



The Cost of Care

Can you afford to be sick?

Being sick is expensive. According to the National Coalition on Health Care, a large nonpartisan organization working to improve health care in America, health care spending in the United States reached \$2.4 trillion in 2008. The Coalition reports that employer health insurance premiums increased by 5 percent during 2008—two times the rate of inflation. The annual premium for an employer health plan covering a family of four averaged nearly \$12,700; the annual premium for single coverage averaged more than \$4,700.

A national poll released in October 2008 by the Kaiser Family Foundation, a California-based nonprofit that researches health policy, found that about a third of Americans surveyed reported that their family had problems paying medical bills in the past year, and that almost one in five said they had medical bills of more than \$1,000. An estimated 1.5 million families lose their homes to foreclosure every year due to unaffordable medical costs.

Doctors, patients, employers, employees, and government officials often disagree on the best way to address these problems. Some believe in price controls, and others favor free market competition.

There is no agreement on a single solution, and my purpose here isn't to argue one way or another. Maybe a combination of approaches will be the best solution. What we do know is that many people literally can't afford to be sick.

This is particularly true for those with neurological conditions—which are often chronic and require ongoing treatment—and for low-income patients who need multiple medications. Unfortunately, many people will skimp on treatment when money is tight. Research conducted by the RAND corporation, a nonprofit policy analysis group, found that doubling patients' prescription drug copayments reduced their use of medications by 25 to 45 percent. Even people trying to manage chronic conditions such as diabetes cut their drug use between 8 and 23 percent. Needless to say this is dangerous.

In this issue of *Neurology Now* we have several articles that discuss the cost of care. In "Good Golly, Miss Holly!" (page 12) we interview actress and Parkinson's disease advocate Holly Robinson Peete. Her organization, Hollyrod, was created when Holly and her husband began paying people's drug bills because insurance companies weren't covering them. As Holly says, "The health care crisis deeply affects those who are disadvantaged, or disenfranchised, when they get Parkinson's."

In Penny Wise (page 32), we investigate whether or not hiring a medical billing advocate might be worth it for people facing stacks of bills. One man we interviewed faced a charge of \$183,000 for treatment for the meningitis and other infections that were causing his headaches. Uninsured at the time and concerned that the debt could put his home at risk, he decided to hire a medical billing advocate.

So what can you do to stay physically and fiscally healthy? Remember that preventing disease in the first place is always less costly (financially and emotionally) than treating disease. While not all neurological diseases are preventable, a number of them potentially are. And for most, with proper care, complications can be prevented or lessened—which

costs less in the long run. Some of the basics relate to paying attention to good nutrition, exercising, avoiding unhealthy habits like smoking, and treating hypertension and diabetes.

If you would like to share your thoughts on the cost of managing a neurological condition, e-mail us at neurologynow@lwwny.com.

My very best,

Robin L. Brey, M.D.
Editor-in-Chief



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