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CONTACT:  
Vera Mayer  
DC Coalition on  
Long-Term Care  
c/o IONA Senior Services  
4125 Albemarle St., NW  
Washington, DC 20016  
(202) 895-9435  
fax (202) 895-0244  
vmayer@iona.org

## D. C. Coalition on Long Term Care

September 10, 2009

Mrs. Leslie Johnson  
Hearing Officer  
DC Department of Insurance, Securities  
And Banking (DISB)  
810 First Street, NE, #701  
Washington DC 20002

Dear Mrs. Johnson:

The DC Coalition on Long Term Care regrets that it is unable to testify in person at the September 10, 2009 hearing on the surplus of the Group Hospitalization and Medical Services, Inc. We respectfully request that this letter be included in the record of the hearing.

The consumers advocates and health care providers of the DC Coalition on Long Term Care have worked with the DC government since 1995 to develop options for low-income DC seniors and persons with disabilities with chronic long term care health needs to remain in their homes and their community. The Coalition's advocacy has helped to extend Medicaid personal care in the home and to develop an assisted living residence level of care. However, additional programs are necessary to prevent unnecessary hospitalization and institutionalization.

The hearings the hearings to determine whether Group Hospital and medical Services (DC CareFirst) has excessive surplus to reinvest in unmet community health needs is especially timely due to the current economic crisis and the many unmet District health needs. The first objective should be to lower the current DC CareFirst premiums and additional charges which are burdensome to existing customers and unaffordable to many new applicants. Another vital objective is the elimination of the current \$1500 drug limit which forces subscribers to buy drugs above the limit out of pocket – many cannot afford to do so and endanger their health.


There are many unmet health needs which CareFirst could help in fulfillment of its legal obligations to the District. Here is a very short list:

- Most home care workers who care for sick seniors and persons with disabilities cannot afford health care for themselves and rely on episodic emergency room services when they become very sick. One way to help is for CareFirst to financially assist the District's new program, Healthy DC, that will provide health insurance for uninsured DC residents with incomes 200-400% of poverty. This would help cover full-time home care workers whose income is above the Alliance or Medicaid.

- DC Seniors have very limited access to mental health services.
- There is only one outpatient day treatment program in the city for them. Many are too disabled to make the required call themselves as required or to actually attend the clinic. An innovative model programs exist which provides mobile outreach teams to go to the patients' homes, build trust and provide in-home treatment.
- A sizeable number of DC seniors do not qualify for Medicaid dental services and cannot afford to pay for regular dental care due to their low incomes, despite the direct connection of dental health problems with cardiac and overall general health. A program which served this need would prevent additional health problems.
- Wellness Centers for seniors exist throughout the city. The health and well being of the seniors who participate can be improved by funding education together with RN monitoring of blood pressure and blood sugar for many seniors who have chronic illnesses such as diabetes and hypertension. These sites could also be linked to "off hours urgent care" to handle minor problems without going to the emergency room.
- DC Alliance is currently totally dependent on local funding. Surplus funds could enable the program to increase its benefits and coverage for low-income DC residents.
- HIV is a principal health problem for a wide range of DC residents. . The drugs which have enabled patients to live with HIV as a chronic illness instead of terminal are expensive and out of reach for the uninsured who do not qualify for Whitman Walker, Medicaid or Medicare. CareFirst could make an important contribution here.

Thank you very much for including this letter in the official record of the hearing.

Sincerely,

A handwritten signature in cursive script that reads "Vera Mayer".

Vera Waltman Mayer  
Coordinator