

**Testimony before the Appropriations Committee and Human Services Committees
In Opposition to CT Department of Social Services 1115 Waiver Proposal**

July 24, 2012

Submitted by: Marcia DuFore, Executive Director, North Central Regional Mental Health Board

Thank you for the opportunity to speak in opposition to the Section 1115 Waiver proposal being submitted by the CT Department of Social Services.

My name is Marcia DuFore. I am testifying as Executive Director of the North Central Regional Mental Health Board. Our Board is mandated by statute to study the mental health needs of people in our region and assist the CT Department of Mental Health and Addiction Services with setting priorities for improved and expanded services to meet those needs. In order to carry out that responsibility, we do a lot of listening. We hear and hope to give voice to the stories of people in our region.

My office has recently heard and hopes to give voice to the stories of numerous recipients of Medicaid and SNAP benefits who are suffering. They are suffering because, having submitted redetermination paperwork for continuing their benefits, benefits they need to maintain health, in several cases resubmitting that paperwork as many as 5 times, they are being notified that their benefits have been cut off due to their failure to cooperate with the redetermination process. In reality they are being cut off because the DSS offices are so backlogged, they are unable to process applications in a timely manner, even find applications that have already been submitted and log them in so that people are not cut off while their application is pending. Instead, their system automatically sends out notices and cuts off those benefits if the paperwork has not been processed in time.

I want to comment again that, for the people who are telling us these stories, this creates more than just confusion, disruption, and frustration. It actually causes harm. The people who have talked to us have gone without food, medical care, and medicine that keeps them well. And because our members face the additional daily challenges of living with a mental illness, this confusion, disruption, frustration, and harm can actually aggravate their symptoms, actually make them sick. I reiterate this because, if approved, this Waiver stands to exasperate this problem. DSS is not in a position at this time to implement a process that requires an even more rigorous review with additional paperwork requirements – a process that will cause additional delays and delays in which recipients will lose coverage. The delays will impact ALL Medicaid recipients, not just those who qualify under LIA.

These are difficult economic times, when state government must be frugal in order to meet its fiscal challenges. So, in concept our Board does not take issue with a reasonable asset test or providing government funded medical insurance as a last resort for young people who have access to coverage under their parents' medical plans. It should be taken for granted, however, that young people who live with their families can count on their families for coverage. We cannot assume their families have insurance

themselves, have employment that offers family coverage, or can afford the additional cost of family coverage even if they have that option. We have to remember that at an asset limit of 55% of federal poverty level, we are talking about the poorest of the poor.

By design, the 1115 Waiver program must do more than just save money. It must demonstrate something and must take into consideration any negative impact the project may have on Medicaid enrollees – those the Medicaid Act was designed to help. This proposal, given the severity of problems DSS is currently experiencing, does neither. It is destined to cause further delays, further harm. Savings, if any, will come on the backs of vulnerable people who are already routinely being denied coverage and suffering the results.

And so we urge you to reject this proposal.