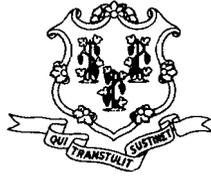


State of Connecticut

GENERAL ASSEMBLY



COMMISSION ON CHILDREN

Human Services Committee
Public Hearing
March 15, 2007
Testimony Submitted by Elizabeth C. Brown

Senator Harris, Representative Villano and Members of the Committee. I am Elizabeth C. Brown, Legislative Director for the Commission on Children. I appreciate the opportunity today to speak in support of many of the reform policies regarding Connecticut's health insurance program for low income families.

I would like to preface my remarks with what the data and research reveal concerning the quality and access to health care in Connecticut.

- Access to ongoing quality care is uneven throughout the state for children enrolled in HUSKY.
- Regulatory changes to HUSKY over the years have led to huge decreases in HUSKY enrollment, i.e. continuous eligibility and presumptive eligibility.
- Cuts to outreach and education, i.e. The Children's Health Council, have led to disenrollment and lack of awareness of the program.
- Income eligibility at 150% of the poverty level is too low and restricts access to low wage working families.
- Emergency Room Care is over extended
- Oral and mental health services are in crisis
- Reimbursement levels are so low many providers no longer serve Medicaid children
- The Managed Care System lacks cohesiveness and oversight is very uneven, i.e. the recent conflict over access to information regarding rates and profits.
- Children with Special Health Care Needs from families with private insurance lack access to wrap around services.
- There is no state wide implementation of best practices and standard of care to ensure quality care.
- The number of uninsured is on the rise as businesses opt out of providing health care.

All of this exists in the context of a \$15 billion dollar industry.

Fortunately, the Governor and the Legislature are demonstrating remarkable leadership in trying to address the serious flaws in the health system that is broken. The bills before you today include a new policy direction to improve access, quality, and accountability.

I have the honor to serve on Speaker Amann's Health Kids Initiative and many of the issues discussed are reflected in the bills before you. The bills address the critical components necessary to establish a comprehensive, quality health care system, with sufficient accountability and ongoing quality enhancements to make Connecticut a leader in the Country.

Support: RB 7375, an Act Concerning Health Care Access and Expansion of the HUSKY Program-

Eligibility and Continuous Access 1) increases eligibility for coverage from 150% of the federal poverty level to 185% of the federal poverty level. 2) Extends from one year to two years benefits for families otherwise ineligible due to federal requirements; 3) Eliminates co-pays; 4) increases from three hundred percent of the federal poverty level to four hundred percent eligibility under HUSKY Plan, Part B: 4) increases eligibility from three hundred percent to four hundred percent children for unsubsidized benefits in the HUSKY B program. 5) Institutes continuous eligibility for a 12 month period regardless of change in family income.

Add: Children with Special Health Care Needs: Suggest adding language to Direct DSS to apply for a waiver to expand HUSKY Plus services and to extend HUSKY Plus benefits regardless of income through a buy in premium based option for families who already have commercial insurance but does not meet the need of the children with special health care needs. (see bill HB 7242, Section 2).

Reimbursement Rates- ties rates of reimbursement to providers to the Medicare program and raises reimbursement rates to dentists to the 70th percentile. Imposes on tax on dentist who do not participate in the HUSKY program comparable to 1% of the net revenue.

Outreach and Education- embeds in state statute requirement that the Department of Social Services shall establish a comprehensive outreach and education system in partnership with the Children's Health Council, Info Line, Medicaid Managed Care Council and key state agencies.

Add: Suggest specific focus on the Healthy Start Program that provides outreach and care coordination services to low income pregnant women. This program is administered by DSS and can be claimed for matching federal dollars.

Preventive Care- requires DSS and DPH to develop a plan for preventive care.

Support: RB 7278, An Act Concerning Improved Access to Health Insurance- includes similar provisions regarding access and eligibility-

Support: RB 1127, An Act Concerning the Charter Oak Health Plan and Health Care Access-

We support the Governor's policy direction to institute universal health care for the uninsured. As discussions continue on this critical issue to develop a comprehensive health system, the Charter Oak Proposal includes many key components including attention to affordable premiums, benefits, and income eligibility.

Support: Committee Bill No. 3, An Act Concerning Increased Access to Health Care Through the HUSKY Program- strengthen outreach/education; single point of entry and accountability system.

- Includes many of the provisions in RB No. 7375 with additional language to strengthen the Single Point of Entry and Outreach and Education efforts. These provisions will hold the systems accountable and afford policy makers a better mechanism for tracking and monitoring the results of the efforts.
- Expansion of the State Administered General Assistance Program to ensures health and prescription coverage and reduction of existing barriers to continuous health care.
- Expands coverage to pregnant women from 185% to 300% of the federal poverty level.
- Establishes a comprehensive oral health system with adequate fees and oversight.

Support: RB Bill No. 1424, An Act Concerning Managed Care Organizations Contracting with the Department of Social Services and Support: RB 7322, An Act Concerning Medicaid Managed Care Reform- seeks to establish better transparency and oversight of the Managed Care Organizations to establish a system of accountability and more focus on health outcomes for participates.

Summary: The bills before you encompass measures to ensure universal health care for children and uninsured in Connecticut. To strengthen the proposals we recommend the following:

- Establishment of a state entity to implement best practices similar to Vermont's – V-CHIP or Child Health Improvement Program. This program brings best practices to the field and has had significant results in improving health outcomes for children. For example, it could be seen as "Easy Breathing" plus- this asthma disease management program developed and implemented in Connecticut has greatly reduced emergency room treatment for children with asthma. It helps parents understand and manage their child's disease. This model would be expanded to other high frequency diseases such as diabetes, obesity, mental health and other areas of concern.

- Funding of the Children's Health Council to ensure continuous oversight and accountability.
- Expansion of the HUSKY B Plus coverage to include more services for children with special health care needs
- Funding of health prevention initiatives
- Development of evidence based measures for specific health outcomes that target reduction of racial and ethnic health disparities
- Reimbursement for care coordination linked to a patient health plan
- Amend the State Medicaid plan to include the provisions of Chapter 6, Section 6062 9a) of the Federal Family Opportunity Act of the Deficit Reduction Act of 2005, to allow families of children with special health care needs to purchase Medicaid coverage, regardless of income, based on a uniform sliding scale.