

**TESTIMONY OF RHONA COHEN IN OPPOSITION TO THE GOVERNOR'S PROPOSED HEALTH CARE CUTS. CUTS TO OUR PUBLIC HEALTH CARE SAFETY NET HURT PEOPLE AND JOBS!**

February 11, 2010

Good evening, Members of the Appropriations Committee. Thank you once again for your service to the people of the state of Connecticut.

My name is Rhona Cohen, and I am the Advocacy Director with COHI, the Connecticut Oral Health Initiative. We are the state's leading oral health advocate and work with providers, consumers and stakeholders across the state to advance 'oral health for all.' Oral health allies firmly believe that oral health is an essential component of overall health, and steadfastly believe that health care should be available to everyone no matter their economic status. I am here, this evening, to speak in opposition to the Governor's proposal to cut health care benefits for low-income residents under Medicaid, HUSKY and SAGA programs, because these cuts would be bad for people and bad for jobs in our great state. Further, these cuts could easily represent a "health tax" on Connecticut's poorest residents. This problem is too big to resolve with one single, cookie-cutter approach. We need to examine other options, such as a balanced tax policy that responds to individual ability. Another excellent opportunity is to invest in the *statewide* roll-out of primary care case management (PCCM) for both the HUSKY A and HUSKY B populations, *to reap big rewards in a matter of months* as has been suggested today and before today as a cost savings and health care quality improvement measure by multiple organizations.

I call your attention to just three of the proposals reducing or eliminating access to health care for low-income residents that are simply unacceptable for the well-being of our state:

- (1) Implementing unaffordable co-pays for Medicaid enrollees, ***such that they will simply forego treatment until their conditions require expensive emergency room intervention***
- (2) ending vision coverage under Medicaid and vision and medical transportation under SAGA
- (3) increasing HUSKY B premiums

All of these proposals proffer unnecessary harm to vulnerable people residing in our state. But they ultimately will affect everybody's health care, because when a person can't afford care one way they get the care they need in other more expensive ways that tend to strain the system upon which we all depend.

Furthermore, the cuts you've been asked to contemplate tonight would lead to further imbalance in our budget because so many cuts were already adopted last year, without the balance of revenue generating measures. These cuts and the lack of revenue generating measures were implemented in response to the Governor's demands. Some of the cuts already implemented: ending the wraparound for dually-eligible (Medicare/Medicaid) recipients unable to get needed drugs under their Medicare Part D plans and ending the state-funded medical assistance program for recent immigrants *legally present in the country* (which fortunately has been temporarily enjoined as unconstitutionally discriminatory). All of these cuts are taking us in the wrong direction, as more people find themselves needing to turn to the Medicaid and SAGA programs due to the prolonged recession and resulting job losses.

Reliant as we are on a jobs-based health care system, I want to remind you that investing in our public health care system actually creates dollars and jobs in the state. The health care system is critical to Connecticut's economy, and this includes our Medicaid system, which is a large and crucial piece of the whole. In 2005, Families USA found that, due to what economists refer to as a multiplier effect, every dollar spent on Medicaid in Connecticut creates \$2.09 business activity and that each \$1 million of Medicaid spending in Connecticut results in 16.67 new jobs being created. So, as well as investing in the health of Connecticut's workforce, investing in our public health care system is an investment in Connecticut's economy.

Finally, along with raising revenue there is another proposal that would save us taxpayers money *while* increasing the quality of care that Connecticut's physicians would be able to provide to our HUSKY populations. Although the Governor's proposed move from capitated HMOs to ASOs is welcome, moving to PCCM will save even more money, put care in the hands of those most able to coordinate it—the treating primary care providers—and provide a stable alternative to the ever-changing set of risk and non-risk corporate contractors which have moved in and out of the HUSKY program over the last 3 years. Under PCCM primary care providers, rather than a contracted insurance company, are responsible for coordinating health care. Under the PCCM model already rolled out by DSS last year, primary care providers are paid \$7.50 per member per month for providing this service, in addition to any health services they provide which are reimbursed on a fee for service basis. By contrast, when we last had ASOs administering the HUSKY program, in 2008, they were paid \$18.18 per member per month just for administrative services, with all medical costs being covered by DSS. I therefore join my colleagues in urging you to invest in the statewide rollout of PCCM without delay, for both HUSKY A and B populations, to get us going on an established model for providing quality care at a lower cost to the taxpayers.

Ultimately, whatever the reason for the cuts, they mirror a basic unfairness that reflects badly on everyone in the state. We need to protect practices and services that are fair to all people hence we must seek a balanced solution to the current fiscal crisis. Reflecting on Connecticut's future economic forecast, as was presented right here at a recent forum hosted by Voices for Children, we must recognize that just as more people have come to the public system in the past few months, more people will continue to need these valuable services and we can't afford to not be there for one another. Furthermore, as well as being a public good, our public health care system is an economic driver that we can't afford to loot at this crucial moment.

Once again, thank you for your service to the people of the state and thank you for the opportunity to speak with you this evening.