

Sample Op-Ed for OHIO: The Cost of Failure on Health Care

When it comes to health care, the status quo is failing American families. Too many insurance company denials. Suffocating costs. Too many uninsured. But if Congress fails to enact reform, things won't just stay the same—they'll get worse. And a recent report released by the Urban Institute underscores just how much worse things will get for our state.

The Urban Institute report indicates that unless we enact changes now, those who manage to keep their coverage will pay an even heftier price over the next 10 years, with individual and family spending on health care increasing by 37% in Ohio by 2019. Nationally, up to 57 million Americans could find themselves uninsured. And this, according to the report, is the best case scenario. In Ohio alone, delaying health care reform would hit our communities hard, with the estimated number of uninsured in Ohio skyrocketing to nearly 1.5 million.

Though working families would no doubt be among those most impacted by a failure to enact reform, in the best case, Ohio businesses would see their premiums balloon by 61.1%.

It's hard to believe we're talking about the world's wealthiest country. If we fail to act, even the so-called best-case scenario laid out in the report would do little to help already struggling working families. The evidence for immediate reform is devastatingly clear.

But we can't settle for just any reform. We have to enact genuine reform that holds down costs and keeps insurance companies honest. As it stands, insurance companies have a stranglehold on our health care system, driving up costs and coming between middle class Americans and the care they need.

Polls show that the majority of Americans and close to 75 percent of doctors favor including a public health insurance option in reform. By injecting competition, a robust public option is the best way to control costs and guarantee quality health care. More competition and choice is in the best interest of consumers and, ultimately, in the best interest of our economy. That's not a new idea. It's capitalism 101.

When it comes to reform, employers have a part to play too. It's only right that employers pay their fair share by providing health coverage to employees or paying a meaningful fee into the system.

And with so many families struggling to afford the coverage they have now, it would be a grave mistake to impose any new taxes on middle-class benefits.

In recent months, we've seen a rising tide of anger directed at insurance companies, fueled in large part by their own worst practices. As insurance companies rake in record

profits and dole out extravagant bonus packages to top executives, they continue to deny care to ordinary Americans.

For all of those who have been denied coverage and refused care, it's not just about the money—it's a matter of life and death.

In response, people in Ohio and across the country are raising their voices to demand that insurance companies renounce these worst practices. Insurance companies cannot be allowed to stand between the patient and her/his doctor.

Perhaps even more important, it is impermissible for insurance companies to deny or drop coverage due to pre-existing medical conditions. In every state, rising numbers of Americans are unable to access the coverage they need on the basis of pre-existing conditions. Everyday more and more of these stories come to light, with insurance companies using such "conditions" as pregnancy and even acne to justify withholding coverage. Many insurance companies even have policies that reward employees who deny care or reject claims.

When it comes to enacting health care reform, it's clear that failure is simply not an option. Doing nothing now will cost us down the road. The longer Congress waits to pass reform, the worse the situation gets for everyone—Ohio's middle-class families, employers and our economy.

It's time for Congress to act, and act swiftly. The stark reality is that we literally can't afford to wait.