

Testimony of

**CHARLES SEEMAN, PRESIDENT/CEO
UNITED COMMUNITY AND FAMILY SERVICES, INC.**

**BEFORE
THE COMMITTEE ON HUMAN SERVICES**

**REGARDING
GOVERNOR'S BILL 1013
AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET
RECOMMENDATIONS CONCERNING HUMAN SERVICES**

March 15, 2011

Senator Musto, Representative Tercyak and distinguished members of the Committee on Human Services, I am Charles Seeman, President and CEO of United Community and Family Services, Inc., a Federally Qualified Health Center (FQHC) Look-alike serving Eastern Connecticut. I am testifying in opposition to language in Governor's Bill 1013, ***AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET RECOMMENDATIONS CONCERNING HUMAN SERVICES***, that if implemented will negatively impact the health status of our community.

Of specific concern are:

- Section 6: *The Commissioner of Social Services shall limit the extent of adult dental services provided under the Medicaid program to such services that may be provided within available appropriations.*
 - o Southeastern Connecticut's Legislative Delegation has demonstrated its willingness, and commitment, to gathering all facts regarding such important public health issues to better inform policy.
 - o The language in this bill seems to remove that process. Potential negative impact on your constituency deserves a well thought-out discussion informed by all potential savings, health impacts, and future costs such measures invariably impose on the health care system.
 - For example, the Governor's budget proposes to limit preventive dental visits for adults covered by Medicaid to one time per year
 - Prevention and early detection are always less costly than treating more advanced oral health conditions



- There are more than 120 medical conditions – many of them life-threatening – that can be detected in the early stages by a dentist, including heart disease, kidney diseases and various cancers.
 - Gum disease in pregnant women is also linked to pre-term, low-birthweight babies
- Section 7: *The Commissioner of Social Services shall, to the extent permitted by federal law, impose cost-sharing requirements on Medicaid recipients*
- Our low-income population cannot afford copays. The result of this measure will be:
 - Vulnerable clients ignoring healthcare needs because they cannot afford the copay
 - Prevention and early detection are always less costly than treating chronic conditions or illnesses at a more advanced stage
 - Clients seeking care but arriving without the ability to provide the copay.
 - We can't deny care if a client doesn't have their copay. A copay amount of \$3 has been suggested in the Governor's budget. It would frankly cost more to try to collect the \$3 than to write it off. A \$3 copay would expose us to a loss of more than \$81,000 per year.

We urge you to strongly consider the totality of the cuts being imposed on the healthcare system when making state budget decisions, particularly those that affect our ability to provide direct care to our most vulnerable clients. Healthcare delivery is a local business – cuts such as these resonate throughout our local economy.

I thank you for your consideration.

