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TESTIMONY OF JAN VANTASSEL, ESQ.
APPROPRIATIONS COMMITTEE
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Good evening. My name is Jan VanTassel and I am the Executive Director of the Connecticut Legal Rights Project (CLRP). CLRP is a statewide legal services program that represents low income adults with psychiatric disabilities on matters related to their treatment and civil rights.

Like some of you, I have been at this work long enough to have experienced more than one state budget crisis; perhaps not one of the magnitude of that confronting the state today, but certainly challenging enough to force compassionate conservatives and even progressives to consider actions that would be unthinkable in other times.. Everyone in this room understands both the state's dilemma and the monumental task that you face.

Unfortunately, many of the proposals in the Governor's budget are simplistic, shortsighted and senseless, both in terms of common sense as well as dollars and sense. None of you, regardless of party, want to build a budget around smoke and mirrors, but many of the cuts in the DSS budget would do just that.

As the attachment to my testimony documents, studies on the imposition of co-payments and cost sharing mandates have consistently found they shift expenditures from low cost services to more expensive ones that are not subject to the co-payment. Despite the Governor's effort to limit the application of cost-sharing, it will increase costs in other budget items, and I do not believe those expenses have been accounted for in the budget.

Similarly, eliminating dental coverage for Medicaid and SAGA beneficiaries, with the exception of emergency dental services, will force people to forego dental work until it is more serious and will require more costly care.

Another measure that is likely to increase rather than decrease costs is the proposal to put mental health medications under the state's preferred drug list. As many of you know, the effects, both positive and negative, of medications to treat mental illness are extremely individualized. Determining the appropriate type and dosage of medications is a sensitive and sometimes time-consuming process that involves ongoing communication between an individual and his or her provider. This is not a situation that lends itself to a rigid formulary, and proposing this approach

jeopardizes both the well being of persons with mental illness and increased costs for emergency room or hospital care.

A less obvious, but potentially more dangerous proposal is that of allowing the Department of Social Services to adopt a more restrictive definition of medical necessity. This change, particularly with no specific parameters, gives DSS discretion to place narrow restrictions on access to care with no input from the General Assembly. While it can be appealing because it appears innocuous, none of you should underestimate the consequences that could result from giving DSS such authority.

Finally, I must address the Governor's proposal to allow the state to steal the annual federal cost of living increase provided to State Supplement recipients. These individuals who are elderly or have disabilities have limited income and should not be denied the benefit of their small federal COLA. Surely, we can balance the budget by looking to persons with more than this.

In closing, I want to recognize the effort the Governor has made to be judicious, as well as the task confronting you. We must focus on the core functions of government while we protect the most vulnerable in our society. We must also be careful to invest taxpayer dollars wisely. The measures I have identified do not meet those objectives and should be rejected by this committee.