

Testimony of

Julia Evans Starr, Executive Director
Connecticut Commission on Aging

Appropriations Committee

Governor's Deficit Mitigation Plan

March 11, 2010

Thank you for this opportunity to comment on Governor Rell's proposed deficit mitigation package.

The Connecticut Commission on Aging is a nonpartisan state agency that is part of the legislative branch of government. We are devoted to preparing our state for a burgeoning aging population while promoting policies that enhance the lives of the present and future generations of older adults. For over sixteen years, the Commission has served as an effective leader in statewide efforts to promote choice, independence and dignity for Connecticut's older adults and persons with disabilities. As part of our statutory mandate set forth in CGS §17b-420, the Connecticut Commission on Aging reviews and comments on proposed state legislation and budgetary issues.

As you know, the US Supreme Court's *Olmstead* decision and Connecticut state law (CGS §17b-337) require that individuals with long-term care needs have the option to choose and receive long-term care and support in the least restrictive, appropriate setting.

The Connecticut Commission on Aging has profound concerns about many aspects of Governor Rell's proposed deficit mitigation package, which make it more difficult for our state to comply with *Olmstead*, by eroding support for both community and institutional programs and services.

It should be noted that Connecticut is due to keep an additional \$44.8 million in the current year, due to federal forgiveness of "clawback payments" related to Medicare Part D. Kathleen Sebelius, Secretary of the Department of Health and Human Services (HHS), has specified that the federal government is forgiving these payments in order to "help states as they struggle with Medicaid." However, the proposal before you does not dedicate these funds to Medicaid; it raids this money and puts it to General Fund purposes—at the same time as cutting programs the money is intended to protect.

We have attached a list of some of the most harmful proposed cuts.

Recognizing the difficult fiscal climate, the Commission on Aging urges this Committee to commit itself to the standards set forth by *Olmstead*. Providers across the spectrum are in need of rate relief if they are to continue to provide high-quality services; state-run programs should ensure that enrollees are receiving the services they need to get and stay healthy and to live with dignity and independence.

Study after study shows that reform of the long-term care system will improve care while saving the state money. The Commission on Aging respectfully requests that policymakers focus their efforts on system reform, instead of chipping away at programs that help older adults and persons with disabilities.

Thank you.





Connecticut Commission on Aging

A Nonpartisan Research and Public Policy Office of the Connecticut General Assembly



Update: Programs and Services Affecting Older Adults and Persons with Disabilities Targeted in the Governor's Deficit Mitigation Plan (March 11, 2010)

This update is provided as part of the Commission on Aging's ongoing mission to educate policymakers and stakeholders about emerging issues affecting older adults in CT.

A number of programs and services have been recommended for cuts through the Governor's most recent Deficit Mitigation Plan (March, 2010). Notably, many of these cuts are also contained in Governor Rell's budget proposal for FY '11. Some of the changes recommended for the current fiscal year are:

- Elimination of **coverage of eyeglasses** for individuals receiving Medicaid;
- Elimination of **coverage of nonemergency dental care** for adults in Medicaid and SAGA;
- Elimination of **coverage of over-the-counter drugs under Medicaid**;
- Imposition of a required **copayment for low-income older adults** and persons with disabilities on Medicaid;
- **Restriction of certain mental health drugs**, by requiring them to be on the Preferred Drug List;
- **Increased Medicare Part D copayment requirements** for low-income individuals on both Medicare and Medicaid ("dual-eligibles");
- Imposition of a more **restrictive definition of "medical necessity,"** which could limit individuals' access to certain prescription drugs and durable medical equipment;
- **Reduced provider rates** for Medicaid providers, including nursing homes, and no increase for **adult day centers**, which provide needed respite for caregivers;
- Reduced support for **Operation Fuel**, which provides energy assistance to individuals just above the poverty level;
- Elimination of funding for certain **elderly transportation initiatives**, which provide real options for older adults living in their communities; and,
- **Reduced employment opportunities and day programs** for persons with developmental disabilities.

Did you know?

The federal government has forgiven payments due from CT and other states "in order to help states as they struggle with Medicaid" (HHS Secretary Sebelius). As a result, **CT will have an additional \$44.8 million in federal funds this fiscal year.**

The governor proposes to use this new money for General Fund deficit mitigation.

For more information, please contact the CoA at 860-240-5200.

CT Commission on Aging
210 Capitol Avenue, Room 509
Hartford, CT 06106

Phone: (860) 240-5200
Website: www.cga.ct.gov/coa
Email: coa@cga.ct.gov

*Working at the State Capitol and beyond
to ensure a brighter future for our state and
for older adults of today and tomorrow.*