What Health Care Reform Means to Thinbloods

March 24, 2010 By Shawn Decker

So the Health Care Bill finally passed the House, to much chagrin and fanfare. It's one of those two America moments; you either love it or hate it. Like the hit TV series Alf, or those corndogs wrapped in pancakes.

For fear of persecution, I won't say how I feel about an awkward alien that eats cats or the corndog on steroids. As for health care? Well, I wrote a column for Poz that explained why I'm in the love it category when it comes to the need for something new. My monthly premium is $1400 because I had the misfortune of being born with hemophilia, infected with HIV as a kid and was unintentionally kicked off my parents' coverage (around the time my HIV diagnosis progressed to an AIDS diagnosis) when I was supposed to be covered for life as a disabled child.

You win some, you lose some.

The Bill that passed the House isn't perfect, but at least it's the promise of something different than what's happening now. Which is that some kids with hemophilia- I call us all thinbloods- reach their lifetime insurance caps before they reach high school, or even junior high school. Here's how the National Hemophilia Foundation breaks down the benefits of the eventual passage of health care reform.

- **Eliminate lifetime caps in all - new and existing - health insurance plans 6 months after enactment**
- **Eliminate rescissions in all health insurance plans 6 months after enactment**
- **Extend coverage for dependents - who could stay on a parent or guardian's insurance plan until age 26 - in all health insurance plans 6 months after enactment**
- **Restrict annual caps in new plans before 2014, and then eliminate them in all new plans and existing group plans in 2014**
- **Eliminate pre-existing conditions exclusions for children in new plans 6 months after enactment, and for all people in all plans in 2014**

For more on advocacy for people living with hemophilia, visit the Hemophilia Federation of America

(HFA).

The argument I'm hearing most is that people simply don't want to pay more in taxes. That this will affect the job market in a negative way. My argument is that our health care system lags sorely behind many other countries. It's time to apply methods used elsewhere- and perfect them. Make other countries want to adopt what we're doing. None of us wants to hear- or live through- stories about how the current model chews up people and spits them out, all for playing by the rules that have been laid out...

I try to view this whole "debate" with an open mind, but I only have one set of eyes. They are not the eyes of a policy wonk or an expert on politics. They are just the eyes of someone who has experienced a lot of sick days in their life. And the fact is that, for the most part, I'm getting by, thanks to a convoluted system that has mandated the use of convoluted measures.

Based on the Health Care Reform Bill, in 2014 I may be assessed on my actual health, instead of my impressive medical resume, which is the equivalent of applying for a short-order cook position at Chile's with multiple manslaughter convictions on your record. But my own personal situation isn't really why I support reform. As I said, I get by. It's what is happening to others. I believe there is a way to deal with the problems we've created in health care- and I hope the message of prevention and what we can all do to take better care of ourselves, becomes part of the dialogue.

If it does?

Than that would be a big f'ing deal. Because it would actually make cents *and* sense.

Positively Yours,
Shawn

Right now Bob McDonnell, the new Governor of Virginia, is signing documents that could make the passage of Health Care Reform null and void in the Commonwealth of Virginia. (See the Richmond Times article for full-story.)

Be sure to check out Poz Blogger Larry Bryant's recent entry on Health Care Reform, and get well, Oriol, a fellow Poz blogger who's been under the weather.

Shawn on: ***Shawn's Sick Days in 2010: 6*** *Shawn's book Decker's Daily Coffee*

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