CARC
Connecticut's Statewide AIDS Coalition

Testimony of Shawn M. Lang
Appropriations Committee
18 February 2008

Senator Harp, Representative Geragosian, members of the committee; I appreciate the opportunity to testify before you today. I'm Shawn M. Lang, the Director of Public Policy with the CT AIDS Resource Coalition, Connecticut's only statewide HIV/AIDS organization. We work to ensure that the nearly 11,000 people living with HIV/AIDS in our state have the housing, care and supportive services they need in order to live their lives in dignity. I'm here to testify against the draconian health care cuts the Governor is proposing.

In her state of the state speech, the Governor said that "We must care for our most vulnerable." People with HIV/AIDS are among the most medically fragile and vulnerable people and this budget must not and cannot be balanced on their backs!

All of the proposed cuts – dental care, co-pays, eliminating medical interpreters, vision cares and non-emergency medical transportation, the Part D wraparound, eliminating over-the-counter drugs, requiring PA for high cost drugs, etal, will do more to unnecessarily create additional barriers for people living with HIV/AIDS. And when people face these types of barriers, they get sicker and end up with much higher cost illnesses, unnecessary use of emergency rooms, and longer hospitalizations.

Instituting co-pays has been proposed numerous times and it simply does not work. In a recent research study of people living with HIV/AIDS in AIDS housing programs, the average income was $640 per month. Many people take anywhere from 5 -14 medications per day; some for HIV, others to mitigate the side effects of their HIV medications, and still others for co-occurring disorders. Implementing co-pays means that people won't get their meds simply because they cannot afford to do so. If a person skips even one dose of their HIV meds, their virus can mutate requiring a complete change in their combination therapies which may or may not even exist.

Eliminating all but emergency dental care will be devastating to people with HIV/AIDS. Already difficult to access, in the greater Hartford area there are only two places where people with HIV/AIDS go for dental care – UCONN and the Hartford's Gay and Lesbian Health Collective. The lack of healthy, functioning dental health can interfere with quality of life, complicate the management of medical conditions, and create or exacerbate nutritional and psychosocial problems. Prevention and early detection of oral disease and prompt referrals to dental care providers can often mitigate the debilitating and painful effects of untreated oral disease.

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Requiring PA for high costs drugs will result in a delay for people getting their meds. As I stated before, that simply cannot be allowed to happen to people living with HIV/AIDS. A couple of quick examples of the cost of HIV meds are $894 for a one month's supply for Truveda; $876 for a month's supply of Reyataz; and $274 for Norvir.

Many people living with HIV/AIDS in our state are also incredibly socially fragile and have poor literacy skills and lack the ability to navigate through an already complicated system of care. And even for those who have the skills face a number of other challenges. As a friend of mine who has been living with HIV/AIDS for many years said to me, "I don't know of any other illness that creates the same level of social stigma, medical crisis and bureaucratic chaos."

All of this will place greater and more unmanageable hoops to navigate not only for people whose health care depends on these programs, but it will add to the hoops that their multiple doctors and pharmacists have to jump through as well. Thus, creating an even more burdensome health care system.

I also want to oppose the Governor's "delaying" of the HIV/AIDS Home and Community Based Health Care Waiver. This waiver would SAVE the state $1.2 million over two years, and $4 million in five years. And benefit approximately 100 people. Why delay something that is replicable, evidence-based and will save funds?

Finally, these proposed cuts will cost the state up to $1.3 BILLION in increased Medicaid reimbursement. Health care cuts will only result in intensifying the significant barriers people already face. We urge you to restore these cuts.

Thank you.

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Health Care Cuts = Vulnerable Families

Connecticut should step up its support of families in this economic downturn.

Connecticut could receive $1.3 billion in increased federal Medicaid reimbursement.

Health care cuts mean turning our back on federal funds and families in need.

The federal government has expanded funding for Connecticut's Medicaid and HUSKY programs.

> **At least $1.3 billion *more*** is available to support Medicaid and HUSKY through the federal stimulus package. The federal government will pay more than half the costs of the Medicaid program (increasing the federal share from 50% to at least 56.2%).
>
> The federal Children's Health Insurance Program (CHIP) legislation will provide *new* funding for children and pregnant women in HUSKY A and HUSKY B who are **recent legal immigrants**.

The Governor proposes to cut $273 million from health care programs for families and individuals. The proposed policies will limit access to health care for parents in HUSKY A, children in HUSKY B, senior citizens and others who rely on Medicare Part D for prescription drugs and recent legal immigrants.

> Most of these measures have been **proposed and rejected many times in the past**. Some have been adopted and then rejected when their impact became clear. Some have even been implemented and then rescinded.
>
> In 2003, researchers at Georgetown University estimated that **thousands of adults in Connecticut, including elderly residents, would lose health care coverage** if premiums were imposed in Medicaid. Thousands of HUSKY B children almost lost coverage when premiums were imposed - and then removed before full implementation.

Don't turn away millions of dollars in federal reimbursements.

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Connecticut Part D Coalition

REJECT CUTS TO PRESCRIPTION COVERAGE PROPOSED BY THE GOVERNOR'S BUDGET

DON'T LET CONNECTICUT'S OLDER ADULTS AND PEOPLE WITH DISABILITIES BE HURT BY THE GOVERNOR'S PROPOSED BUDGET

- Continue to cover drugs not on Medicare Part D formularies that *are* covered by ConnPACE & Medicaid.
- Continue to cover Part D co-pays for dually eligible Medicaid & Medicare participants, who are very low-income older adults and people with disabilities.
- Safeguard ConnPACE – do not unduly restrict access or limit the enrollment period.
- Do not impose new prior authorization requirements for Medicaid-covered drugs.

Ensure that CT's lower income older adults and people with disabilities are not hurt by the Governor's proposals to cut the Part D Wrap Around and ConnPACE !

WHY CONTINUE TO COVER DRUGS NOT ON MEDICARE FORMULARIES?

(A drug formulary is a list of prescription medications that a prescription drug plan pays for. When medications are not listed on the plan's formulary, the drug will not be covered unless an Exception is granted.)

- Coverage of non-formulary drugs will ensure that ConnPACE and dually-eligible individuals continue to be able to access all medically necessary drugs that are covered by Medicaid.
- Medicare has an Exceptions process to allow individuals to access needed medications that are not on their plan's formulary; however, this complex process *does not guarantee access* to vitally needed drugs and is burdensome for elders and people with disabilities. Under the Exceptions process, *a supporting doctor's letter is required but not determinative of coverage for each off-formulary medication*. Physicians are not reimbursed for helping with Exceptions; for beneficiaries seeking multiple Exceptions for drugs prescribed by multiple doctors, the hurdles will likely be insurmountable.

WHY CONTINUE TO COVER THE PART D CO-PAYS?

- Under federal law, pharmacies can refuse to dispense prescription drugs to individuals who can not pay Medicare Part D or Medicaid co-payments. Thus, instituting co-pays, as the Governor proposes, will put older adults and people with disabilities at risk of going without needed medications. Even with Medicare's full Low-Income Subsidy (LIS), dually eligible people (people with Medicare *and* Medicaid) have a co-pay of up to $6.00 per prescription.
- The Legislature has shown its commitment to protecting poor people from paying out-of-pocket costs for critically needed prescription drugs:
  - In 2004 - the Legislature repealed earlier legislation that required Medicaid recipients to make co-payments of $ 1.50 per prescription (Section 43 of PA 04-258).
  - In 2005 - the Legislature did not accept the Governor's recommendation to require Medicaid recipients to make co-payments of $3.00 per prescription.

(Over)

WHY SAFEGUARD CONNPACE?

- ConnPace is a safety net prescription drug program for Connecticut's vulnerable older adults and people with disabilities.
- Do not unduly restrict access to ConnPACE with new cost-sharing and asset test responsibilities.
- The opportunity to enroll must be available when people qualify and need medications. If enrollment is limited to one six-week period each year, vulnerable older and disabled people could have to wait nearly a year for ConnPace coverage. This will put them at risk and may result in vulnerable beneficiaries going without necessary medications and/or needing more expensive care.

WHY NOT IMPOSE ADDITIONAL HURDLES TO OBTAINING PSYCHIATRIC AND HIGH COST PRESCRIPTIONS?

- Subjecting some psychiatric and high cost drugs to prior authorization will make these drugs more difficult, and in some cases impossible, to obtain.
- Studies have shown that attempts to cut costs at the pharmacy keeps people from taking necessary medications, reduces appropriate care, adversely affects health status, and causes shifts to more costly types of care.
- Requiring prior authorization increases both physicians' and the State's administrative burdens and has been rejected in the past by the legislature as *not* cost-effective

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Ensure that CT's lower income older adults and people with disabilities are not hurt by the Governor's proposals to cut the Part D Wrap Around and ConnPACE !

AARP Connecticut
Advocacy for Patients With Chronic Illness, Inc.
Aids Life Campaign
Center for Medicare Advocacy, Inc.
Connecticut Aids Resource Coalition
Center for Medicare Advocacy, Inc.
Connecticut Association of Agencies on Aging
Connecticut Commission on Aging
Connecticut Community Care, Inc.
Connecticut Health Advocacy Forum
Connecticut Legal Rights Project
Connecticut Legal Services
Greater Hartford Legal Aid
Legal Assistance Resource Center of CT
National Alliance on Mental Illness – CT
National Multiple Sclerosis Society
Greater Connecticut &
Western Connecticut Chapters
New Haven Legal Assistance Association

CONTINUE TO HOLD CONNECTICUT'S ConnPACE and DUALLY ELIGIBLE OLDER ADULTS & PEOPLE WITH DISABILITIES HARMLESS