



Serving

underserved and uninsured patients at Connecticut's largest network of community health centers.

Administrative:

635 Main Street
Middletown, CT 06457
860.347.6971

Service Locations:

CHC of Clinton

114 East Main Street
Clinton, CT 06413
860.664.0787

CHC of Enfield

5 North Main Street
Enfield, CT 06082
860.253.9024

CHC of Groton

333 Long Hill Road
Groton, CT 06340
860.446.8858

CHC of Meriden

134 State Street
Meriden, CT 06450
203.237.2229

CHC of Middletown

635 Main Street
Middletown, CT 06457
860.347.6971

CHC of New Britain

One Washington Square
New Britain, CT 06051
860.224.3642

CHC of New London

One Shaw's Cove
New London, CT 06320
860.447.8304

CHC of Old Saybrook

263 Main Street
Old Saybrook, CT 06475
860.388.4433

Dental Center of Stamford

141 Franklin Street
Stamford, CT 06901
203.969.0802

Norwalk Smiles

49 Day Street
Norwalk, CT 06854
203.854.9292

www.chc1.com



December 9, 2009

Good morning Madam Chairwoman,
Mr. Chairman and members of the committee,

I would like to begin by thanking everyone serving on the Appropriations Committee for giving me the opportunity to come before you and speak on behalf of the children and families that Connecticut's School Based Health Centers (SBHC) serve. My name is Janet Hylan and I am the Director of School Based Health Services for the Community Health Center, Inc., headquartered in Middletown.

I am sure you have all heard how SBHCs better the lives of students and families who are fortunate enough to have one available. Having access to a SBHC allows our youth better access to healthcare. Not only do our programs provide medical and behavioral health care, but we are continuously providing preventive services such as risk assessments, counseling and health education. Providers enable students to adopt healthy behaviors, potentially improve their quality of life and decrease children's risk for developing chronic disease later in life.

Our programs significantly reduce the amount of time a student spends away from the classroom – thus increasing the amount of time a student spends learning. At least 90% of our visits result in the student returning to their class. With CMT scores being at the forefront of funding opportunities for schools, this becomes a huge asset for our schools and communities. Major injustices in access to affordable health care are more prevalent in communities where children are also not making satisfactory gains in educational accomplishments. SBHCs are located in diverse communities including schools that are dominated by a low income, minority population. SBHCs receive state funding and are able to offer services to children regardless of their ability to pay. Our programs are safety nets for our uninsured and state insured children. Statewide, approximately 50% of SBHC users are Medicaid insured and approximately 28% are uninsured. With limited or no access to overwhelmed private providers - who don't accept HUSKY insured, or limit the number of HUSKY patients in their practice - Where do these children go for good quality healthcare? With spending cuts to these programs, what will happen to these children?

Currently, behavioral health visits account for approximately 1/3 of all SBHC visits and we anticipate this only to grow. Families are dealing with stressors they haven't had to face in the past. We are seeing kids who are affected by the changing family structure, loss of income in the household and the subsequent emotional/behavioral health conditions impacting their parents. There are increased reports of community and family violence this year due to economic changes and struggles. Where are these children going to go to talk openly about THEIR struggles when they can't talk at home?

A reduction of funding will significantly affect CT's SBHCs and the thousands of children, adolescents, and families being served. Preventative programming opportunities will be eliminated, before and after school hours, available to meet families work schedules, will be cut, staffing will decrease and we will be forced to limit access to providers. Does this make sense? We are going to cut funding to programs that serve families who already have limited access to good, quality healthcare. Families are struggling to meet their daily needs. Funding to SBHCs could bring these families to a breaking point. Families will be forced into our already inundated ER's to sit and wait for hours. Worse yet, parents may be forced to make the decision to not seek medical or behavioral health care for their children. Without medical care children will attend school sick, illness will spread, absenteeism will increase, learning in the classroom will decrease, CMT scores will fall, and federal funding will decrease. If behavioral health needs are not addressed, students will be turning to illegal substance use to mask their pain. This, in turn increases family/community violence. Now, there may be police involvement and expensive behavioral health crisis intervention will be called upon, costing the state more money for in-patient treatment, police and court costs. Please reconsider state budget cuts that would mean eliminating services to our population. The end result is always increased financial burden on the state.

Lastly, I am sure you would agree that "healthy children make better learners".

Thank you

Jane Hylan
Director, School Based Health Centers
Community Health Center Inc.