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Community Health & Research Center

Michigan House Appropriations Committee

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May 2nd, 2018

To the Esteemed Members of the Michigan House Appropriations Committee:

As the largest Arab American community nonprofit organization in the United States, we write to you in opposition to Senate Bill 897, legislation that would implement a work requirement on Healthy Michigan Plan beneficiaries of 29 hours per week. Despite exemptions made for certain populations through the Senate Competitiveness Committee process, this bill would ultimately leave thousands of Michiganders without health coverage and would significantly jeopardize the health and wellbeing of our communities.

ACCESS has been a Navigator grantee since the first open enrollment period in 2013, at the start of the Affordable Care Act. With the ACA came the expansion of Medicaid in the state of Michigan, a program that has connected nearly 700,000 Michiganders to health care, while also boosting Michigan's economy.

Over the past 5 years, our program has been able to connect thousands of clients in our community including low-income communities, communities of color and some of our state's most vulnerable, to health care and enrollment-related services, from coverage to care. Access to affordable coverage has made a lasting impact on the lives of those we've served. Radical, at times life-saving improvements in their health and wellness have made it possible for our clients to reach their lifelong goals of pursuing higher education, finding and retaining employment, and ultimately leading empowered and fulfilled lives.

We have heard countless stories that share this theme, stories that demonstrate that without access to health care, individuals and communities, especially those who face additional socioeconomic challenges and barriers, will struggle to achieve the fulfillment and self-sufficiency that they so strongly desire. This is the rule, not the exception.

One story that comes to mind is that of a client named May, a hair dresser from Sterling Heights. After dealing with the devastating loss of her son to brain cancer, she herself was diagnosed with breast cancer in 2015 and was uninsured, leaving her to wonder how she would be able to afford treatment. Fighting the disease became her fulltime job – she had to stop working at the salon, which was her primary source of income. May came to ACCESS for assistance, and we helped her apply for and enroll in the Healthy Michigan Plan. Coverage opened the door for her to seek treatment and eventually undergo a successful surgery. Access to consistent and affordable

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coverage not only saved May's life, but also allowed her to get healthy enough to return to work, and she is currently in the process of opening her own hair salon.

We have seen firsthand how access to affordable health care removes some of the many barriers that exist in Michiganders' ability to gain meaningful employment. At the ACCESS medical center, we see a large patient population that is dealing with chronic health conditions. Our behavioral health programs also provide culturally competent treatment to a growing number of community members facing substance abuse and mental health disorders. Because of their conditions, these populations face a number of additional and specific barriers in gaining consistent and fulltime employment. This inconsistency could cause these populations, along with many others, to move in and out of eligibility, potentially locking them out of coverage and posing a risk far too large for the health and wellbeing of our citizens.

This loss of coverage would also cause rises in health care expenditures such as emergency room visits and uncompensated care. At ACCESS, we serve anyone and everyone who walks through our doors regardless of who they are, where they come from, and their ability to pay. But this practice has financial implications on our agency and others clinics, hospitals and health centers across the state. A larger uninsured population would further drive up costs in those areas and in the long term, is not sustainable.

Early estimates that show the administrative cost for implementing this program to be in the hundreds of millions, costs ultimately coming from taxpayer dollars. The bureaucracy, paperwork and administrative burden would fall onto individuals and families, where simply missing a letter in the mail or mistakes with paperwork could cost people their health care. The vast majority of people enrolled in the Healthy Michigan Plan are either working or unable to work, and we have yet to understand the nature and extent of the barriers faced by those who are out of work. We as a state should seek to answer these questions, and appropriations should go towards employment services, workforce training and other programs that would empower Michiganders rather than taking their coverage, likely making them sicker and less fit to work.

We hope that you will consider our community's perspectives and experiences as this conversation continues. Thank you for your consideration.

Sincerely,

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