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Testimony Supporting:

**H.B. No. 7065, An Act Concerning Legislative Review and Approval of Waiver Applications
Submitted by the Commissioner of Social Services to the Federal Government**

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Human Services Committee Public Hearing

February 21, 2007

Dear Senator Harris, Representative Villano and Members of the Human Services Committee:

Sharon Langer is a Senior Policy Fellow, and Mary Glassman is Director of Legislative Affairs with Connecticut Voices for Children, a research-based public education and advocacy organization that works statewide to promote the well being of Connecticut's children, youth and families. We are here today to testify on behalf of the sister lobbying organization - Advocates for Connecticut's Children and Youth (ACCY), a statewide, independent, citizen-based organization dedicated to speaking up for children, youth and families.

We strongly support Raised Bill No. 7065 AAC Legislative Review and Approval of Waiver Applications Submitted By the Commissioner of Social Services to the Federal Government.

This bill would provide for increased oversight by the legislature of federal waiver applications submitted by the Commissioner of the state Department of Social Services to the federal government, and make the process consistent with approval of federal block grant allocations. Currently, the Department must submit such applications to the Human Services and Appropriations Committees; however, these legislative committees have discretion whether to advise the Commissioner about the waiver applications. This bill would tighten legislative oversight in several ways by: 1) requiring the committees to advise the Commissioner as to whether they approve, reject, or modify the application; 2) requiring the committees to hold a public hearing before advising the Commissioner on their position regarding the application; 3) making the committees' failure to advise the Commissioner an approval; *most importantly*, 4) preventing the Commissioner from submitting the waiver if the committees reject the application; and 5) requiring the Commissioner to modify the application if the committees advise him or her to do so.

The identical language was approved by both houses of the legislature two years ago (Public Act 05-112) but vetoed by Governor Rell even though there were no budgetary costs attached to the original bill.¹ This committee should again approve this legislation.

¹ See, Office of Fiscal Analysis, Fiscal Note attached to SB-801 (An Act Concerning Legislative Review and Approval of Waiver Applications Prior to Submittal to the Federal Government), analyzing the identical language contained in Raised

The bill would give the legislature and the public the opportunity to review the Commissioner's requests that the federal government waive federal laws related to Medicaid and other public assistance programs. We are aware that some other states in recent years have hastily submitted waivers to the federal government that make sweeping changes to their Medicaid programs with little or no input from those directly affected by the changes and/or from members of their state legislatures; we seek to avert that in Connecticut.

At least 13 states have state laws that require legislative approval of waivers – two are New England states – Massachusetts and New Hampshire.²

In light of the vulnerable populations that are served by public assistance programs, and the complex nature of these programs – particularly Medicaid – it is crucial that the relevant legislative committees not only be fully informed about the contents of a federal waiver application, but have the explicit authority to approve, reject, or modify the terms of the waiver, after input from the public through the public hearing process.

Further, because recent changes in federal law allow certain types of changes to be made to Medicaid through a state plan amendment that previously required a Medicaid waiver, we would urge that similar legislative oversight of the state plan amendment process be required for changes that could pose harm to beneficiaries. That is, that state law be amended to require similar legislative review when DSS proposes to reduce benefits (e.g., limit benefit packages) or impose cost-sharing (co-pays and premiums) on beneficiaries through the state plan amendment process.

Thank you for this opportunity to testify in support of Raised Bill No. 7065.

Bill No. 7065, at www.cga.ct.gov/2005/fn/2005SB-00801-R00-FN.htm . OFA explains, "These changes are not anticipated to result in any fiscal impact."

² The other states include Colorado, Florida, Louisiana, Missouri, Montana, Nevada, North Dakota, Ohio, Oregon, District of Columbia, and Wyoming. *See*, National Health Law Program & National Association of Community Health Centers, *Role of State Law in Limiting Medicaid Changes* (updated July 2006), available at www.healthlaw.org.