



United Community & Family Services

*A Legacy of Caring since 1877*

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Testimony of

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

Before the

**PUBLIC HEALTH and APPROPRIATIONS COMMITTEES**

Regarding

**REPORT TO THE PUBLIC HEALTH AND APPROPRIATIONS COMMITTEES REGARDING  
FINANCIAL ASSISTANCE TO COMMUNITY HEALTH CENTERS**

**December 12, 2013**

Senator Harp, Senator Gerratana, Representative Walker, Representative Johnson and members of the Appropriations and Public Health Committees:

My name is Chuck Seeman and I am CEO of United Community & Family Services (UCFS), the state's only Federally Qualified Health Center Look-Alike. We have outpatient service locations in Norwich, New London, Colchester, Jewett City and Plainfield. We offer primary care, women's health, dental and behavioral health services. We are budgeting close to 110,000 outpatient visits this fiscal year ending June 30, 2014.

I am here to speak about the Department of Public Health's proposal to distribute grants for the uninsured to Connecticut's Community Health Centers. DPH has recognized the unique status of UCFS as a Federally Qualified Health Center Look-Alike in its proposal to you.

As a federally qualified health center look alike, UCFS is ineligible for the millions of dollars in annual operating grants, the \$50 million dollars of Recovery Act and Affordable Care Act dollars which came to Connecticut's Health Centers, access to federal capital grants, FTCA coverage (malpractice coverage) and more. On Tuesday, Vice-President Biden announced \$50 million in new funds for behavioral health



treatment at Federally Qualified Health Center grantees, but UCFS will not be eligible to apply for these competitive grants. While we are held to the same standards and regulations as grantees, we receive almost none of the benefit.

Because of our lack of access to federal funding provided to FQHC grantees, UCFS relies much more on state funding. In the past three years we have submitted applications to become a grantee but have been unsuccessful. While we operate in a fairly poor community, our poverty level does not match that of other regions in the United States. There were no new start applications approved for Connecticut in this last round of funding.

However, while UCFS appreciates the recognition by DPH of our unique status, we understand that some Connecticut Health Centers lose funding under any of the options. We would ask you to take this into consideration as you discuss the report and seek a way that no center will lose funding in these very difficult times when all centers are seeing an increased caseload and all centers will be at the forefront of implementing the roll-out of the ACA next year. Whatever the outcome, we would appreciate your continued recognition of our Look-Alike status as DPH has done.

Thank you.

