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To the Senate Health and Human Services Committee:

Thank you for the opportunity to speak with you today.

I am a family physician, a wife, and the mother of two small children. Last November I opened a practice a few blocks from my home in Englewood specifically to provide care for local families who are uninsured or have high deductibles. Many people thought I chose an odd time to do this considering the Affordable Care Act, which they thought would help people so much that it would put me out of business. While there are many helpful features such as the elimination of pre-existing conditions, I could see that for the typical family, most of their medical needs would not be addressed. I saw that something more was needed.

You see, most of the families in my practice either currently have high deductible insurance or would be obtaining high deductible insurance under the new laws. While it's true that high deductible insurance provides preventative care; for the families I see, preventative care is very little of the care they need.

What do typical families need? They need care for illnesses (such as ear infections, sinus infections, dehydration), injuries (such as lacerations that need stitching, strains and sprains, broken bones), chronic diseases (such as high blood pressure, diabetes), mood problems (such as anxiety, depression, bipolar disorder), dental care. With high deductible insurance all of these are paid out of pocket until the deductible is reached. For many families, this means not getting the care they need until they absolutely cannot avoid it. This is not good for families, businesses, schools, or the community. I will tell you that the opinion among my population is that they will be paying for insurance that will do nothing for them until it's too late.

I saw this dilemma and stepped in to provide affordable primary care so that these families could come in for their needs whenever they needed to.

And then this January I experienced this for myself. My family has had high deductible insurance for years...it is pretty similar to what we would have under the Affordable Care Act. We figured this would balance the high cost of insurance with the protection in case of some unthinkable emergency. We

always put away the maximum contribution to our Health Savings Account (HSA) to make sure we'd have the money when we needed it.

And then this January the emergency happened. In 2012, we'd emptied our HSA paying for my pregnancy and my infant daughter's minor medical problems. In January of this year, I had the interesting experience of suffering a vertebral artery dissection and cerebellar strokes. Thankfully, my cognitive abilities are intact but the physical sequelae of the dissection and strokes made it impossible for me to continue to do many of my old activities, at least for the time being. I was physically unable to continue the commute and work at the practice I've been at for the last several years. My family is now completely depending on my little practice I opened in November and I don't have the physical ability to work more than a few hours a day.

Because of the medical problems, I am unable to earn the money to pay the thousands of dollars in hospital bills I amassed in a 24 hour stay right at the beginning of a new plan year (and therefore a new deductible to meet). Because of the high deductible, every physical therapy appointment cost \$85...not bad back when I had a normal physician's salary but not possible now. So I'm a physical therapy drop out. My neurology appointment was over \$200. I'm dreading the need for a repeat MRA to see if my artery has healed...I have no idea how I will pay for it. And I hope and pray that none of us ends up in the emergency room.

Many people who have always had comprehensive medical insurance have expressed confusion when I try to explain this situation to them. Why didn't I plan ahead better? Well, I did to the best of my ability...I just couldn't put away enough money for two years of medical expenses in a row or the financial situation I now find myself in. Doesn't medical insurance equal medical care? No. It definitely does not.

While the Affordable Care Act at its most basic attempts to provide affordable care, it really only takes the first step of providing insurance. **Many of the individuals and families buying affordable insurance will not be able to afford to use it.** And over 300,000 Colorado residents are projected to remain completely uninsured. The Affordable Care Act encourages states to go further, creating real solutions for the health care crisis. **As a physician and patient, I strongly support the creation of the Cooperative to ensure truly affordable, comprehensive medical care for all Coloradans.**

Thank you,



Robin Dickinson MD