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On

Senate Bill 1: An Act Increasing Access to Affordable, Quality Health Care

Joint Committee on Public Health

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Senator Handley, Representative Sayers and members of the committee, thank you for this opportunity to testify in support of Senate Bill 1: An Act Increasing Access to Affordable, Quality Health Care.

I'd also like to commend you for setting aside the day to hear other bills, with similar goals—to improve health outcomes; to make some sense out of the current system of health care, which most of us agree is overly complex and unaffordable; to put *health first*.

Our existing healthcare system is on life support. We must tell the truth about healthcare, and have the courage to do what is necessary to improve quality, accessibility, and affordability.

The truth is that we have a system that is too complicated and too expensive even for those who have health insurance. For the more than 350,000 men, women and children who have no health insurance, and for the under-insured, it is a system that discourages early intervention, undermines health, and encourages expensive emergency room treatment.

Half of all the bankruptcies in the United States are caused by medical debts. In many of those cases, the individual actually had health insurance but was underinsured. Too many families in Connecticut live in fear of the one medical emergency that would result in personal and financial disaster. As Martin Luther King said: "Of all the inequalities, injustice in health care is the most shocking and inhumane."

It's time to move forward with the Connecticut Health First Initiative. It's time to put aside ideology and move beyond protecting the special interests. It's time to focus on *health first*.

In Massachusetts, legislators attempted universal coverage by adding onto the existing managed care system. The governor of California has proposed a similar plan. But reports from Massachusetts indicate that lower costs expected from private managed care plans have failed to materialize. Adding onto a system that's already too complex and costly is unlikely to provide affordable coverage for all, and unlikely to be financially sustainable. In Connecticut, we must go another way.

The Connecticut Health First Initiative stands for the proposition that we must fix a broken system. Fortunately there is a proven alternative. It's called Medicare. It's proven, works well for America's seniors, and directs more resources into healthcare instead of overhead and administration. We should create a Medicare-for-all program in Connecticut that provides quality, simplicity and affordability in healthcare for everyone. While best accomplished on the national level, we can develop a new model of healthcare by overcoming obstacles such as federal waivers and statutory barriers. At the same time, we can act now to insure up to 40% of those without health insurance by expanding our HUSKY and Medicaid programs for children and adults.

We propose to do this with targeted outreach to the 60,000 or more individuals who are eligible for, but not enrolled in, our HUSKY plan. We will increase income limits for childless adults in SAGA, from 60% of the federal poverty limit to 100%. We will increase income limits for parents and caretaker relatives of HUSKY-eligible kids from 150% to 185% of the federal poverty level. And we will allow families to carry their dependent children on their private health insurance until those children are at least age 26, helping many young adults starting out in their first jobs to gain access to care.

Another truth we must face is that many who have health insurance through Medicaid and HUSKY do not have access to care. According to a recent survey, new patients enrolled in HUSKY or Medicaid were unable to receive appointments for care 74% of the time. That's shocking and unacceptable. The main problem is that reimbursement for Medicaid has lagged far behind reimbursement for Medicare. As a result, doctors and hospitals that provide care to Medicaid and HUSKY patients lose money. It makes sense to raise Medicaid reimbursement rates to the same level as Medicare not only because it will increase access for those on Medicaid and HUSKY, but also because it will hold down insurance costs for everyone else. It will end the cost-shifting that occurs when those with insurance are charged more to make up for the underpayments in Medicaid and HUSKY.

Real healthcare reform must increase efficiency without sacrificing quality. The Connecticut Health First Initiative would promote chronic disease management for people with asthma, diabetes, heart disease and other chronic diseases, greater access to preventative care, more capacity for school-based health clinics and community health centers, transparency about outcomes and quality to allow consumers to make informed choices, and new medical technology to improve care and reduce waste, including a movement toward a statewide—or even regional—electronic medical records system. These reforms will produce long-term savings while putting health first.

The Connecticut Health First Initiative will fulfill the promise of our existing HUSKY and Medicaid programs; it will end the unfair, low reimbursement to doctors and hospitals; and it provides a roadmap for affordable universal coverage. It's a comprehensive plan that will make Connecticut a leader in greater quality and accessibility of healthcare for all residents.

Thank you.