

**TESTIMONY OF WILLIAM ACOSTA – HUMAN SERVICES COMMITTEE
FEBRUARY 23, 2010**

My name is William Acosta and I come before you today to address Governor's Bill No. 32, "An Act Implementing the Governor's Budget Recommendations Concerning Social Services." I am advocating *particularly* against the removal of the protective language in Section 33, subsection "f" and the proposed *removal* of the current language that does not require prior authorization for mental health-related medications

I am a case worker at Bridge House, Inc. in Bridgeport. Bridge House is a psychosocial rehabilitation program for adults recovering from the persistent effects of psychiatric illness. The mission of Bridge House is to provide a positive, encouraging environment of programs and support which give persons with psychiatric disabilities opportunities to live productive and satisfying lives.

I am also a parent *and* child of people with psychiatric disabilities who depend on state medical assistance to live their lives. My mother suffers from a psychotic disorder (as well as cerebral palsy), and my son has been diagnosed with Major Depressive Disorder and Attention Deficit Disorder. The excruciating emotional pain of witnessing them in their distress when they are not doing well cuts to the core of my own ability to cope with what many of us take for granted in our everyday lives.

If there are budget cuts and flaws in their access to medications they need, their conditions will be at risk of becoming all the worse.

At Bridge House alone, there are many, *many* Clubhouse members who are currently on Medicaid. And there are countless adults who receive Mental Health services across the state who rely on Medicaid.

We urge you to reject the removal of the language in Section 33, subsection "f" as prior authorization will hurt people who already are compromised economically and

suffer from mental illness. Requiring prior authorization can easily result in patients not following through on these authorizations because the process is confusing to them; if they don't follow through, a delay can result in obtaining the medications sorely needed, and, conceivably, end up jeopardizing the patient's health, resulting in them being hospitalized, and resulting in a markedly higher cost to CT taxpayers.

If persons who have mental illness (particularly the working disabled) have to resort to generics rather than brand name medications, they will be exposed to side effects which will complicate other illnesses that they may have besides the illness for which they would be taking the brand name medications. This also would result in additional costs to CT taxpayers—creating more costs to the state. The working disabled will be affected because their income is already markedly limited.