



Office of the President

Selected Speeches

Maryland Healthcare Exchange

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Saratoga Building

Good morning. I'm Jay Perman, president of the University of Maryland, Baltimore, and I'm delighted to help the Maryland Health Benefit Exchange and the Baltimore City Health Department kick off College Enrollment Week.

I welcome Rep. Elijah Cummings and Rep. John Sarbanes, and I congratulate you both on your reelections last week. Sen. Catherine Pugh—Baltimore's mayor-elect—has joined us. Sen. Pugh, I congratulate you as well on last week's win. We all look forward to your leadership of our great city.

I welcome Maryland Secretary of Health and Mental Hygiene Van Mitchell, Baltimore City Health Commissioner Leana Wen, Jonathan Kromm, acting director of the Maryland Health Benefit Exchange, and Traci Kodeck, CEO of HealthCare Access Maryland.

As a university president and as a physician both, you might expect that I have some strong opinions on how important it is that we have good, thoughtful health insurance policy in this state and this nation, and that we ensure that all people have access to fair and appropriate coverage. I hope you'll indulge me in a quick story that I think supports my points.

Some of you know that I conduct a pediatric clinic every week at the University of Maryland Medical Center. In the clinic, I'm joined by students from every UMB school—not just medicine and nursing, but pharmacy and dentistry and social work and law.

And I want to relay the story of a young girl whom my colleagues just saw in clinic last week—a girl I'll call Leah. Leah was a 27-week preemie, born with serious feeding challenges. She has tremendous difficulty eating enough to maintain her weight.

These problems have persisted over the years; Leah has just turned 6. About half of her daily calories come from meals and from nutritional supplements. The other half comes from feeding tubes administered by her parents overnight, and supervised by a nurse once a week.

This is an expensive undertaking—the nurse’s home visit; renting and maintaining the feeding equipment; the nutritional product itself. Everything together can run at least \$500 a week. Leah is covered by her parents’ private insurance. Both parents work, and the family’s modest income doesn’t qualify for Medicaid.

Earlier this year, the family’s insurer notified us that this tube feeding—which, again, is supplying half of Leah’s calories—won’t be covered any longer. None of it. For all patients, this feeding protocol is now excluded. For Leah, that means no more overnight feedings.

And now the progress that Leah had been making up to the point of the insurance exclusion—that progress has slowly started to reverse. In six months, Leah lost one pound when she should have gained three. She’s already below the 10th percentile for weight.

So now Leah’s stepmother is planning to quit her full-time job and go part-time—so that she can work with Leah over breakfast in the morning, and then join her for lunch at school.

Think about the false economy this situation is perpetuating. The family’s medical expenses are going way up. Their income will drop significantly with a part-time job versus full-time. And I’m confident we’ll *still* have to admit Leah to the hospital for more intensive care—a *huge* expense, an *avoidable* expense.

This is the impact of insurance. We need thoughtful conversations not only around getting all people insured, but also getting them the right *kind* of coverage—*humane* coverage.

In my clinic, UMB’s students see first-hand how critical it is that patients have good insurance—how acutely it can affect their health outcomes. Our students must have the same opportunity for the best, most appropriate care. Even if they’re not sick. Even if they think they’re invincible—as so many of our younger people do.

Now more than ever, we need to work—even harder, even longer—to ensure robust and fair coverage for all of Maryland’s citizens. And so I’m delighted to join you for the College Enrollment Kickoff and to introduce a great friend to UMB and to me, Baltimore City’s Health Commissioner, Dr. Leana Wen.

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