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NEW JERSEY



Lisa Yostman, appointed to serve on the health coverage program board, gets some advice from daughter Sarah as she testifies before the Legislative Oversight Committee.

Mom of 2 sick kids urges legislators to amend health insurance reforms

By DONNA LEISNER

Lisa Yostman knows more about health care than your average constituent.

The 38-year-old Fairlawn mother has two young children with cystic fibrosis, a genetic lung disease characterized by recurring infections and pneumonia.

That's not the only thing that qualifies her as an expert. Gov. Christie Whitman appointed her a year ago to a state council that oversees the health benefit plans for individuals who buy their own insurance because they don't fit in the job market.

Yostman told a House legislative oversight committee looking into state health insurance reform that there is a gap in coverage for families like hers with high out-of-pocket medication costs for sick children.

Because her PreCare HMO plan only covers 80 percent of the cost of prescription drugs, Yostman has out-of-pocket medication expenses of \$1,300 a month. She said she has creditors calling all the time and her family almost lost their home.

"We are \$400 up to our ears. As a hardworking middle-class family, we have been left to fend for ourselves," said Yostman. She recently succeeded the Legislature's annual health insurance reform package to include a co-pay for prescription

drugs or a cap on the maximum amount of expenses families have to pay for prescription drugs.

She cited a number of state programs that are supposed to help middle- and low-income families, but said most either didn't apply to young children, had income limits that would not help her family or required filling out complex forms or some other requirement. She then waited for an audience to find out whether the funds qualified.

"They were really in a gap for children with special needs under the age of 18," said Yostman, whose husband sells picture frames and photo albums to professional photographers.

The Yostmans are among 22,000 people covered by a program called Health Access, which allows middle-income families to get state subsidies that make health insurance more affordable.

The Yostmans pay 80 percent of coverage and the state pays the balance of the policy, which costs \$670 a month.

But that program will be unable to add any more families because it has already filled up, the charity says, due to a lack of legislation.

Whitman had wanted to expand the program to target children and their families. But the charity can't bill now awaiting an Assembly vote Monday provide only enough money over two years to continue offering subsidies to those already enrolled.

Whitman, by now, cannot expand the program to enroll 30,000 children in Children First, as she wanted. She said earlier this week she is still committed to finding the money for the program.

Yostman pointed out it will still not solve her problem of a 50 percent prescription drug co-payment before coverage. With WHRM HEP the same health plan the state is currently offering in the Access program and in the individual market.

Since the individual health coverage program began in August of 1993, 188,130 people have enrolled through one of 34 insurance companies. Before the reforms, only Blue Cross and Blue Shield offered coverage in the individual market.

Legislators and other witnesses questioned why insurance companies that entered the market with low rates could not keep them low and then raised rates several times.

Kevin O'Leary, executive director of the Individual Health Insurance Board, said the point of having so many companies in the market is so that consumers can shop around and switch companies when the rates are raised too high.

He said legislation he believes reforms in the individual market are working. "It's a new market. There are things in the road along the way," O'Leary said.