

Mary's family needed health insurance and she was running out of options. The family had been covered through her husband's employer, but then the company closed its doors. COBRA was too expensive, so Mary applied to four different insurance companies through the private market. She was denied coverage by all of them. She wasn't surprised when the companies denied her husband due to his history of cancer, but she was surprised that her daughters' asthma and allergies were considered pre-existing conditions. Mary's two oldest children have their own insurance, but Mary, her husband and their two youngest children needed access to health care and they had already been uninsured for six months.

Mary contacted the county about available health insurance options. She learned that everyone was eligible for comprehensive health care benefits. Mary and her husband were covered through the Medical Assistance for Families program, while both daughters were enrolled in the Maryland Children's Health Program (MCHP). She says the health department answered all of her questions and the family was immediately enrolled.

The coverage came at just the right time. Although her husband's cancer is in remission, he needs regular tests to check for a reoccurrence (the cancer started in 2003 and reappeared in 2006) and it was time for his next check-up. Despite currently being cancer-free, Mary's husband still deals with the aftermath of having brain cancer and the effects of other medical procedures. The pain is so intense that it takes him two hours to get ready each morning. Health insurance is important to manage his pain. Even with his pain, her husband tries to work everyday as an independent contractor—despite the unpredictable nature of the work.

Mary's family has been through a lot the past few years—the loss of employment, the family home and health insurance. Despite all of the struggles, Mary appreciates the family's current health care coverage saying, "It's a godsend that we have [health care coverage]. It works well and the only thing that I would be concerned about is if there are people who don't know that it's there, to let them know that it is there. It's helped us tremendously." Mary's husband is not only thankful for the health care coverage, but he's also grateful that the recent difficult times brought the family closer together, "That's the only thing we really have and can count on—is each other. Maybe that's the reason for some of this, so we realize what the important things are." Despite everything, Mary's husband says things are improving and the family is looking forward to better times ahead.

Rachel is a single mom who's worked up to four jobs simultaneously to make ends meet. She's received state assistance off and on over the years, but when she works multiple jobs, even though money is still tight, she makes too much to qualify for state aid. Rachel tried paying for health care through an employer, but the money taken out of each paycheck to pay for it really hurt her financially. Rachel became uninsured.

This year, Rachel decided to work one 40-hour job so she could spend more time with her sons, who are getting older and need more parental supervision. Making less money, she applied for food stamps and was told that she also qualified for health care. Being asthmatic and needing regular medication, Rachel was thrilled that she finally got health coverage after two years of being uninsured. As soon as Rachel received her insurance card, she brought her prescriptions up-to-date and has been taking her medication regularly ever since.

Before Rachel received comprehensive health care benefits, she'd have to plan ahead for doctor's visits and prescription refills. Rachel had to see her doctor every six months. At \$70 a visit, Rachel admits that it was like \$700 to her family. Rachel has to take one inhaler twice a day to avoid losing her breath. Her pharmacist allowed her to charge her medication and make payments, but by the time she paid off one prescription, it was time to get a refill.

While uninsured, Rachel had to go to the emergency room a couple of times for pneumonia and severe asthma attacks. Rachel said when she has a bad asthma attack, all she can think about is breathing. The doctors wanted to keep her in the hospital to rest, but Rachel wouldn't stay. She didn't want to lose her job, and it takes every hour of work to pay her bills. Besides, working sick is something Rachel's used to. Once she had the stomach flu and refused to go home, instead resting at work during breaks.

The extra help Rachel receives really benefits her family. Rachel knows she's blessed to have a job in this economy, but due to budget issues at her job, her pay was reduced by more than \$.60 per hour. The stress of paying bills and worrying about her family left Rachel mentally exhausted. Having health care with prescription coverage ensures that Rachel can pay her bills while remaining healthy—both physically and mentally. Simply put, Rachel said, "I am so thankful I have [health insurance]." She wouldn't know what to do without it.

Sean's newly insured! When Sean's daughter from Texas joined her father, he immediately enrolled her in the Maryland Children's Health Program (MCHP). He wasn't making a lot of money and wanted to ensure that she had health insurance. At the same time he enrolled his daughter in MCHP, Sean applied for health insurance through the Medical Assistance for Families program. Since Sean was receiving child support from his ex in Texas, he was initially denied. When it was time to renew his daughter's coverage, he reapplied for himself since the child support had stopped and he was in-between jobs. This time both daughter and father were approved. Sean's newly insured and says the health care coverage, ". . . means I can go to the doctor now anytime I want. I don't have to worry about calling my dad or my brother, trying to get money to get prescriptions filled."

Before enrolling in the state's program, Sean had been uninsured since 2006. He paid out-of-pocket for emergency room visits, doctor appointments, and dental and vision care. "It was," he says, "very expensive." Or, he would reach out to family members for help. Sean worked, but his bills exceeded his monthly income. When he moved to Maryland, he was paying \$150 per week for child support and \$100 per week for rent—and he was only making \$1,000 a month. If his employer did offer health insurance, Sean could not have afforded it. That's when the medical debt started to pile up.

Compared to past unmanageable medical debt, Sean currently owes \$39. He says his current balance is manageable when compared to a previous outstanding emergency room bill. Sean couldn't afford to make monthly payments so the hospital took money from his tax return. That's a lot of money when someone is living paycheck to paycheck.

Since his move to Maryland, Sean admits, he was initially sick a lot. He had lyme disease and, by his estimation, his fair share of colds. When he got sick, he first tried treating himself before going to the doctor. He says, "When I was sick, I was guzzling down Tylenol, Nyquil and all this stuff over-the-counter just so I could get better—taking twice the recommended dosage so I can get back to work sooner."

Now, Sean's busy locating a primary care physician and dentist. And, as his financial situation improves, Sean's looking forward to getting his health care and prescriptions, without having to go into debt.