

Dear Members of Insurance and Real Estate of the Connecticut General Assembly:

My name is Alyssa McDonnell, I am a lifelong resident of Bolton, Connecticut. I am currently a Masters' student at the University of Connecticut. I'm writing today with strong support of S.B. 842: An Act Concerning Health Insurance and Health Care In Connecticut.

In the fall of 2018, after I graduated from college, I was diagnosed with Ulcerative Colitis. Ulcerative Colitis is defined by the Crohns & Colitis Foundation as a "chronic disease of the large intestine, in which the lining of the colon becomes inflamed and develops tiny open sores, or ulcers. This condition is the result of your immune system's overactive response." Ulcerative colitis left me unable to function with day to day life. I was so anemic that I would be out of breath from walking upstairs. I would sit all day in pain with a heating pad on my back and a pillow on my abdomen. The fall I was diagnosed I had a colonoscopy, was on steroids, anti-inflammatory medications, had blood transfusions (6 units), and was hospitalized twice. Eventually, my gastroenterologist referred me to a doctor that specializes in Ulcerative Colitis who prescribed me Remicade (Infliximibab), a biologic immunosuppressant. Since then, I receive Remicade infusions through an IV once a month. This, along with other medications, has put me in remission and made it possible for me to have my life back.

While this initial onset of UC was probably one of the most difficult times in my life, it's also a time where I realized just how fortunate I was to have high quality insurance. I have health insurance through my parents jobs at the State of Connecticut. Because of this insurance, I was able to get the tests and treatments medically necessary without building up debt. This gave me the ability make decisions solely based on what was medically necessary rather than the costs of treatment. Without insurance, Remicade infusions cost thousands of dollars- and I'm getting these on a monthly basis indefinitely. Even with cost assistance programs, the cost of a nurse administering the medication and IV remains. With my health insurance through the State of Connecticut plan, my doctor has been able to give me the dosage I need to be in remission and reduce the risk I will need future surgeries.

I'll have Ulcerative Colitis the rest of my life. My insurance, however, will stop when I turn 26 in 2022. When I'm 26 I'll still need monthly infusions, I'll still need countless blood draws, and I'll still need colonoscopies every-other year. Chronic illness has presented an uncertainty in my life I never would have imagined, uncertainty about the future of my health and uncertainty about my future access to healthcare. Passing S.B. 842 would take away the uncertainty about this one thing. It means I could make career choices separate from medical choices. A public option would make working at a small-business or non-profit in Connecticut possible for someone who has to worry about their insurance coverage. It creates a safety net, so that if left unemployed or under employed I'm not also left without medical care.

We're all living through a health crisis paired with an economic crisis- a scenario in which someone loses their health insurance at the same time they could suddenly build up medical debt is all too common. At the same time, we're faced with a novel virus which we don't yet understand the long-term health effects of. S.B. 842 will make health care equitable, dependable, and affordable by creating new public options for health insurance in our state. We need a public option in Connecticut now, I urge the Committee and Connecticut lawmakers to support S.B. 842 this session to expand high-quality, dependable, and affordable health care by creating new public options for health insurance.

Thank you for your time,  
Alyssa McDonnell

