

**TESTIMONY OF
BILL HOEY, LCSW
VICE PRESIDENT, MISSION & ETHICS
ST. VINCENT'S HEALTH SERVICES
BEFORE THE FINANCE, REVENUE & BONDING COMMITTEE
Thursday, March 13, 2014
SB 368, An Act Phasing Out The Hospital Tax**

My name is Bill Hoey, and I am the Vice President of Mission and Ethics at St. Vincent's Health Services. I am here today to testify in support of SB 368, An Act Phasing Out The Hospital Tax.

One of the things we are most proud of at St. Vincent's is our work with Bridgeport Hospital, the Primary Care Action Group, Connecticut state agencies, and the city of Bridgeport to create the Hope Dispensary of Greater Bridgeport. The Hope Dispensary opened almost exactly three years ago to provide sorely needed prescription medicines at no cost to uninsured, low-income residents of greater Bridgeport. It is Connecticut's first, and to-date *only* Dispensary of Hope site.

We created an innovative system to collect still-viable prescription medicines donated by physicians' offices and local pharmacies who are delighted to recycle their unused medicines and contribute to public health. A licensed St. Vincent's pharmacist is on site assisted by an AmeriCorps intern. Medications for treatment of cardiac, pulmonary, mental health diagnoses, and diabetes are provided, but the dispensary does not stock controlled or contraceptive drugs.

We have recently seen an explosion in the number of people coming to the Dispensary. We have filled well over 3,000 prescriptions so far this year, and we're not just seeing the uninsured. People on the lower quality insurance products, who have high co-pays, are coming in for help every day. There is a misconception – some people think fewer people are falling through the cracks because of health reform, and there are safety nets available to help. I'm here to tell you that many people are not getting what they need. From what we're seeing at the Dispensary, this group is growing... and they need support.

Meanwhile, those on Medicaid have limited access to primary physicians, so they end up coming to clinics or the ER to access care. Access to specialty care is a major issue as well. For someone on Medicaid, access to an orthopedist in Fairfield County is virtually impossible because they don't accept Medicaid. If you want to see a podiatrist, even if you are a diabetic, the wait time is 39 weeks. What ends up happening is the foot becomes ulcerated and the patient ends up in the ER. But hospitals cannot run clinics in all the specialties; they are financially strained as it is, and now layering on the hospital tax makes it that much harder.

What is not fully appreciated is that having a card that says you have health insurance is great, but if nobody takes it or if your co-pays are so high that you can't afford your medications, it is as good as not having one.

Three years ago, when we started the Hope Dispensary, the healthcare landscape was vastly different. And the truth is, the sands are still shifting under our feet right now. There are three things we know. First, health reform isn't a cure-all to what ails the system. Second, there is a growing need for hospital and safety net services. And third, the hospital tax impacts the ability of hospitals to adapt to these changing and growing needs. The healthcare system is under enough pressure today. The tax needs to go.

Help support SB 368 and help us phase down the hospital tax. Thank you for your consideration.