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Mark Masselli: This is Conversations on Health Care. I am Mark Masselli.

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Well Margaret here we are on the proverbial “dog days of summer and there are things that are heating up all across the country as it related to Obama Care.

Margaret Flinter: And so face it to say Mark I think it's been heated since day one even it that was the dead of winter but there are some serious stand offs that are occurring over state participation in the health care laws insurance mandates.

Mark Masselli: Texas is one of the six states across the nations saying they will not bother enforcing the new federal regulations around the Affordable Care Act.

Margaret Flinter: And they join Arizona, Alabama, Missouri, Oklahoma and Wyoming all of whom had the distinction of having notified the federal government, they will not be policing provisions related to the health law which means that the centers for Medicare and Medicaid services will simple have to step in and be the police on the insurance regulations that are laid out in the Affordable Care Act.

Mark Masselli: Of course these are the states that have opted out of setting up their own insurance exchanges and in some cases refusing to expand Medicaid to include more resonance living near the poverty line.

Margaret Flinter: Well the loan starts today, has shown a particularly degree of autonomy Mark. They are the only state that wasn't required to comply with a federal request for information about their insurance plans.

Mark Masselli: Analyst fears this approach is only going to lead to more confusion for consumers and to put an undue burden on residents already struggling to gain coverage and navigate the exchanges.

Margaret Flinter: But you know one fact isn't disputed. The administration is banking on convincing younger healthier Americans to sign up for the insurance exchange as a way to help even out the burden of bring in the folks who are a little older, little sicker into those insurance polls and there's a campaign on the way to get that message out to young American now to participate

Mark Masselli: Our guest today is some of an expert on government policy and how it related to the millennial generation. Aaron Smith is the cofounder of the Young Invincibles, an advocacy group seeking to impact policies that related to the young adult population in all matters of important including health care.

Margaret Flinter: Aaron will be sharing some interesting statistics about the millennial population and how that generation is poised to impact the roll out of Obama Care.

Mark Masselli: And also Lori Robertson checks in from FactCheck.org's but no matter what the topic you can hear all of our shows, by googling Chcradio.

Margaret Flinter: And as always if you have comments e-mail us at www.chcradio.com or find us on Facebook or Twitter because we love hearing from you.

Mark Masselli: We'll get to our interviews with Aaron Smith in just a moment but first here's our producer, Marianne O'Hare, with this week's Headline News.

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Marianne O'Hare: I am Marianne O'Hare with these health care headlines. 50 days and counting, to October 1st and the opening of the online insurance exchanges. The Amazon like insurance market place is where millions of American will access health insurance coverage. Facilitators are rolling out in a number of ways. The federal government has made funds available to community health centers and other community organizations around the country to train and certify insurance exchange navigators, who will assist those seeking to find the appropriate place for their and their family's needs. And Rural America is a nonprofit organization that is mobilizing volunteer navigators across the country to assist folks with the exchanges and some insurance companies are actually setting up store front where folks can drop in and seek assistance. The administration has been hampered by efforts at the GOP to block any additional funds to facilitate and promote access to the online insurance market place as being set up under the Affordable Care Act. Meanwhile the online insurance market place is supposed to be up and running for use by October 1st but the state of Oregon says they are going to be a little late to the table. They are currently testing the user friendliness and readiness of their online system. Folks seeking to buy health insurance through the exchanges in Oregon will have to do it through trained specialist until the online market places are fully up and running. Although Oregon was early to the band wagon in terms of supporting the law their situation reveals the concerns throughout the country that the online infrastructure being created to handle the new market places will actually work. Oregon officials say it's going to take a while to debug their system. And when it comes to diagnosing anxiety in kids, trust their gut. A recent study out shows kids who had frequently about of stomach upset were often later diagnosed with and some sort of anxiety disorder. After 25% of children have some kind of abdominal disorder that lands them in the pediatrician's office but in cases where there was not obvious medical reason for the chronic stomach pain, some sort of anxiety disorder was later diagnosed in over half of those patients. The study

appeared in the journal Pediatrics. I am Marianne O'Hare with these health care headlines.

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Mark Masselli: We're speaking today with Aaron Smith, Cofounder and Executive Director of the Young Invincibles, organization dedicated to amplifying the voices of young Americans up to the age 34, in today's most pressing issues including health care. Mr. Smith has consulted frequently with the President Obama and leading members of congress about critical youth policies issues including the Affordable Care Act. He's a 2010 Cum Laude graduate of Georgetown Law Center, frequent contributor to CNN, MSNBC, Politico and TBS on young adult issues, Aaron welcome to Conversations on Health Care.

Aaron Smith: Thanks for having me.

Mark Masselli: You cofounded the Young Invincibles in 2009 in a cafeteria at Georgetown, well still a graduate student it was in response to President Obama's efforts to craft in past the Affordable Care Act so who are the Young Invincibles and what was it about the health care law that spurred you into political action at that time.

Aaron Smith: We got started because the health care to be was perfect example of an issue that has a huge impact on our generation. There's about 19 million uninsured young adults in this country more than any other demographic and we've just didn't feel like we have much of a voice in the debate on capitol hill and so we really got organized to provide some of that voice to think about how policy is like staying on your parent's plan, up to age 26 would impact our generation, and that actually was one of the first big provisions that we fought for and now about three million young people have health insurance as a result. And obviously we've got a big opportunity coming up with the health care law to really get millions more young people access to health coverage.

Margaret Flinter: Well Aaron we really appreciate your being with us to bring focus to these issues. The Obama administration has made it clear since the beginning that if the health care law is going to work the way it's supposed to and expand access while bringing down cost then we've got to get the younger population the healthier population, the Young Invincibles as you say and it takes them to purchase insurance but as you've pointed out college loan debt is on all time high, too many low wage earners in this age group. You've done a lot of research on the millennial's attitude towards health insurance, are they as it verse to the idea of purchasing insurance as some pundits would have your believe?

Aaron Smith: No actually young people are very supportive of and understand the importance of buying health coverage. We've done polls of young adults

broadly and found less than 5% who say that they don't need to buy health insurance. So really the biggest drivers of the -- **you know** interns are cost, is a very low income population, you know I mentioned 19 million uninsured young adults. About 17 million of them would qualify for subsidies or Medicaid because their incomes are so low. This is people working low wage job that don't get benefits, working part time, there is a lot of economic reasons why young people don't have health insurance and that's really the cost and access issues are really lower. Hoping to address through the health care law.

Mark Masselli: You know we are going to want to pull the thread a little under -- the sort of demographics of this population, you've done quite a bit of research on the topic and you've just finished up 21 city bus tour around the country engaging in many round tables. So tell us a little more about the ethnic and racial mix of that population who are uninsured, also tell us a little more about what messaging is really working and how is that message sort of being framed up.

Aaron Smith: Sure so the lack of insurance really disproportionately impacts low income young people and young people of color so young Latinos for example have about 50% uninsurance rate. For young African Americans it's about one out of three so the benefits potentially of the health care law would be huge for those populations. Geographically we also know that there are some states and cities with really high numbers of uninsured young adults, cities like Los Angeles, and Houston and Miami and several big urban areas have really high levels of youth uninsurance rates. As far as the messaging I think this is really not about trying to do a slick marketing campaign, it's really about the numbers and the facts I mean when we've been going out doing presentations all across the country and talking to young people about it. You know they want to know how much is this going to cost, what is it going to cover, how do I sign up and we're starting now to be able to have some really clear details for them so we can say you know if you are a 20 year old and you make \$20,000 in California, you can buy a insurance plan through three exchange for 40 bucks a month, that's because of the subsidies. Now all of sudden it become real, it's a real economic choice but it have to have those facts to make the smart decision. The way -- about how often young people actually go to the emergency room. You all these young people are uninsured they do get sick, they do need care and like now what happens is they hold off often too long and then when they do get hurt or sick they have to go to the emergency room and often times that care is uncompensated. So in the long run it's better for everyone to be covered. And that's another message that we are talking sort of this, this idea of responsibility.

Margaret Flinter: Well I agree with you and so we know that tremendous number of people, young adults are already benefiting from the Affordable Care Act, I think some 3.5 million, right young adults who've opted to stay at their parent health insurance certainly with that coverage they have access to preventive health care, routine health care not just sick care. But the question is do young

people see the benefits of this in terms of their health -- and the Young Invincible almost sounds like the wrong term sometimes when I look at the rising rates of obesity, unhealthy behaviors, what's your insight about the health of this population and the degree to which people feel like having insurance is going to help them actually take better care of themselves.

Aaron Smith: One is there's actually been some research that's already showing that having more young people on their parent's plan, more young people are accessing sort of critical health care services that are now being covered like mental health services. And that's exactly what you would want to see that people get health care coverage and then they are able to get mental health services or **subsequent** services or prenatal care. Things that are going to leave to long term cost, we know that about 15% of young adults have some sort of chronic condition and so premiere of those things is going to be key. You know there's been a lot of discussion about the free preventive care which would include free birth control with no **(11:22 inaudible)** that's a huge win particularly for young women and I think that's something that we're going to be talking about a lot as well so their long term goal here is to educate young people so that they actually know how to use their health insurance.

Mark Masselli: We're speaking today with Aaron Smith, Cofounder and Executive Director of the Young Invincibles, an organization dedicated to amplifying the voices of young Americans in today's most pressing issues including health care. Mr. Smith has consulted frequently with the President Obama and leading members of congress about critical youth policies issues. Aaron I want to sort of figure out what we can learn from other campaigns and also from the Massachusetts experience so first on the Massachusetts experience it turned out that there was a catastrophic that was offered by the state the young people embraced in large numbers but I do want to also ask you to think about the campaign that's going on right now. You have a campaign going on, the president clearly has a campaign going on. A lot in that question but see if you can pull the thread together for us.

Aaron Smith: The Healthy Young America campaign is really about reaching and providing all the information that young people need, particular uninsured young adults. What we saw in Massachusetts was that uninsurance rates dropped from about 25% to about 5% to about 5% in 5 years. So a truly dramatic reduction in uninsurance rates and kind of that's because they have all the reasons that we think the health care law could work as **(0:12:54 inaudible)** more affordable options you have a competitive market place, you do have some high deductible plans. In Massachusetts you had a young adult plan it was called that had a slightly higher deductible and a slightly lower premium to target it for young people that was very popular. We have a similar plan on the federal market called the catastrophic plan which will also have a very high deductible and will be slightly lower cost. You know a big part of this picture also is Medicaid expansion so if the 19 million uninsured young adults, a huge number make

under our single adults, who make under \$15,000 a year and that would basically qualify for them for Medicaid and then we also know what happens with the mandate so the in year one for the national law, motility is only about \$95 but it goes up quickly after that. To be very similar to the Massachusetts (0:13:47 **inaudible**) in Massachusetts we saw you know less than 2% of the population actually paying the fine actually paying the fine. So either they were getting coverage or there's a lot of people who'll actually not have to pay the fine because they are so low income.

Margaret Flinter: Well Aaron talk to me but just for a moment about the delivery system and the impact with the potential impact that you see again based on your close connection with this group and all of the conversations you are holding on how this group is likely to change the way health care is actually delivered. You know if you think of a generation that grew up texting their questions, going online for information, what are you saying, what are you hearing from people how they want to actually get their health care once they are insured?

Aaron Smith: It's really interesting so we've been experimenting a little bit, we develop a mobile application to health care education app for young people that actually connects young people to community clinics and to local providers and you know I think community clinics your local pharmacy are going to continue to be places that a lot of young people are looking for care and that those are some of the places that young people have been going for years even when they didn't have health insurance. There has been more funding for community clinics and community health centers but there's going to be certainly more people coming to that system and there's going to be demand for providers to take that. I think there's been a tremendous amount of interest in technology and new kind of health care technologies that are tailored for young tech savvy consumers we're seeing a lot of mobile apps things that help you better navigate the health insurance system, things that help you better track your health care, but part of it is income wise young people just sort of been left out of the traditional health care system for so long and there's going to have to be some sort of getting used to process that happens you know where it's just as simple as you know have you -- do you have primary care doctor, you know those kinds of basic things are going to have to start happening.

Mark Masselli: Well you know we're just a few week away from when colleges and universities all across the country come back into session and then a few week out from October 1st when they kick off for signing up the Affordable Care Act begins, sort of tell us about what is brewing on college campuses, how you expect to utilize the energy of the millions and millions of the students who are going to be interested in this, how is your group going to capture that energy?

Aaron Smith: Most traditional sort of four year college students are actually on their parent's plan so about two thirds of college students are on their parent's plan. Then there's a sizeable number of young people who are on student health

plans and actually it's part of the law student health plans have had to improve dramatically so they had to eliminate things like benefit caps, they have you do things like provide birth control with no co case. So student -- a lot of students are going to start seeing those benefits and then obviously there's a lot of students who are still uninsured and we see particularly at community colleges and they don't actually require you have health insurance. And we've seen a lot of interest from student help centers and from schools themselves about how to inform their student body about their new health insurance options, we're going to be out on a lot of campuses all across the country doing offence and just agitating people and by October 1st as you said when enrollment starts hopefully we can turn that and actually starts signing people up for health insurance. Some state -- Young Invincibles will be navigators that actually are helping people walk through the process of signing up for health insurance.

Margaret Flinter: Well Aaron, I know from your website that Young Invincibles is committed to the broader set of social issues that affect your generation and we know that when it comes to health, the social determinants of health are certainly perhaps the biggest impact that we see on overall health so we'd like to give you a moment to talk about the other large issues that you are going to be addressing in the next couple of years.

Aaron Smith: All of these, so many of these economic issues are interconnected you know we've seen for example there's evidence that a lack of health insurance is one of the reasons why many young people drop out of college because of medical bills and just sort of the pressure of dealing with the health care system. You know we do work around higher education access, the cost of it, the higher education, student loan debts and a huge -- you've probably heard about the reason student loan interest rate, debate that going on in congress we're very involved in that and so what we we're looking to do on the higher Ed side is really inform and work with student leaders across the country to be a part of higher education reform debates because that system is just so badly in need of reform not just on the cost side but on the outcome side and on you know the other part of what we do which is jobs and making sure that we're connecting education to the work force so that a young adult have about a 16% unemployment rate so twice the national average. And then much, much worse actually for the majority of young people who don't graduate with a four year degree. We need to create those pathways for young people to get ahead and to move forward in their sort of economic futures and so it's actually been great to work on those three sort of issues health care jobs and education because we see how closely they are connected and for you know many of our partners it's nice to be able to work in health care and then you know also transition they'd be talking about financial aid and also transition to talking about job training programs. And so we're going to be working on all those issues in the years ahead.

Mark Masselli: We've been speaking today with Aaron Smith, and Executive Director of the Young Invincibles, an organization dedicated to amplifying the voices of young Americans up to the age 34, in today's most pressing issues including health care. You can find out more about his work by going to younginvincibles.org. Aaron, thank you so much for joining you son Conversation on Health Care today.

Aaron Smith: My pleasure, thanks for having me.

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Mark Masselli: At Conversation on Healthcare, we want our audience to be truly in the know when it comes to the facts about healthcare reform and policy, Lori Robertson is an award winning journalist and Managing Editor of FactCheck.org, a nonpartisan, nonprofit consumer advocate for voters that aim to reduce the level of deception in US politics. Lori what have you got for us this week?

Lori Robertson: Well some republicans have taking to claiming that millions of American can only find part time jobs because of Obama care. The Republican National Committee claims that the number was 8.2 million who can't find full time jobs "partly due to Obama care". The RNC included that claim in a long list of figures that called Obama care by the numbers but the 8.2 million figure is the total number of part time workers in the US seeking full time jobs. That's the June total from the Bureau of Labor Statistics for those working part time for economic reasons either because they couldn't find a full time job because their hours had been cut. Clearly not everyone in that situation is there partly due to the federal health care law and there hasn't been an increase in that categories of workers since the law was enacted in March 2010 in fact the number has gone down from 9.1 million that month to the 8.2 million currently. What did cause the part time for economic reasons numbers to sky rocket was the recession. The total went from 4.8 million in January 2008 to 8 million in December of that year. It's certainly possible that some part timers recently have their hour cut by employers concerned about the law but we don't know how many that might be. There's no evidence from the Bureau of Labor Statistics numbers that the law has (0:21:50inaudible). And that's my FactCheck for this week. I am Lori Robertson, Managing Editor of FactCheck.org.

Margaret Flinter: FactCheck.org is committed to factual accuracy from the country's major political players and is a project of the Annenberg Public Policy Center at the University of Pennsylvania. If you have a fact, that you'd like checked, email us at www.chcradio.com. We will have FactCheck.org's Lori Robertson check it out for you here on Conversations on Health Care.

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Mark Masselli: Each week conversations highlight a bright idea about how to make wellness a part of our communities and everyday lives. It's very working parent's nagging fear, what happens if your child comes with an illness while you are at work and they are day care. A pilot program in Rochester, New York offers a glimpse into what could be a promising solution, telemedicine. The federally funded grant between the University of Rochester Medical Center and several urban day care centers equipped the day care centers with diagnostic peripherals that could be attached to their cell phone an image is sent to the pediatric clinic via the internet. Usually when a child exhibits signs of a sore throat, your infection (0:23:10 **inaudible**) for parents are immediately called, meaning the parents have to leave work and the child taken to a doctor's office. These day care workers still call the parent but the next call is to the doctor's office for a live visit via teleconferencing.

Unidentified Speaker: Our telemedicine program is designed to make it easy for your child to be seen for an illness by one of our regular doctors. Most common problems can be cured for this way.

Jane McGonigal: If we want to solve problems like hunger, poverty, climate change, global conflict obesity, I believe that we need to aspire to play games online for at least 21 billion hours a week by the end of the next decade.

Mark Masselli: Day care workers are trained to utilize diagnostics tools like the otoscope, the tool used to examine the ears, the image is transmitted to the clinician and a diagnosis is made. In many cases the telemedicine visit was sufficient for clinician to diagnose a child's problem. The statistics are also compelling, working parents were able to retain 4.5 hours of working time and the children absenteeism was reduced by 63%. The pilot program has been so successful that local insurance companies are now getting on board with covering these telemedicine visits. In simple economics, a trip to the emergency room cost insurance companies a lot more than a teleconference visit and parents have peace of mind that their child's health needs are being adequately addressed. Their program is already being rolled out in other day care centers in the region and could provide an excellent model for day care centers around the country. A safe simple telemedicine solution to logistics problems facing millions of working parents whose kids fall ill while at day care. Now that's a bright idea.

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Margaret Flinter: This is Conversation on Health Care. I am Margaret Flinter.

Mark Masselli: And I am Mark Masselli, peace and health.

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