hired as a temp without benefits who, as a mother of three, is searching for affordable health care coverage
- The recently laid off worker now coping with being suddenly unemployed, uninsured and still responsible for his family and children's health care needs

Funding is needed to continue the availability of Medicaid and PeachCare for eligible families, some of

whom may be your family members, neighbors or coworkers in need. Contributions to finance these programs are already provided by taxpayers. Some health care providers also contribute by providing care despite low Medicaid payment rates and uncompensated care in emergency circumstances. The Department's budget proposal calls for a contribution to be made by another sector of the health care community – the health insurance companies. Exempted from the managed care company provider fee are Medicare plans and employer self-insured plans. The managed care company provider fee, in use in 14 other states, will permit Medicaid and PeachCare to remain available to Georgians in need during these tough economic times. Hopefully the health insurance companies will choose to contribute this as civic rent to assist with a societal need as opposed to passing more costs onto their remaining clients.