Desni and Bob Crock want their two-year-old daughter Bridget to have everything she needs to fight the rare cancer that's attacking her lung, but they find themselves fighting a second battle at the same time—a battle to survive financially because of soaring health care costs.

The Marietta, Ohio, couple knew Bridget was very sick when they took her to the doctor one morning in March 2007. Her temperature was high and her breathing had become labored. Still, colds and infections were common for Bridget, and the Crocks expected to be back home in an hour or two armed with an antibiotic and a doctor's assurance she would be fine in a few days. But a quick x-ray showed trouble, and the local hospital recommended she be transferred immediately to a children’s center in West Virginia. There, the Crocks' concern turned to panic when a cyst was discovered in Bridget's lung. Bridget was eventually diagnosed with pleuropulmonary blastoma, a form of cancer so rare it affects only 10 to 20 children in all of North America each year.

The Crocks were devastated, but they found solace in two pieces of good news. First, the cancer hadn't had time to spread to other parts of her body. Second, by what seemed to be a miraculous coincidence, one of the few oncologists in the country to have successfully treated other children with this type of cancer was on staff at that children’s center. Bridget's parents took great comfort in knowing that she was in the hands of one of the most experienced physicians available.

But that care is coming at a high price in just the first two months of treatment, bills exceeded $35,000. Bob has insurance through his employer, but it is only covering 60 percent of Bridget's expenses. That’s because the children's center is not in the insurance company's "network," the group of hospitals with which it has negotiated to provide services at a set price. The Crocks could have chosen an "in-network" hospital in Columbus or Cleveland, but those facilities are much further away—two and a half to three and a half hours by car. Even more importantly to the Crocks, they don't have physicians who have the same level of expertise with Bridget's rare cancer. The Crocks feel they don’t have any choice but to have Bridget continue treatment with her current doctor.

But to the insurance carrier, the Crocks do have a choice. The circumstance doesn't meet the company's definition of a "forced care provider," which applies only when a patient receives emergency treatment. As a result, the company is paying a lower percentage of the bills, and for the first round of treatment the Crocks' share was $14,000. Desni said they would pay whatever it takes to save Bridget's life, but she can't help but feel the insurance company should make an exception in how it reimburses costs in these types of cases, especially when they involve a child. "With children, there shouldn't be a limit to which doctor you could go," she says.

Desni has had to give up her job as a real estate agent to care for Bridget, who regularly must undergo chemotherapy and often has to stay in the hospital when she isn't feeling well, and also needs to avoid the common cold and infections that might come with group child care. Bob, a salesperson and a part-time musician, has had to work extra hours evenings and weekends trying to make up for the loss of income. But there are only so many hours in a day—especially on the days that also require the long commute back and forth to Bridget's hospital, which is about an hour and a half from their home. Years of monthly medical payments will certainly be a

burden on this young family's budget. But they're determined to go on as best they can, knowing they can't be concerned about finances for the sake of their daughter.

Bridget is an Irish name which means "strength," and the Crocks say their daughter has shown a lot of it as she's battled her illness. Her parents just want to do their part. The children's health care system in the United States should not force families onto the brink of financial ruin when they are faced with a child's life threatening illness. The public health insurance option currently being considered by Congress is what this family needs. The Crocks should have comprehensive, affordable coverage for their child that will allow them access to specialized treatments when they are needed. A strong public health insurance option would do just that. Then families like the Crocks could focus their energy on the fight that really matters.

Email your Members of Congress today to let them know that affordable, comprehensive health coverage for everyone—especially children—is important to you at: www.childrensdefense.org/healthaction .

Marian Wright Edelman, whose new book is *The Sea Is So Wide And My Boat Is So Small: Charting a Course for the Next Generation* , is president of the Children's Defense Fund. For more information about the Children's Defense Fund, go to http://www.childrensdefense.org/ .