

Testimony presented by Marcia DuFore
On behalf of North Central Regional Mental Board
February 22, 2013

Distinguished Senators and Representatives of the Appropriations Committee,

My name is Marcia DuFore. I am testifying as Executive Director of the North Central Regional Mental Health Board (NCRMHB). Our Board is mandated by statute to study the mental health needs of people in our region and assist the Department of Mental Health and Addiction Services (DMHAS) with setting priorities for improved and expanded services to meet those needs. Our volunteer evaluators include people who use services, their families and concerned citizens in the towns and cities where services are delivered.

We appreciate and thank you for your efforts and those of the Governor to preserve critical services that maintain a safety net for some of our most vulnerable citizens.

We would like to speak about some of the proposals in the Department of Social Services (DSS) budget for FY 2014 that are aligned with these efforts and that continue in the very positive direction of investing in our communities and the lives of our constituents. We also wish to express concern about some proposals that we anticipate will seriously hurt our constituents.

We urge your support for a real **cost of living increase for non-profit providers**. We are concerned that many of our community providers are at a breaking point, leaving critical gaps in the continuum of care for our constituents.

We especially appreciate and urge your support for expanded eligibility for low income adults in the Medicaid program. Clearly this makes sense from a fiscal perspective given the anticipation of a 100% reimbursement from the Federal government. From the human perspective of our constituents, this is a long-awaited welcome change. This will allow people who are just barely able to cover their living expenses, yet not able to access healthcare services due to the amount of their spend down, to obtain the care they need. We do wish to express our concern and opposition to the establishment of an alternative, second-tier benefit package for these individuals that would limit their access to needed services. We urge your support for an increase in the reimbursement rate for primary care providers. Again, this is a measure that makes sense from a fiscal perspective given the 100% reimbursement from the Federal government. From the human perspective of our constituents, it increases their chances of finding a physician who is willing to treat them, because the reimbursement rate comes closer to covering the cost of their care.

We are concerned about the elimination of coverage for parents on HUSKY who earn between 133% and 185% of the Federal Poverty Level. We understand that this change is being proposed with the expectation that these families will be able to purchase insurance through the newly established health insurance exchange. However, given what we have learned so far about the cost of insurance through the exchange, it appears unlikely that families at this income level will be able to afford the premiums, co-pays, and deductibles in these plans. It is more likely that they will become uninsured. We are also concerned that establishing different eligibility criteria for parents and children in the same family will create further backlog in the DSS eligibility process - already an issue that continues unresolved for our constituents.

We are concerned about the proposal for step therapy under the pharmacy program. We agree that the use generic alternatives to brand name medications may result in cost savings and should be considered when appropriate. We are concerned, however, that this proposal takes that consideration outside the scope of the doctor-patient conversation. It is also our understanding that step therapy is an especially sensitive issue when used for treating psychiatric conditions due to differences between absorption rates and the variable effects of binding agents used in different medications.

We are extremely opposed to the elimination of the cost of living adjustment for our constituents who receive disability benefits under the aged, blind and disabled program. These are resources that come from the Federal government for their basic needs that are parallel with increases in their cost of living due to inflation. With this proposal, as the cost of living increases and the income of our constituents' remains stagnant, we are setting them up for an actual decrease in their financial status. Why would Connecticut do this to some of our most vulnerable citizens?

I hope you will consider these concerns as you begin your budget deliberations. We understand what a difficult task this is, and do not envy you your position.

We do thank you for your time, interest, and attention.