



Crystal had been uninsured on and off since she graduated from high school. She received coverage through the state while pregnant with both of her daughters, but this coverage would end six weeks after she gave birth. In 2009, since her income had changed, she decided to reapply for comprehensive health insurance through the state and was approved for the Medical Assistance for Families program. Crystal says she's happy because, "Now I can go see the doctor and get things taken care of that have been neglected for years and years and years and years."

In 2005, while uninsured, Crystal had a toothache that was "worse than childbirth." No amount of over-the-counter medication eased the pain. She knew she needed antibiotics and the only way to get a prescription was from a doctor. Without health insurance, Crystal tried unsuccessfully to manage the pain. The tooth became so infected that the toxins drained into her stomach, making her "viciously sick." After suffering for a month, the pain got so bad that she called her mom crying. Her mom paid for her to see a dentist and get the tooth extracted. The tooth was so infected that she had to take antibiotics for two weeks before the dentist could pull it. The total bill was \$472. She doesn't know what she would have done if her mom hadn't helped with the dental bill.

Crystal had a little medical debt from a 2004 emergency room visit for a fractured ankle. She couldn't pay the bill so the hospital garnished her wages. The hospital took \$60 out of each paycheck for two-and-a-half months. This made Crystal, a single mom, think twice before going to the emergency room because she needed her full paycheck for bills. The emergency room visit was for the second fracture Crystal experienced, on the same foot, in one summer. She didn't receive treatment for the first fracture, but due to intense pain, she had to visit the emergency room for the second. Since she didn't receive treatment the first time around, the initial fracture didn't heal properly. She didn't want the doctor bill, so she just hobbled around.

Crystal says, “I’m just lucky that I’ve got insurance. There were a lot of things that got put off because I didn’t have insurance. I don’t have to worry about it; if I get sick I can go to the doctor.” This is a big change from her past care, which consisted of over-the-counter medication. She knew that medicine from the store was only masking the symptoms because she’d have a cold for a month, instead of the standard week. Since she’s been covered, she’s had doctor appointments, gotten her first new pair of glasses in six years and had two other teeth extracted. Her entire family has benefited from health care coverage. Her daughters get the medicine and physical therapy they need. Now, she says she’s “tickled” that she got health care coverage too, because, if she didn’t, she’d “be up a creek without a paddle.”

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Danielle has worked all her life, mainly billing insurance companies for medical practices. She gave birth to her youngest child in the fall of 2008 and scheduled six—instead of the standard eight—weeks of maternity leave. During her time off, Danielle’s employer merged with another company and she was fired. She discovered she was unemployed the day before she was scheduled to return to work. She was “devastated” and confused because she had always worked hard. She even worked her standard 12-hour days up to the day before her son was born.

She looks for work daily, and has applied to one job at the local hospital a total of six times. The hospital finally called her for an interview in January 2010. With her past job experience, Danielle thought she was perfect for the job, a sentiment shared by the woman who interviewed her. It took over one year for Danielle to land that interview, and she thought she nailed it. That is, until she never received a follow-up interview.

Danielle laughs as she recalls the last year-and-a-half, only because it’s been so stressful and she doesn’t know what else to do. She lost her job, her family’s health care benefits and her income. She worries about past-due bills and her children, but the one thing Danielle doesn’t have to worry about is her health care coverage. That’s because she enrolled in the Medical Assistance for Families program. Danielle and her two children are covered through state programs. Finding this free coverage was a tremendous relief since Danielle couldn’t afford the \$1,200 monthly COBRA premium.

Danielle’s son has severe asthma and sees the doctor regularly. Recently, Danielle discovered that she has three cysts on her thyroid. They’re not cancerous, but she takes medication and has to get an ultrasound to see if the medicine is succeeding in shrinking them. Without the state’s health care coverage, Danielle would have delayed her own treatment and would have had a mountain of medical debt from her son’s asthma treatments.

The future remains unclear for Danielle and her family. She may have to move in with relatives since she’s behind on her mortgage—a result of months of unemployment. The one thing she knows is that her family has health care coverage. Danielle says she’s constantly getting bills, but the medical coverage is nice because it’s one less bill she has to worry about paying.



Erin and her husband work hard to provide for their three young sons. Erin's husband works construction and his income fluctuates based on many factors, including the weather and the economy. Erin works, too, but neither job offers affordable health insurance. Since 1996, when Erin got her last physical, Erin and her husband have spent the majority of the last 14 years uninsured. Their children are their main priority, and the children's health care needs always came before the parents.

Erin briefly paid out-of-pocket for private insurance while pregnant with her oldest son. Already pregnant when she applied for coverage, she was considered "high risk" since her pregnancy was labeled a pre-existing condition, which increased the cost of the insurance. Erin

was surprised that she was "high risk" since she was a non-smoker, non-drinker and there were no pregnancy complications. After that experience, Erin and her husband paid out-of-pocket for the births of their last two sons instead of getting insurance.

For the first few years of their lives, all three sons were also uninsured. One child has asthma and a single prescription cost \$100, not to mention the cost of the doctor's visit. So Erin always had to plan ahead for medical appointments and medication. She'd hope for prescription samples and limit his dosages if he didn't seem to need it.

Dental cleanings were also expensive, but Erin and her husband knew that the children needed cleanings and check-ups, so they'd split the boys up and save for each visit. Erin and her husband went without.

Erin learned about the Maryland Children's Health Program (MCHP) through friends at work. They knew Erin's family was having a hard time, so they encouraged her to enroll. She signed the boys up, but she and her husband were initially denied coverage. During her sons' 2009 renewal, Erin learned the good news that, due to the 2007 Medicaid expansion, she and her husband

now qualified for comprehensive health care coverage through the Medical Assistance for Families program. This was huge: Erin remembered the time she had strep throat and no insurance. She postponed going to the doctor until her throat was so swollen that she couldn't swallow. She had to pay for the doctor's visit plus \$70 for a two-week prescription. Or, the time her husband was really sick and they got a hefty bill for his care. Now, if Erin or her husband gets sick, they can go to the doctor immediately and not worry about the cost. Erin says, "It [having health insurance] does help with the everyday things. If you do get sick you can go [to the doctor]. We all had the flu this year and we all went and got tested for the H1N1. We got our shots this year, so, that's always a plus." Not only do Erin and her husband get to go to the doctor and get reduced-price prescriptions, but they can see a dentist, too—something neither of them has done in years.

With health coverage, Erin worries a lot less. She no longer worries about her husband getting injured on the job and not having insurance. She says having access to health care, "... gives you that freedom to be less stressed. And if I need to go to the doctor I'm not going to be, 'Where am I getting this money from?' I can just go and not worry about it. Or, if I have to pick up a prescription it's not, 'I'm not going to have the money I'm going to have to take it away from groceries.'" She says she can live her life now knowing she has health care, "When the kids got insurance, it was great. When we got insurance, it was like a sigh of relief, like, wow, we are all taken care of."



Farrah and her husband moved their six kids from West Virginia for a promising new job for Farrah, which was scheduled to start in June. After the family had already moved, Farrah learned that the new job wouldn't begin until October. So Farrah took a job as a waitress while waiting for her new job to start. She was working at a local restaurant when her youngest child got sick. Farrah took her daughter to the hospital where she was diagnosed with pneumonia. The hospital staff told Farrah about available health care coverage through the state, and Farrah went directly from the hospital to apply.

Farrah's entire family was eligible for coverage. The parents are enrolled in the Medical Assistance for Families program, while the children are covered through the Maryland Children's Health Program (MCHP). It was a relief to get health insurance because things weren't working out in Maryland as Farrah had expected. She was currently working for a standard waitress salary plus tips, and the job that drew the family from West Virginia to Maryland was no longer an option. Although Farrah has since found a new job, other than waiting tables, her employer's family coverage plan is too expensive.

The state's programs have been a big blessing for Farrah's family. She has one child with asthma, another with a cleft palette, and yet another diagnosed with bipolar disorder—all health issues that require medical attention and medication. Farrah says that all family members are currently healthy, but with six kids, there's always something going on or somebody who's sick.

Farrah was happy when the kids received coverage but was surprised that the parents also qualified. She knew that her home state, West Virginia, did not extend the same benefits to parents. Now with the entire family covered, there's one less thing for Farrah to worry about and that's important to a family of eight.

As a single mom with three children, Michelle knows how to work hard and stretch a dollar. After her divorce 14 years ago, Michelle started cleaning people's homes for income; a job that doesn't pay much money, but one she loves because of the wonderful families for which she works. As the relationships with her clients developed over the years, they became more like family than employers. In fact, Michelle's lovely home is owned by one of her clients and she's decorated it beautifully with gifts from others or yard sale finds that she's repaired and repainted. There's no end to Michelle's creativity or giving spirit. When Michelle's not working, she's volunteering at her church or dressing up as a clown for local fundraisers.

Although Michelle says she's a healthy person, she needed five surgeries in the span of three years. Ever since then, she's back to being healthy again. It all started with a sudden kidney stone attack on a Thursday afternoon. If Michelle had insurance, she would have gone to the doctor immediately, but without health care coverage, she tried to relieve the pain and sickness by taking a bath. The pain was so intense that Michelle screamed out in agony - scaring her kids. She finally went to the emergency room Friday because nothing she did eased the pain. Michelle was diagnosed with gas and sent home. Michelle was back in the emergency room on Saturday and was diagnosed with kidney stones. She was given medicine, which made her sicker, and a strainer and was sent home to pass the stone. Michelle was back in the emergency room for a third time on Sunday when the hospital staff discovered the stone was too big to pass and Michelle had surgery on Monday. Michelle says the multiple trips to the emergency room added up to one large "medical bill that was absolutely outrageous."

Two months after her kidney stone surgery, Michelle needed gall stone surgery, followed by a diagnosis of cervical cancer, a knee operation and a hysterectomy. After Michelle's first surgery, she applied for health care through the state and received coverage. Michelle says having the health insurance was important because if she didn't have it, she couldn't have paid for all her surgeries or follow-up care and would have been "completely drowned in medical bills."

Michelle lost her coverage for a short time when her son moved in with his father for five months. She wasn't contacted to verify that her son had moved out or informed that her benefits were ending. When her son moved back in with her, Michelle went to get a new Maryland Children's Health Program (MCHP) card for him and was asked if she'd like to reapply for the Medical Assistance for Families program. She did and was approved.

Michelle says, "It's been a relief [having health insurance]. It's been a stress reliever. It's peace of mind." She knows that if she's injured, she can go to a doctor instead of worrying about the costs, "I know I'm covered and that's a good feeling." If Michelle did get injured, she couldn't work and wouldn't have income to pay her bills.

She says that when someone lives in the income bracket she's in, it's a struggle to pay for unexpected expenses like car repairs or health care. Although she's thankful for the comprehensive health care coverage she currently receives, she doesn't know what the future holds for her since her youngest child is almost 18 (the maximum age eligible for MCHP) and she's not having anymore kids (parents in the Medical Assistance for Families program have to have a child enrolled through MCHP). Since her job doesn't offer health care and she can't afford to pay for coverage, she wonders what will happen if a medical emergency happens and she's doesn't have the same health benefits.

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Rosanna's counting the days to December 2012. If everything goes according to plan, and she receives a scholarship, all of Rosanna's hard work will pay off when she graduates with a nursing degree. For the past three years, she's gone to school part-time to complete the prerequisites for the nursing program. After trying to start her own cleaning business in Kentucky, Rosanna settled on nursing because, she says, "I get joy out of helping people, tending to them when they are sick ... trying to make them feel better. I'm compassionate, I'm caring and it's a perfect field for me." Rosanna wants to help people as a nurse, but right now, Rosanna needs help with health insurance for herself and her daughters.

Due to financial instability, Rosanna applied for benefits in 2009. The whole family now has health care coverage through Maryland programs: Rosanna, with the Medical Assistance for Families program and her daughters, through the Maryland Children's Health Program (MCHP). Since Rosanna already has medical debt from the time when she was uninsured, she knows that if she and the girls aren't covered, one trip to the emergency room could affect her schooling and future plans. Rosanna knows emergencies can happen, but she doesn't want her career postponed due to a medical crisis. Her new career means a new start for her and her daughters. She says, "I don't want a job, I want a career. I want something to where I'm able to take care of her [points to her daughter], I'm able to take care of her sister. I don't want to be living at home with my dad. I don't want to be on medical assistance. I don't want to be on cash assistance. I want to take care of myself, but it's just like a little bit at a time I'm trying to get there."

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Right now, the health coverage offers peace of mind. The entire family is healthy and gets yearly check-ups. "I'm trying," Rosanna says as she discusses the barriers she's overcome to get where she

is. And, with a new career in sight, she can focus on the future knowing her family has health insurance.



Like so many other uninsured Marylanders, Trina went to the emergency room when severe medical problems wouldn't go away. She knew the hospital didn't require pre-payment and it couldn't deny treatment. But, the hospital's care isn't free, and Trina knew the bill would arrive. She carries \$2,000 to \$3,000 in medical debt due to emergency room visits—debt that she can't afford, but treatment that she couldn't afford to go without.

While she was uninsured, a boil appeared on Trina's back—a boil she tried to treat with salve a friend got from a doctor. After three weeks of pain, and with no sign the boil was shrinking, Trina called her mom. Knowing Trina would have to go to the local emergency room, her mom told her, "You know you're going to have to pay for this. It's not going to be free." Trina did go to the emergency room and had the boil drained. It wasn't free, but her options had run out.

Now, Trina no longer worries about costly emergency room costs because she is covered through the Medical Assistance for Families program. Trina now sees her doctor for any illness. As a single mom with four children, having good health is invaluable. Trina knows she needs to be healthy to take care of her kids, and the health insurance allows her to keep up on her yearly exams and treat her allergies and migraines.

Trina did have health insurance through a previous employer, but the premium and co-payments were expensive. As she searches for new employment while taking classes at the local community college for early childhood education, Trina can rest knowing that if another medical emergency happens, like her boil, she won't have to suffer for three weeks to get medical care.