



# RENAISSANCE HEALTH

*Revolutionizing the art of personal health care.*

August 3, 2005

The Honorable Robert E. Travaglini, Senate President  
State House – Room 330  
Boston, MA 02133

Dear President Travaglini:

I am a physician and policy analyst in the Commonwealth writing in support of the Health Care Constitutional Amendment. For the past several years as part of my role as Executive Director of the Harvard Interfaculty Program for Health Systems Improvement, I led a project interviewing dozens of uninsured residents of Massachusetts as well as four other states asking how this has affected their lives. We also spoke to many health care providers, policy makers, and advocates about their impressions of our current system. Our findings were recently published by the University of California Press in the book *Uninsured in America: Life and Death in the Land of Opportunity*.

As I am sure you know, literally hundreds of peer reviewed studies have shown that lack of health insurance is clearly linked to poorer health outcomes, including increased suffering, burden of disease, and premature death. What is perhaps more striking than the numbers are the individual stories we heard over and over across the country of how individual lives have been affected by not having insurance.

Although we found that among all the states that we visited that Massachusetts had the strongest safety net including a number of free care programs, community health centers, and volunteer clinics, we were struck by the number of people even despite these whose health or finances were poorer because they simply fell between the cracks.

One such story was told to us by Belle (not her real name), who is a 56-year-old acupuncturist in Boston. Like many who are self employed, particularly those who are older, she has found it unaffordable to purchase health insurance herself. Because of this she keeps her income intentionally below \$18,000 a year to be eligible for free care at one of the local hospitals. A few years ago she was diagnosed with breast cancer, and found out that while her hospital fees were covered by the free care plan, doctor bills were not, and while some doctors waived their fees, others still billed her and expect payments over time. While she was able to get appropriate treatment, she like many others have found

themselves saddled with thousands of dollars of medical debt, debt they will likely never be able to pay off.

We spoke here in Massachusetts to a number of young people, recently graduated from high school or college and now off their parent's policies, but unable to find jobs which offered them insurance coverage. While most were not ill, some allowed potentially serious conditions to go untreated, potentially risking irreversible bodily harm. For instance we met a young man named Jonathan, a studio musician who suffered from what sounded like kidney stones which landed him in Emergency rooms for acute treatments, but has not been able to see a doctor to figure out the underlying cause and to perhaps get treatment to prevent future attacks. With each episode, he not only suffers excruciating pain, but risks kidney damage and scarring of his urinary system.

Also caught in the cracks are many small business owners, particularly those who employ lower-wage workers. Ironically these are the employees who typically most want to offer coverage as they often see their workers almost as family, but they often are faced with higher costs and increased difficulty obtaining coverage. Martin, for instance, is a dentist who runs his own practice in the greater Boston area and employs 2 office staff. He told about his struggles to afford coverage for his staff, balanced against making enough money himself to pay his own insurance and support his family.

In the last chapter of our book, we make a point that while incremental reforms such as expanding Medicaid eligibility can help some people, what we really need is more comprehensive reform. The first step, I believe, is making a public commitment to comprehensive health care services for all residents, similar to our commitment to education. Like with education, providing a decent level of health care for all is not only good for the individual, but for our society as well.

Just as almost four centuries ago Massachusetts led the nation, and indeed the world, in making a public commitment to education for all, I strongly believe we can and should make a similar public commitment today for health care. We owe it to Jonathan, Belle, Martin, and the dozens of others I met who are needlessly suffering and risking their health, and we owe it to ourselves as a state both morally and economically. I urge you to support the Health Care Constitutional Amendment.

Yours Truly,



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