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CHC of New Britain
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02/22/2013

Amy D. Gagliardi

To: Senator Toni Harp, Representative Walker and members of the appropriations committee

Re: DSS Budget: Healthy Start Testimony

Good evening. My name is Amy D. Gagliardi and I am here to provide supportive testimony for the maintenance, continuance and development of the Healthy Start Program and funding. I have worked in the field of Maternal and Child Health for over 25 years in various capacities, including Healthy Start oversight, and have served prenatal and postpartum women while working at a federally qualified health center for the past 18 years.

The charge of Healthy Start is to reduce the rate of infant mortality, preterm birth/low birth weight babies and to improve perinatal outcomes. The secret to the demonstrated success of Healthy Start lies in the fact that this program is **Community Driven, Service Focused and Effective**. When funded adequately Healthy Start facilitates medical care, helps at risk women have their basic needs met (for example housing and food), and teaches women how to advocate for themselves and their newborn babies.

According to the US department of Health and Human Services (HRSA) core Healthy Start services include:

- Direct Outreach
- Client recruitment
- Health education
- Case management
- Depression screening and referral
- Interconceptional care services

These evidenced based intervention services for pregnant and postpartum women are essential to the success of Healthy Start whether the program is funded federally or through state Healthy Start dollars. In Connecticut the task of application assistance is an additional core service added to that of the national model. Five Healthy Start contractor sites in Connecticut receive the bulk of the funding made available for this program while others sites struggle as sub-contractors to maintain their programs due to inadequate funding.



Serving underserved and uninsured patients at Connecticut's largest network of community health centers.

At Community Health Centers, Inc. we provide prenatal and postpartum care to over 500 women annually in our health centers in Middletown, Meriden, Clinton and surrounding areas. Most of the women we serve are uninsured, underinsured or have state Medicaid HUSKY A coverage for prenatal care. Regardless of coverage we provide the full spectrum of Healthy Start services which at this time include application assistance, case findings, care coordination, intensive case management, health education, depression screening and referrals, breastfeeding education and support, outreach, ongoing case review with our prenatal medical providers, as well as prenatal and postpartum visits which include interconception care.

At Community Health Centers, Inc. we have proven success in the areas of birth outcomes. We have integrated this Healthy Start model directly into the perinatal care medical setting. Results of studies done over a recent 5 year period on birth outcomes in our Middletown and Clinton offices reveal a primary cesarean rate of 21.2%, a low birth weight rate of 5.5%, and a preterm birth rate of 6.3% . With soaring rates of cesarean births in Connecticut and rates of prematurity over 10% for our state's Medicaid population, our outcomes are evidence that we as a state are able to improve perinatal outcomes among at risk women. By integrating Healthy Start Program services into prenatal medical care we have been able to demonstrate perinatal outcomes which are an improvement not only over Medicaid outcomes but also of the general population.

The role of the Healthy Start worker is invaluable towards the successful delivery of care to our at risk maternal and infant population. As a Healthy Start sub-contractor we receive 35k, which is less than the cost of one position within our three Healthy Start program locations. Please bear in mind that we must provide all of the uncompensated prenatal care to uninsured women at a fraction of our cost and of what is needed to support the continuation of our program. There is an increasing number of uninsured pregnant women in Connecticut and we have seen an increasing number of uninsured women as part of our Healthy Start population. Adequate Healthy Start funding is essential in order to continue to offer the full spectrum of recommended Healthy Start core services.

I respectfully request your consideration of maintaining rather than decreased funding for Healthy Start as well as a thoughtful review of core Healthy Start services. I further request your consideration of how Healthy Start funding is disbursed across our state to include a more equitable distribution of Healthy Start funds and a consideration of program service delivery venues which are able to integrate these services within the medical care setting in order to more fully realize the potential to improve perinatal outcomes which this program has been proven to support.

Please do not hesitate to contact me with additional questions.

Respectfully Submitted,
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