

Testimonies for HB21-1198

Richard Armstrong: 303-840-8324; stateoart@mac.com

Thank you Madam Chair and members of the committee. My name is Richard Armstrong and I live in Parker, CO. Thank you for hearing my testimony in support of HB#21-1198.

I am a Coloradan with a disability. I require a service dog and an assistant to help me get around safely. I am homebound and have been unable to work for over 5 years. My wife had to quit her job to help me at home full time because it is too dangerous for me to be home alone. Currently, we have no income and no insurance. Our 401k is nearly exhausted and we don't know how we will make it last. We are not okay. Our home is paid for but we still have to pay bills and we get all our food from our church's food bank. Even though the house is paid for, I worry that we will end up homeless. We certainly don't have the means to incur medical debt.

Last April, I got a sore throat and scheduled an online telehealth office visit. I was quoted \$80-100 for the initial visit, and then \$60 for telehealth visits after that. I told them that I was self-pay, disabled, and had no income or insurance. When they told me self-pay patients get 50% off their bill, I made the appointment.

Months later I received a bill for \$827 which they adjusted down to \$640. I called multiple times to dispute the charges and they have since dropped the amount to \$420 for two online visits. I have recently found out that these telehealth appointments are advertised at a fixed \$49 - it is unethical and wrong for them to charge me \$420 for two remote online visits when they advertise them for \$49. They are being consistently unreasonable and unhelpful while we scramble to pay what we can.

I wish I could tell you that this was the only time I have had to struggle with medical debt and unfair hospital billing practices. Years prior, I had a choking incident. Recent dental work left my mouth numb and I choked on my dinner. The ambulance ride was over \$1000 and the total charge for my care was \$28,000 - after the insurance paid I still owed \$4,000. I was on my wife's insurance at the time through King Soopers, but the deductible was \$8,000. How workers earning \$11/hour can pay that is beyond me.

When I approached the hospital for help, their response was insulting. They expected me to sell my house and my deceased dad's old Jeep to pay my medical debt. They were even looking at the money left in my 401k. I only have a small amount remaining

which is supposed to last us the rest of our lives. Now I'm 57, living with a disability, and unable to produce enough income to survive.

Unfortunately, I know that I am one of thousands of Coloradans struggling with unfair hospital billing practices. No one should have to worry if a visit to the hospital will bankrupt them, no one should need to spend hours on the phone trying to avoid massive medical debt. I urge you to vote YES on HB 1198 to bring Colorado one step closer to achieving necessary hospital billing reform.

Karey Sjoden: 720-272-3755; kareysjoden@yahoo.com

Thank you Madam Chair and members of the committee for allowing me to share my story with you today. My name is Karey Sjoden and I live in Evergreen, Colorado. I am here to testify in support of HB21-1198.

My wife and I are both self-employed and finding affordable insurance is a challenge. Our previous insurance was an unaffordable \$1,500 per month so we switched to a catastrophic plan at half the cost. The monthly premium is barely affordable, but the deductible is \$8-10 thousand dollars. We pay them monthly because everyone needs insurance but it's something you never want to have to use. We diligently pay our monthly premiums but it doesn't guarantee they will help you with your bills at all.

I am a handyman who was recently injured on the job when I slipped working over a stairwell. To stop myself from falling down the stairs, I tried to brace myself against the wall and dislocated my shoulder in the process. The electrician I was working with noticed I wasn't looking well and called an ambulance right as I passed out from the pain.

The bills I received were outrageous. The hospital bill was \$18,554, the ambulance cost \$800, and the doctor charged me \$1,867.00. Of the \$22,000 I was charged, my insurance paid \$800. We were so shocked and confused that my wife cried on the phone.

My wife is a hairstylist and had foot surgery recently. Our insurance is paying a small fraction of the total \$10,000 per foot. We have resorted to starting a GoFundMe campaign to ask our friends and community members for help because we are barely getting any assistance from our insurance company.

The COVID-19 pandemic has only added to our struggle. My wife's work was shut down for weeks and COVID related restrictions have impacted the number of clients she can take which affects her income. I am still recovering from my injury. My handyman business has taken a hit because customers don't want people in their homes right now. We don't ask for much. We have both worked hard all these years so that we could enjoy our 60s - not spend all of our money on medical bills. I want to be able to enjoy

my life with my wife and kids, not worry about having to mortgage my house to pay for these outrageous medical bills.

The price of medical services has skyrocketed in the past decade and confusing billing practices make it difficult to understand what we are paying for, what we owe, and what benefits and discounts we may be eligible to receive. We aren't the only people who have struggled financially during the pandemic, and adding crushing medical debt only reinforces our worries. Some Coloradans may even avoid care out of fear of sky high bills which is detrimental to public health during a pandemic. For a strong recovery from the pandemic and its economic consequences, all Coloradans must have access to hospital care without crushing medical debt. Thank you for the time and I urge the committee to vote YES on HB21-1198.

Diane McQuade: 850-691-7570; dmcquade2@yahoo.com

Thank you Madam Chair and members of the committee, my name is Diane McQuade from Denver and I am here to testify in support of HB21-1198.

Last fall I had a heart attack and was sent to the emergency room. After multiple tests, the doctor told me I needed two stents due to blocked arteries. My cardiologist was not available until the next morning, so the medical staff told me to stay in the hospital overnight so they could monitor my condition. Every hour, a nurse came by and gave me a blood test and an EKG. One nurse commented that she had never seen anyone get this many tests! When morning came, my doctor was still unavailable. Another cardiologist agreed to do the surgery, but due to my petite size, he would only put one stent in and would do the second one later. When I finally left the hospital, I hadn't eaten in three days, was suffering an allergic reaction to the anesthesia, and only had half of the procedure done.

It wasn't my choice to stay in the hospital and take all of those tests that I was charged for, and the hospital didn't even complete my care. When I got the hospital bill, I noticed that I had been billed twice for numerous things and charged for both stents though I had received only one. I received multiple bills from the hospital, the doctor, and other companies. After my Medicare deduction I owe \$1400 that I'm not able to pay. I live on a fixed income and my rent is half of the money I receive each month. I simply don't have the funds to pay and I can't get a straight answer from the hospital about the billing mistake.

My regular doctor says I still need the second stent, but the hospital says I can't get the operation until I pay them for the previous surgery. As it stands, I had to cancel because I don't have the money to pay. It has now been 6 months and I still haven't got the operation I need to keep my heart healthy. It's clear that the hospital doesn't care if I get the care I need or not. They're putting profits over people and denying life-saving care.

I'm not the only one that has struggled with unfair hospital billing practices; many of my friends are retirees living on limited incomes and have similar stories to mine. When we need care, we are given every test they can give us, they charge us unfairly, then don't

communicate with us when we want clarification on a bill. They assume because we are retirees that they can take advantage of us. Every Coloradan should be able to get the care they need without being taken advantage of and pushed into debt. Thank you for your time and I urge the committee to vote YES on HB1198.

Brooks Christenson: peacelovephysics@gmail.com

Madam Chair and members of the committee, my name is Brooks Christenson and I live in Boulder, CO. I appreciate your time and consideration of my testimony in support of HB21-1198.

I am a recent graduate of the University of Colorado at Boulder, and one of the perks of going to such a great school is having access to their excellent health insurance coverage. Weeks of consistent stomach aches caused me to seek help from the student health center. After my check up, the staff recommended that I have a colonoscopy and endoscopy. These are not regular procedures at the university health center so I was referred to a specialist for treatment. They assured me that the university would cover the cost of treatment, so no billing was discussed prior to the procedure.

Despite being told everything was covered by insurance, I received a \$1,700 bill. More bills trickled in after the first. I was being billed for doctors, anesthesiologists, and multiple other associated fees. I am a recent college graduate and have been unemployed for months while I search for a job. I simply don't have the money to pay for medical debt on top of living expenses and looming student loans.

The hospital has recently reached out to me to inform me that although I can't pay the bill, they are required to call me once a month to remind me that I still owe money. I patiently explained that once I begin earning a living, I will pay them - but I can't give them money I don't have. They are essentially holding my credit ransom.

If I had been told about the cost of treatment and that I would have gone into medical debt, I may have reconsidered getting the procedure. Restaurants display their prices up front, and it should be no different for hospitals. The lack of transparency and accountability leads to unfair billing practices that overcharge patients like me. At a time when Colorado hospitals are making record profits, 15% of Coloradans have medical debt in collections. For communities of color, that statistic increases to 1 in 4 which restricts their economic mobility and further compounds the cycle of generational poverty.

Every Coloradan should know what they are paying for before they receive an exorbitant hospital bill and should know when they are eligible for discounts and financial assistance. We all deserve the ability to access necessary hospital care without being pushed into crushing medical debt. Thank you for your time and please vote YES on HB21-1198.