Good morning Mr. Chairman and Task Force members, my name is Joshua Levin. I am a senior at Central CT State University and a social work intern at the Universal Health Care Foundation of Connecticut. I have been working with the foundation to collect stories from Connecticut residents about the harmful issues high deductible plans create for them and their families.

As foundation staff members Jill Zorn and Lynne Ide have done before me, I would like to share with you yet another story of the harm high deductible health plans cause. Today I’m here to tell you about my Aunt, Charyn. She is a Licensed Practical Nurse who currently has a health plan with a $3,000 deductible through her employer.

When she was asked to explain how her high deductible plan affects her ability to seek care, she stated, “I ask my doctor for the lower milligram value of my blood pressure medication because it’s cheaper, though I need to be taking the higher amount.” No one should have to put their finances over their own health, but that is the unfortunate reality of our current system.

She continued on by sharing what happened during her last wellness visit. Her doctor, acting in my Aunt’s best interest, decided to order an EKG, liver function study, and several other lab tests. Unknown to her at the time, none of these services were covered pre-deductible. Instead, she received a $250 bill for what she expected to be a wellness visit, free from out-of-pocket charges.

Charyn states, “I have to somehow be ahead of the game with this. Before I see a doctor, I need to call my insurance and tell them what I plan on getting done and figure out what’s covered and what’s not. I’ve been in this line of work for over 33 years and in insurance for over 25 years, yet I do not feel like this has offered me any insight. If anything, it’s made me even more frustrated because I know how it should work and things change too quickly to keep up.”

She has every right to feel frustrated over this. When including her premium share and out of pocket expenses into her total amount spent towards insurance in a year, as she puts it, “I shouldn’t have to invest almost $5,000 before I get anything back.”

When she was asked to share her thoughts with policy makers, she said, “this isn’t a level playing field, especially if you are not one of the high money makers. If you’re middleclass, it’s really a lot out of your pocket. This is a little over 15% of my annual income, not even counting medication. I’ve reduced the amount of medications I take because I can’t afford them.”

Please keep my Aunt Charyn in mind during your deliberations and remember that she and countless people in her exact situation are looking to you for help and support. These are real people struggling to afford their health care; real people who need real action.