

March 11, 2019

To: Oregon Senate Committee on Education

From: Evan Christopher Burton

Re: Support for SB852

Dear Members of the Committee,

My name is Evan Burton. I am 59 years old, married for 7 years, and a part time instructor at Mt. Hood Community College (MHCC) in Gresham, Oregon. I have been a part time instructor at MHCC for 15 years, and 5 years ago I became PERS eligible. I teach at no other college. I am here in support of SB852.

In an effort to demonstrate the need for this legislation, I would like to share with you a slice of my personal as well as institutional history.

Early on while an instructor, I supplemented my work at MHCC with other part time jobs. For several years I worked as a part time youth advocate for homeless youth and did eligibility and need assessments for the Homeless Youth Continuum in Portland, Oregon. This job provided decent health coverage I could afford. After saving some money, I decided to roll the dice where health insurance was concerned and to rely on my MHCC job to pay the bills while I wrote a novel and did some long distance backpacking. I lived modestly, renting rooms and trailers over the course of several years in outer east Portland, in part to understand where many of my students lived. The year I turned 50, I completed a 3 month 1,400 mile backpacking trip. I know how to survive on cous cous. A year later I met Becca while walking door-to-door for a mutual friend who was running for a local office. I learned that Becca had a diagnosed mental illness and benefited from subsidized housing while working nights part time for an agency that provided housing for clients with MH issues. Becca had medical insurance. We decided to move into a larger apartment together, and a year later, we got married. To make ends meet, and due to financial considerations, I continued to go without health insurance and supplemented my MHCC income by working a part time job installing radon mitigation systems when needed for a small company owned by a friend. It was hard on my body. And then Becca and I began to see the ACA mandate on the horizon.

In 2014, I began to do a little homework. I read the summary version (I think it was about 80 pages) of the ACA law that was to come into effect. I had many questions after reading it. Every time—and I mean every time—I spoke to someone on the state or federal level I got contradictory information. I could see the implementation of the ACA was going to be a mess. And I began to see the problem with the so-called “marriage penalty.” That is, my eligibility for the cost of insurance through the ACA would be determined by total household income as if it were mine alone. Someone from Care Oregon had assured me that the cost of ACA insurance

would be based exclusively on my income. But this analysis proved to be false--Becca and I could see that we would have to pay my health insurance out of pocket; adding me to her employer's plan would have cost over \$800 for the two of us. We couldn't swing that with our income.

Becca and I had to make some tough decisions. I could find fulltime work with a decent health plan, which would mean leaving my passion for teaching, or she could seek a job with more hours so we could afford the ACA mandate. Becca takes 5 medications a day to stabilize her MH condition. She has changed jobs several times to find the best fit for both her medical needs and for our relationship. I support and encourage her at every step. We have always understood that her medical needs are more important than my own (two years ago we borrowed \$2,000 for the copay for her hysterectomy).

With the ACA kicking in, we decided to consult a private insurance agent as a result of an article published in *The Oregonian* newspaper. The agent, at no cost to use, advised that I purchase insurance from Health Republic. I did so, at a cost of \$250 a month. I received good care at cost we could afford with little to no copays. I was diagnosed with arthritis in both of my hips, and an affordable plan was put into place to address this medical condition. A year later, Health Republic folded in the State of Oregon. In order to comply with the ACA mandate, and hopefully to deal with a couple of hip replacements down the road, I began paying for insurance through MHCC/OEBB to the tune of \$350-\$378 monthly over the past three years. I paid for a Kaiser equivalent of a bronze plan with a high deductible that I really couldn't afford to use. Visits to address the progression of my arthritis were paid out of pocket. Because of a small fund at MHCC I was able to apply quarterly for a stipend that covered roughly 25% of my insurance cost.

Due to changes to the MHCC health reimbursement this past enrollment period and because I had some seniority given the number of years I have taught at MHCC, I became one of 16 part time instructors eligible for a \$250 a month health insurance stipend. My wife had changed jobs. She is a Residential Associated at a facility for the chronically mentally ill. I became eligible for a health plan through her employer, which would cost \$140 a month, and a slightly better plan than Kaiser through MHCC, as her employer negotiated a more comprehensive plan with Kaiser—and I'd like to reiterate that this is a plan I still can't afford to use. Because both options were roughly the same, we went with my wife's plan so I could free up a little money for another deserving part time faculty who didn't make the first cut.

Given changes in the law, I could have walked away from the ACA and paying for a health plan I can't afford to use. After research and experience, I support the ACA in principle. I am now documented as having a pre-existing condition. My orthopedist sees hip replacements when I'm the age of 61, or depending on my pain threshold, with surgeries I can't afford. I have a very high tolerance for pain. In a nutshell, we decided to pay for a plan that will cover a catastrophic event—a Kaiser equivalent of a bronze plan.

I had a medical event at the end of this past January. I was taking off my pants while getting ready for bed when one of my hips gave way. I fell backward and my head hit a hinge on a closet door, creating a 3-inch gash that began to bleed profusely. Becca said I was unconscious for 30 seconds while my eyes were open and rolling. She called 911 against my advice—I was very concerned about the cost, and tried to convince my wife, the fire department EMTs, and the AMR ambulance folks I could take care of it myself with a towel and gauze, and antibiotic ointment as the wound scabbed. I relented and was taken by ambulance to Emanuel Hospital where I turned down a CAT scan and the placement of four staples in my head. Again, I was worried about the eventual cost. I was treated with gauze and tape and rolled out into a hallway and eventually released to my wife's care.

Now, our household is looking at a \$16,000 ambulance bill, a \$19,000 emergency room visit, as well as a \$500 dollar payment to the emergency physician on call. My health insurance plan covers none of this. I'm not sure how we are going to pay these bills. I have written a similar letter all of the above.

For most of my adult life I have given much to the neighborhoods where I have lived, to the city I love, to the state where I was born, and to the wonderful community college where I work part time. It would be nice to get something in return with the passage of SB 852. I'm sure I'm not alone. Thank you for hearing me today.

Sincerely,

Evan Burton

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