



**Testimony of Nicholas Bennett MA(Cantab), MBBChir, PhD, FAAP,
Division of Infectious Diseases at Connecticut Children's Medical Center
to the Appropriations Committee regarding the Department of Social Services Budget for
Fiscal Years 2016-2017**

February 27, 2015

Senator Bye, Representative Walker, members of the Appropriations Committee, thank you for the opportunity to speak with you today. I am Dr. Nicholas Bennett, and I am Medical Director of the Division of Infectious Diseases & Immunology and Co-director of the Antimicrobial Stewardship Program at Connecticut Children's Medical Center. I am here today representing the pediatric physicians who strive each day to provide the best possible health care services to the children of our region.

Connecticut Children's primary concern in the state budget is Medicaid. This year, our Medicaid costs will exceed State payments by \$ 49 million, which represents 17% of our overall budget. Connecticut Children's and Medicaid have a unique relationship. With more than half of our inpatient care and nearly two-thirds of our emergency care devoted to children who rely on HUSKY, Connecticut Children's has by far the highest Medicaid percentage of any Connecticut hospital. During the economic downturn, those percentages have increased significantly as children have switched from private coverage to Medicaid. As Mr. Marty Gavin's testimony states, the wide and increasing Medicaid shortfall, combined with the fact that the majority of children now treated at Connecticut Children's are covered by HUSKY, means that we're in a situation where the more patients we treat, the more money we lose. This is an unsustainable situation and puts at risk the care we provide to all children, regardless of insurer.

As a pediatrician specializing in infectious diseases, I have been particularly busy this year, first with the Ebola outbreak in West Africa and more recently with the measles outbreak and the spotlight it placed on childhood immunizations. I am particularly proud of the work accomplished last fall as we focused on Ebola preparedness. I believe our pediatric experts are uniquely prepared to handle public health emergencies, with a child and family centered approach. Over five short but intense weeks last fall, the Connecticut Children's Ebola Task Force designed and tested clinical pathways to safely detect and care for children with Ebola. We conducted seven high level drills simulating scenarios involving suspected or confirmed Ebola patients, trained nearly 100 clinical personnel, and remodeled four patient rooms to a standard similar to that of the infectious disease treatment center at Emory. All of this planning and preparation is completely transferable to other emergency situations that may arise in the future, as we trained to a level above and beyond that recommended to handle children with Ebola.

During my pediatric training, I was involved with several clinical trials of childhood vaccines and I have had many opportunities recently to speak publicly about vaccines as part of the national conversation about measles. The current vaccination schedule is the best-studied method we have of reducing the risks of serious, preventable infections in children. Risks from vaccinations are low, and in every case, the vaccine is better than getting the real disease.

Connecticut Children's cares for a large number of vulnerable children who are at high risk of serious disease from these infections, and they rely on everyone else staying healthy around them. When a child isn't immunized it puts them, but also everyone around them, at a higher risk of catching and spreading the infection. At Connecticut Children's Primary Care Center, about 99% of their kids are fully immunized. The national average is only 91%. No vaccine is 100% effective, and some children are too young or too sick to be immunized, so we must all do the best we can to keep coverage up and prevent outbreaks. Vaccination is one of the most important public health efforts at keeping everyone healthy, and Connecticut Children's is doing its part to make the children of Connecticut the healthiest in the nation.

Above and beyond the care we provide, Connecticut Children's is also an educational center for the future physicians of tomorrow, being the center for pediatric training for the medical students at the University of Connecticut, and providing residency programs in pediatrics and pediatric medical and surgical subspecialties. Our research efforts are consistently greater than those expected for an institution of our size, and several investigators, themselves excellent clinicians, are recipients of million-dollar research grants, including competitive NIH awards, to investigate the treatments of tomorrow, not just today. That research and teaching simply isn't possible without an institution like Connecticut Children's.

All children should have the health care they need to grow and lead healthy productive lives. Everyone benefits when children are able to access critical services close to home. The State needs to find a permanent solution to Connecticut Children's Medicaid funding problem to make sure those benefits are always there for my children and yours. It is critically important for the State to recognize and provide coverage for those uninsured children who are often at highest risk, but the State must pay safety net providers like Connecticut Children's adequately in order to ensure access to care.

And I speak to you now as a parent of two children, one of whom has been cared for at Connecticut Children' Medical Center by two of the specialties there. I would always recommend that a sick child be seen and cared for at a dedicated children's hospital. We are incredibly lucky to have such an institution right here in Hartford, positioned and able to provide excellent medical and surgical care in a truly family-centered manner. They don't just care **for** children, but they care **about** children, each and every one that comes through their doors.

Thank you.