



# STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

**TESTIMONY PRESENTED BEFORE THE COMMERCE COMMITTEE**  
**March 7, 2013**

*Jewel Mullen, MD, MPH, MPA, Commissioner, 860-509-7101*

**House Bill 5568 – An Act Concerning Targeted Health Areas**

The Department of Public Health opposes House Bill 5568. The proposed legislation would establish a Targeted Health Area program and provide economic incentives to licensed physicians and physician offices providing primary care services or needed medical specialties in such targeted health areas. Targeted health areas that have (1) a medically-underserved population, or (2) a population with a high rate of chronic disease would be designated by the Commissioners of Public Health, Social Services and a representative designated by the Connecticut State Medical Society, within available resources.

The State Primary Care Office (PCO) at the Department of Public Health (DPH) receives federal funding through a cooperative agreement with the Health Resources and Services Administration (HRSA), to work with communities to improve access to care for the underserved and uninsured in federally designated shortage areas. The federal funding supports the PCO working with communities to identify geographic areas (census tracts, municipalities, and counties), population groups, and health care facilities experiencing critical shortages of primary care, dental and mental health providers, in accordance with the federal HRSA guidelines.

The PCO identifies areas that may meet federal guidelines for Health Professional Shortage Area (HPSA) and Medically Underserved Area/Population (MUA/P) designations. The cooperative agreement also requires that the PCO work collaboratively with the federal National Health Service Corps (NHSC), which administers a federal loan repayment program (LRP) to recruit and retain health professionals in federally designated HPSAs. The LRP is made available to primary care physicians (family practice, internal medicine, OB-GYN, and pediatricians), nurse practitioners, certified nurse-midwives, physician assistants, dentists, dental hygienists, and behavioral and mental health providers (psychiatrists, health service psychologists, licensed clinical social workers, marriage and family therapists, psychiatric nurse

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specialists, and licensed professional counselors) to provide culturally competent, interdisciplinary primary health care services to underserved populations. A federal scholarship program is also made available to students enrolled in a nationally accredited health professions university majoring in a primary care discipline. In exchange for a loan repayment award or scholarship, the recipient must provide service in a federally designated shortage area. In addition, the federal Centers for Medicare and Medicaid Services (CMS) provides Medicare bonus payments for physicians who furnish medical care services in geographic areas that are designated as a primary care and/or a mental health HPSA.

The Department does not currently have complete information on chronic diseases at the local level. Although there are data sources that can provide limited information on chronic disease prevalence, it is not possible to reliably compare localities by rates of chronic diseases. The Behavioral Risk Factors Surveillance System (BRFSS), a voluntary phone survey of adults, conducted by DPH to track health conditions and risk behaviors of the general population is the best representation of chronic disease prevalence for the State. However, the BRFSS does not have a sufficient sample size to measure the prevalence of chronic conditions at the local level. A comprehensive large-scale data collection, management and analysis system would need to be created and implemented to obtain the necessary chronic disease prevalence data to determine populations with a high rate of chronic disease as described in this Bill. Additional reporting requirements, technology and staff would be needed to compile information on chronic disease incidence and identify any needed medical specialty at the municipal level.

Thank you for your consideration of the Department's views on this bill.

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