



# Community Health Center Association of Connecticut

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Testimony of

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*House Bill 6846: An Act Implementing the Governor's Budget Recommendations  
for Human Services Programs*  
Human Services Committee

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Good afternoon, Senator Moore, Representative Abercrombie and members of the Human Services Committee, thank you for the opportunity to provide comments on House Bill 6846, which will impact tens of thousands of Connecticut residents.

On behalf of Connecticut's federally-qualified health centers (FQHCs), I express deep concern about sections 3 and 5, which lower HUSKY eligibility for parents and pregnant women.

Connecticut's 14 FQHCs are located across the state and serve 342,000 patients each year (1 in 11 Connecticut residents), 95% of whom are low income (under 200% of federal poverty level). In 2013, more than 4,600 prenatal patients received care at FQHCs. Overall, approximately 60% of FQHC patients were on HUSKY and 22% were uninsured. Even with the implementation of the Affordable Care Act, FQHCs are still seeing many uninsured patients; they are mandated by federal law to see all patients, regardless of ability to pay – and just as important, that is their mission.

FQHCs are able to maintain services because of a combination of federal and state grants, which help to fill in the gaps left by patients who cannot pay, those who pay on a sliding fee scale and underpayment by HUSKY. Across FQHCs, HUSKY covers about 87% of cost for FQHC visits. There is no cost shifting to patients on commercial plans.

Our concern with lowering eligibility for HUSKY is multi-fold. As you know, HUSKY provides a robust health plan that includes dental, medical and behavioral health care, with no copayments. It is designed this way to remove as many barriers as possible to accessing health care. The 35,000+ individuals who lose HUSKY eligibility under this proposal would instead be channeled into qualified health plans sold on Access Health CT – plans which have monthly premiums, deductibles before coverage kicks in (except for preventive care), copayments for services, and no dental coverage at all. It is very likely that many of these individuals would never purchase a plan through Access Health; would purchase a plan, but not keep up with the

monthly premiums; or would keep up with the premiums but reduce their usage of needed health care services.

Those who are patients at FQHCs would continue to be able to access care as long as the FQHCs are able to stay in business providing services. However, the elimination of HUSKY payments for services to these patients will present a challenge to the already-fragile bottom line of FQHCs. These individuals, who were once on HUSKY, will be essentially uninsured until they reach their deductibles; at FQHCs, they will pay for services on a sliding fee scale, which will cover only a fraction of the cost of a visit.

The reduction for pregnant women could lead to additional problems, as these women may not seek proper prenatal care. Combined with the proposed elimination of Healthy Start, this cut could jeopardize both the woman and her child, who, notably, will likely be a HUSKY enrollee upon birth.

Even in this difficult budget year, Connecticut must remain a national leader in the provision of health care to our residents. I ask this Committee to reject the governor's proposals to reduce income limits for HUSKY.

Thank you.