

Testimony for Special Informal Hearing
“Costs of Broken Health Care System, Benefits of Public Option”
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Representative Conyers, Representative Jackson Lee, fellow physicians -- I am honored to join you today to discuss why I think a public option is an important component of comprehensive health care reform.

My name is Dr. Alex Blum. I am a Pediatrician and Health and Evidence Policy Fellow at Mt. Sinai School of Medicine. Both physicians and our patients need health insurance reform now.

Six years ago, when I was a medical student at Howard University College of Medicine in Washington, DC, I spent the summer doing an internship at the Centers for Disease Control in Atlanta. I became very sick, went to the emergency room and was told I was in acute kidney failure. The problem was that my medical school insurance only covered me if I got sick near Washington, DC. It didn't cover me in Atlanta; I qualified as under-insured. Aware that we could not afford out-of-pocket payment for a renal dialysis unit as was being recommended, my father, also a physician, drove me through the night from Atlanta, waking me every few minutes to make sure I was responsive, until we finally reached Washington, DC the next morning. Even those of us who chose to enter the profession of caring for others are not immune to the dysfunction of our health care system.

I am here today because there are 47 million uninsured and 87 million underinsured Americans who deserve better. We all know the uninsured and underinsured. I trained in Pediatric medicine at a County Hospital outside of Los Angeles. At this County hospital I cared for uninsured children, and those enrolled in SCHIP and Medicaid. What I most enjoyed about working within that system was that we provided high quality care to those who needed it the most. My patients on Medicaid and SCHIP were able to easily see sub specialists: Dermatologist, Ophthalmologist, and Gastro-intestinal physicians.

My patients who had private insurance often faced health care barriers which my patients on SCHIP and Medicaid never had to navigate. When children who had private medical insurance visited my County Hospital Pediatric clinic, staff there had to seek pre-approval from the private insurance company so that patient's parents were not billed and required to pay the cost of care out- of- pocket.

In this County Pediatric clinic I once cared for a 9 month old boy who had a swollen-face covered in a rash on his forehead and cheeks, and raw in his neck folds. He sat before me and