

# BURDENSOME AND BUREAUCRATIC

Stories of why work reporting  
requirements hurt Idahoans



## CLOSE THE GAP

I D A H O

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# JESSICA – SANDPOINT

Jessica and Patrick are in the coverage gap and are looking forward to having health coverage for the first time in years. Patrick is self-employed as a computer tech and Jessica works a few hours a week. She also has the full-time of job caring for their children—in particular, their 13-year-old daughter who was born with disabilities and needs 24/7 care. She also helps care for her father, who is a veteran with disabilities.

Medicaid expansion is going to make such a difference in their lives because Jessica was recently diagnosed with Bipolar after struggling with it for years. It went undiagnosed until a crisis left her no choice but to seek help and answers. She also experiences pain from an untreated foot injury that needs surgery, and the physical toll it's taking on her from lifting her daughter, who uses a wheelchair.



Coverage will make it possible for her to finally get treatment for her health conditions.

**Jessica is really concerned about the proposed work reporting requirements because of how many people in other states have lost coverage even though they were meeting the requirements.**

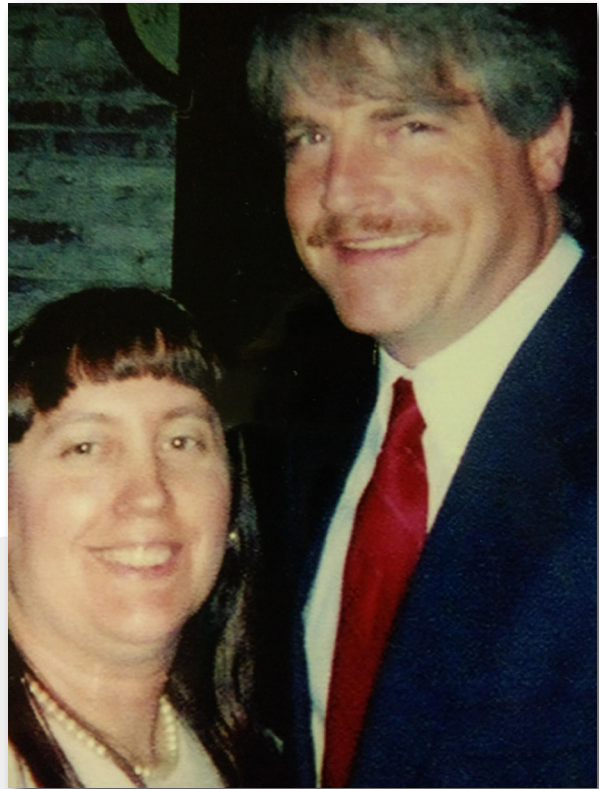
And according to the state's waiver application only the primary caregiver of children under 18 are exempt. One would still have to submit monthly documentation of hours worked. They have so much on their plate raising four children, one with disabilities and working to add such burdensome paperwork on top of it adds unnecessary stress. **What if they don't fill out all the paperwork right and get it submitted correctly?** Losing coverage could mean Jessica doesn't get treatment for her mental health and after going through crisis in the past, she doesn't want to experience it again.

# JOYCE – KUNA

Joyce and her husband are in their 50s, have two grown children and eight grandchildren. They have always taken care of themselves and have stayed healthy. They both work in retail and don't qualify for health benefits or have the income to afford private health coverage. They have worked their whole lives but are getting older and have started to experience some health problems. Joyce, who used to walk four miles a day, now has arthritis and lives in constant pain. She desperately needs to see a doctor to determine how to treat her arthritis.

They both work part time, sometimes getting 30 hours and other times barely 15. They have no control over their work schedules and often only work temporary jobs, because those are the available retail job opportunities. They never know when they may be out of a job. The older people that hand you your bag or smile at you when you come into a store – that is Joyce and her husband.

**Work reporting requirements won't help Joyce and her husband get more hours at their job, and won't help Joyce get the treatment for her arthritis that she needs to continue working.** Instead, they could lose coverage due to a bureaucratic system or if their employer doesn't schedule enough hours.



Many Idahoans don't work typical 9-5 jobs, and they often don't know if their employer will schedule enough hours for them to make ends meet. If work reporting requirements are implemented, they will have the added stress of worrying about whether they are getting enough hours to keep the health coverage that helps them stay healthy, and keep working.

Under Medicaid expansion, Joyce will finally be able to visit the doctor and get the treatment she needs for her arthritis. Her husband can get the preventative care he needs to stay healthy and keep working. The next time you go shopping, think about the person handing you back your bags and thanking you for shopping at that store. Many of them do not get healthcare benefits from their employer and could lose coverage under this policy.

# DAWN – CATALDO

Dawn lives in Cataldo, a very small rural Idaho town in Kootenai County. Throughout her life she's been a business owner, scout leader and active volunteer in the local schools and community. There are a limited number of jobs that offer health benefits in the rural Idaho community where she lives. She works odd jobs throughout the year to make ends meet. She knows from experience that it is very hard for older adults to find jobs when they are dealing with untreated medical conditions that limit their ability to meet many employment requirements—especially in rural areas like Dawn's.

She has needed a hip replacement and treatment for arthritis for years. This has made it challenging to be independent, work consistent hours, or volunteer in the community—all things that she loves and misses dearly.

**Dawn is particularly worried about how work reporting requirements disproportionately hurt rural Idahoans, particularly older adults like herself who are not yet at retirement age.** 'One size

fits all' bureaucratic policies won't fit all Idahoans. Working Idahoans will need to report fluctuations in hours, or changes in employment, in order to maintain coverage.

This can be especially problematic when your hours are very inconsistent or you have limited access to portals to submit documentation. Dawn may qualify for coverage, one month but not the next. This would mean one month of missed doctor appointments, treatment and medications, which could impede her ability to work the following month even if given enough hours by her employer. **Even if Dawn fell into a group that was exempt from work reporting requirements, she would still be required to file for and receive an exemption.** Work reporting requirements do not work for the needs of Idahoans, and only serve to punish them by taking health care coverage away for not meeting the standards.



# ANITA – BOISE

Anita has two children who were born with special needs. She runs a certified family home and provides direct care for two, sweet elderly seniors. She loves her job, but unfortunately it doesn't provide health benefits. Not only that, her income isn't high enough to qualify for tax credits so she can purchase affordable private health insurance coverage. The life of a caregiver is difficult, and Anita dedicates her energy and finances to supporting the needs of her children and clients. She works hard to ensure they live good lives, and there is not a penny or hour to spare.

Because Anita is uninsured, she hadn't visited the doctor in over five years – until a medical emergency sent her to the hospital a few months ago. She ended up needing an emergency hysterectomy to save her life and later had to go back for a second operation. As if the health conditions weren't terrifying enough, she is facing \$50,000 in medical debt and has been unable to work during her recovery. Many caregivers find themselves struggling with health conditions of their own that can make it difficult for them to help others. That's why Anita was so excited that Medicaid expansion passed last November, so caregivers like her would finally be able to get the health insurance coverage they need to stay healthy and care for others. Unfortunately, enrollment isn't coming soon enough for Anita.



**She is very concerned about the confusing restrictions and layers of bureaucracy proposed work reporting requirements bring. She is afraid, after her recent health scare that if she finds herself unable to work again that her coverage might be taken away.** Anita needs to stay healthy, so she can provide the best care for her children and clients. She can't afford to fall through the cracks again.

# A'LANA – IDAHO FALLS

Back in 2014 when tax credits became available to help purchase health insurance, A'lana went to an insurance local insurance broker for help in signing up. During this appointment, she learned that she was in the coverage gap. She was baffled—how could she make too little AND too much at the same time? She's a single working mom and volunteers in her community. She works hard as a server but her income varies and affording health coverage is simply not in the budget.

Now, she is feeling the effects of not being insured. She's been having health issues that could have been avoided with preventative care and regular doctor visits. She fears her health will go downhill before accessing coverage through Medicaid expansion causing job loss and medical bankruptcy. It is incredibly stressful to get through each



day working hard and raising children, all while managing health conditions she can't afford to treat. She is counting down the days until she can enroll in coverage through Medicaid expansion; bringing stability to her health, finances and family.

She is really concerned, however, about the new restrictions Idaho is applying for, which would add work reporting requirements to Medicaid expansion. **Work reporting requirements are not structured to take into consideration jobs with unpredictable hours like A'lana's and she fears she won't be able to comply.** Adding extra layers of paperwork will only increase burden and the chance that things will fall through the cracks. She hopes Idahoans recognize that these restrictions will cause harm and submit public comments against them.

# TAMMY – MOUNTAIN HOME

At the beginning of 2018 Tammie was in the hospital while her family watched her life hang by a thread. At 39 she was diagnosed with genetic diabetes. Her father and brother had struggled with it their whole lives. Since that time her health has gone downhill because she has been unable to manage her condition without consistent access to insulin. Her illness made it impossible for her to work, let alone afford health coverage. One day she fell badly on her ankle—she did not seek medical treatment and it never got better. She finally went to the hospital because the pain was so intense. She was told she needed an orthopedic surgeon to fix torn tendons and ligaments but she had no way to afford it. She tried to manage the pain and injury at home until she wasn't able to walk –eventually developing an infection. Then she started having black out spells. Her family got scared and called an ambulance. Seven days and five surgeries later she left the hospital with a mountain of hospital bills and the loss of her foot.

She still has no health insurance or regular access to insulin. She is scared to leave her home and lives with the fear that she will fall again and cause more devastating health problems. **How will Tammie qualify for Medicaid expansion if she can't meet the work reporting requirements?** These requirements simply layer bureaucracy onto an already complex medical situation. **Tammie needs life-saving health care Medicaid provides without jumping through hoops that make her situation even worse.** Being left out of Medicaid expansion could come at the cost of her health and her life if she doesn't access coverage soon.

# DELEENA – POCATELLO

Deleena and Stuart grew up in Pocatello and feel fortunate to be raising their three young children surrounded by family. She works as a caregiver to seniors and Idahoans with disabilities, while Stuart works hard in roofing construction. His job doesn't have benefits and it's seasonal—so their income is inconsistent.

Stuart has fibromyalgia, and they recently found out he has a birth defect, which only aggravates his back pain. It's stressful that he works such a physical job every day with untreated health conditions. Every day that goes by without health coverage is another day he lives with pain threatening his ability to work, as well as the ever-present possibility of unforeseen medical costs. Their experiences are not uncommon. Many of their extended family members fall into the coverage gap. They work hard, care for



loved ones with health conditions, while experiencing health conditions of their own and raising families. Deleena and Stuart have waited years for the coverage gap to be closed, and are counting down the days until they can go to the doctor.

Fortunately, because Medicaid expansion passed in Idaho, they will soon be able to access the treatment and medications Stuart needs. They are so grateful that Idaho voters recognized the value in health care for working families. **Idaho has many non-traditional jobs that are seasonal and in the construction industry. Workers aren't in control of their hours, and it's physically demanding.** Construction workers are crucial to our growing economy and Medicaid expansion means these hard workers can be healthy and go to a doctor. Work reporting requirements would take coverage away from many who work these types of critical jobs.



# ANGELA – TWIN FALLS

Angela is a lifelong Idahoan, and lives in Twin Falls with her husband. A few years ago, she started working on her degree in early childhood education and was employed at a day care center. She was working hard, but it all came to an abrupt halt when she started having severe health problems. Her employer didn't offer any health coverage, nor did her husband's. She came to find out she has polycystic ovarian syndrome and kidney problems, amongst other health issues. When these conditions go untreated she can get very sick, even septic, making hospitalizations necessary to save her life. These stays can last for weeks and have happened multiple times in just the last few years.

Angela can't afford the specialists she needs, especially when hospital bills pile up and quickly deplete her husband's wages, as they've fallen behind in payments. This has caused incredible amounts of stress and depression. They finally had no choice but to file medical bankruptcy – for \$1.5 million in medical debt. Now that Medicaid expansion has passed, she is looking forward to finally get her health conditions under control and no longer living in fear of another costly hospitalization.

**For Angela, work reporting requirements won't help her get back to work – it will make it impossible for her to get healthy.** Access to health care and getting her health conditions under control will mean she is finally able to go back to school, finish her degree, and get back to doing what she loves – working with kids. People across Idaho recognized how devastating situations like Angela's can be and made their voices heard when they voted for Medicaid expansion. They understood that many of their friends, neighbors, and family members were suffering needlessly. Work reporting requirements run counter to what voters wanted, causing Angela and others like her to lose health coverage.

# NICOLE – BOISE

Nichole's husband Jared was laid off about 3 years ago. Since then they have been building their business in educating children, youth, and adults and various other odd jobs. They have five children ages 0 to 15. Their family is happy and they live a healthy lifestyle.

The most difficult thing for them has been affording health insurance since Jared lost his job, and with it his health coverage. Since then, they have been in the coverage gap, Nichole and Jared have survived with relatively little healthcare.

They've weathered suspected bone breaks, debilitating viruses, continuing migraines and other issues with as little medical intervention as possible because they cannot afford it.

In the last two years both Nichole's sister and mom were diagnosed with breast cancer. Thankfully they are doing well now, but they found out that they have the BRCA 2 gene, a gene that greatly increases the odds of having a handful of various cancers. Nichole has that same gene. The recommendations for her are preventative surgeries and to get those surgeries as soon as possible. But without health insurance this is not an option. The longer Nichole goes without health coverage the greater her chance of no longer needing preventative surgeries because instead she will be fighting for her life from cancer. Her children will have to watch and wait as their mother goes through much more expensive and long-term treatment that may or may not work to save her life and, should she survive, she will be dealing with the long-term side effects and consequences of many of those treatments.



Idaho voters recognized that Idahoans in the gap contribute to our community, that they do have jobs and work hard. **All work reporting requirements will do is add red tape and make eligible hard working people lose coverage. For families like Nichole's, losing that coverage could very well mean losing the battle of cancer.**

# CAROL – NAMPA

Carol works as a home health care aide. She enjoys her job and clients, and feels she is making a difference by caring for others who need it. The downside, is the unpredictable hours and lack of health benefits. Luckily, she has been able to access annual checkups through Terry Reilly, the sliding scale fee clinic. But recently, a routine test showed that she was in the early stages of developing cancer. It was terrifying to think about, but she was assured a simple surgery would prevent cancer from developing. A simple surgery is only simple if you have the means to pay for it.

She decided to get the surgery, after being told she might be able to get financial aid to help with its cost. Then came the recovery, coupled with the stress of filling out piles of paperwork to apply for the financial assistance. It was devastating when she got denial letters along with the medical bills. She may not be



crippled by cancer, but she might be by the medical bills that helped prevent it.

Carol was recently told she would qualify for Medicaid expansion, but **if work reporting requirements are implemented she worries about those in her situation with unpredictable work hours or seasonal work that may not be able to navigate the complex paperwork the system would set up.**

# ELIZABETH – BONNER’S FERRY

Elizabeth has lived in Bonner’s Ferry her whole life. Her husband, Josh, is the manager at a local community garden while she stays home to care for her two autistic children. They also help care for Josh’s 80 year-old mother, who lives on a small social security income. Until recently, Elizabeth homeschooled her children because of the multiple therapies they needed. Her rural community lacks support services for kids with disabilities, so they have to drive hours away to get care. As the kids got older, they were able to enroll in public school but her youngest only attends part time because he has extensive special needs. Elizabeth has to stay on call when he is in school, in case there is a crisis she has to help the school handle.

Josh’s seasonal job doesn’t come with health benefits, so they have gone without health coverage. Elizabeth can’t remember the last time she had been to a doctor and hopes nothing serious is going missed. Josh, however, is diabetic and tries to manage it through his diet. He also has sleep apnea, and his lack of treatment is putting him at risk of serious complications. They live in what Elizabeth calls the “knock on wood” scenario. Keeping their fingers crossed and trying to live as healthy as possible to stave off a serious health emergency and financial crisis. They are relieved that Medicaid expansion has passed and are looking forward to Elizabeth accessing preventive care and Josh getting treatment for his health conditions before they turn critical.



**Parents with children who have special needs have enough stress in their lives, they shouldn’t have to worry about burdensome bureaucratic work reporting requirements to access health coverage.**

Parents like Josh with a seasonal job could lose coverage, if they don’t meet the hourly requirement for just one month. Healthier parents means healthier kids, and we can’t afford for parents to fall through the cracks and lose coverage.

# MARISSE – NAMPA

In 2016, two of Marisse’s children and her husband were victims of a deadly drunk driving crash. Her husband was killed and the girls needed care. After her husband’s death, life was a blur of tying up the estate, working to salvage his business, taking the girls to counseling and medical appointments, meeting with police and prosecutors, and giving the girls extra affection and comfort. **At this time in her life, she could not have worked or adhered to strict reporting requirements being proposed for Medicaid.**

She is now teaching GED classes at the College of Western Idaho. Her hours fluctuate from week to week depending on staffing needs and the seasonal nature of teaching. She is also the sole caregiver for her children one with special needs.

Marisse relies on personal care providers to work with one of her daughters. Many of these providers themselves are low income and cannot afford health coverage of their own because of their low wages. In just over a year they have had 23 caregivers, and the turnover was largely caused by a lack of health care. Some were ill much longer than they would have been if they had access to medical care, others couldn’t work when they experienced a flare up of an untreated illness, some had painful conditions that despite their best efforts affected their job performance. The benefits of having access to affordable health coverage are very real, and many of these caregivers would have been much more productive and dependable if they had access to the healthcare they needed to be healthy to work.

A lack of access to affordable health coverage has affected Marisse, and many of the people around her. **Work reporting requirements will only make it harder for them to access the care they need to stay healthy, continue working, and provide care for others.**



# SHERRY – SAINT ANTHONY

Sherry has extremely challenging health conditions. She has had chronic pain from osteoporosis and arthritis for approximately 20 years. She has to be very careful of what medications she takes because she is highly allergic to many of them. She struggles with being active and can't work. So she stays home and cares for her 30 year old son who has cerebral palsy while her other son helps financially by paying for home maintenance and repairs.

She has been denied by disability in the past and has been unable to afford the current tests needed to reapply. She doesn't remember the last time she had health insurance. In 2017 she had to go to the emergency room multiple times and is still struggling to pay the \$6000. She says it is the support of her son and the grace of her community that helps her survive. They help each other out when they are in need, share from their gardens, and eggs from their chickens.

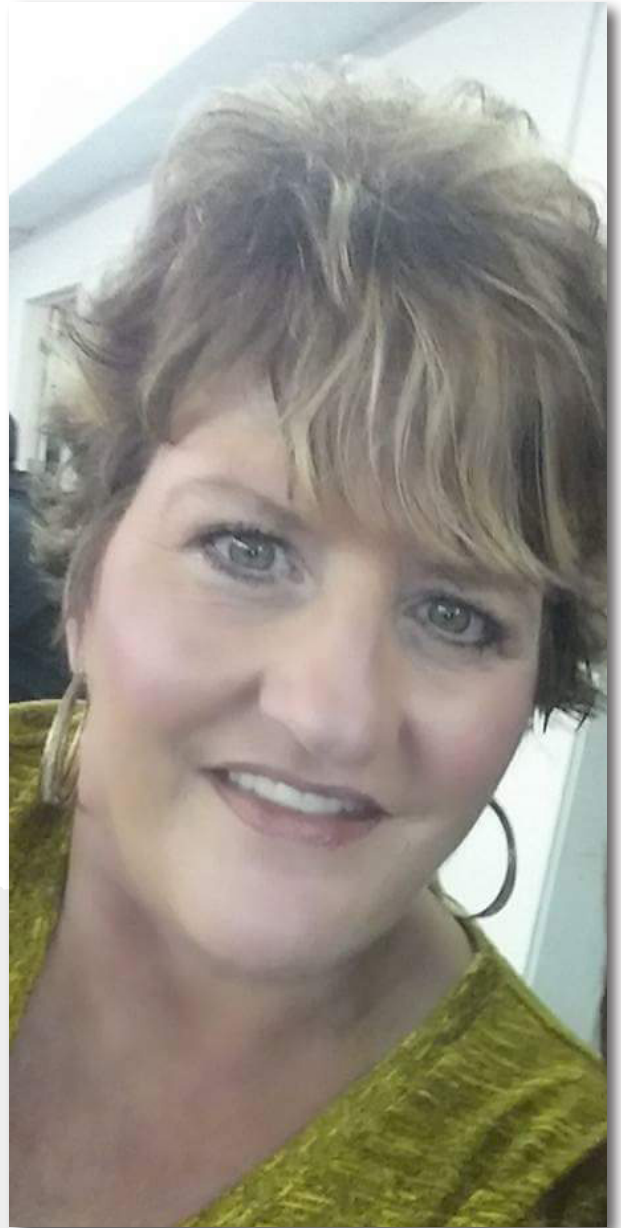
Sherry is scared that work reporting requirements will mean she won't qualify for Medicaid expansion. **Work reporting requirements would set up a bureaucratic system that puts paperwork ahead of providing health care to those who need it.**

# TERESA – SHELLEY

Teresa has her college degree and raised her children while working as an accountant. About eight years ago she had to leave her job to be the full time caregiver for her father and sister with disabilities. Neither of them had anywhere else to go and could no longer care for themselves. Although she now qualifies as running a Certified Family Home that designation does not provide health coverage. She happily cares for her loved ones but it has come at the cost of being personally unable to go to the doctor.

Teresa is struggling with health conditions that are making it increasingly difficult to care for her family. She has over \$200,000 in medical bills. She has excruciating back pain and the need for an MRI to find the cause but has been unable to come up with the upfront fee. She struggles with fibromyalgia, diverticulitis, pancreatitis, and osteoporosis that go all go untreated.

Each day is excruciating as she counts down the days until Medicaid expansion begins and she can access the care she needs. **She only hopes that the bureaucracy of work reporting requirements doesn't cause her to lose coverage.** She has seen what happened to thousands of eligible individuals in Arkansas when that state implemented work reporting requirements and is now scared that Idahoans would see even worse consequences if those were tried here.



# LACY – COEUR D' ALENE

Lacy and Noah have seen the real value health coverage has played in their lives. Their children have been covered by Medicaid and Noah has Medicare. About 10 years ago Noah contracted Lyme disease and it went undiagnosed, and therefore untreated, for six years. They had been to numerous doctors because he was always sick and no one could figure out what was causing it. When he finally was diagnosed he had to be on almost a year of IV antibiotics but the lack of treatment caused a lasting disability from brain damage. Noah is unable to work given his disability and Lacy is the main caregiver for him and their six children. She is the only family member who doesn't have health coverage in the family.



Lacy needs Medicaid to be able to stay healthy and take care of her family. Right now she cannot get preventative screenings or go to a doctor. It adds stress to their family knowing that their main caregiver doesn't have access to health coverage. If an emergency or health condition should strike, they wouldn't be able to pay for it and their family wouldn't be able to care for her or themselves. **Work reporting requirements only creates stress for families. What documentation is required to prove an exemption for caregivers? The added paperwork burden to prove an exemption only causes confusion and eligible Idahoans to fall through the cracks. Only through unmodified Medicaid expansion will we see the biggest difference for families like Lacy and Noah in Idaho.**



Close the Gap Idaho would like to thank all the Idahoans who have shared their stories. They have bravely come forward to show elected officials the value of access to affordable health coverage in Idaho. May we all come together and remember the individual people in Idaho affected by healthcare policies.



**CLOSE THE GAP**

**I D A H O**