

CONNECTICUT LEGAL RIGHTS PROJECT  
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Kathleen M. Flaherty, Executive Director

Statement for Appropriations Committee, Human Services Subcommittee  
Public Hearing February 11, 2016

REGARDING H.B. 5044, AN ACT MAKING ADJUSTMENTS TO STATE  
EXPENDITURES FOR THE FISCAL YEAR ENDING JUNE 30, 2017

Opposed to: restructuring of budgets for DSS and DCF  
Opposed to: proposed cuts to DSS and DORS

Senator Bye, Representative Walker, and other members of the Committee:

My name is Kathy Flaherty. I am the Executive Director of Connecticut Legal Rights Project (CLRP), a legal services organization that advocates for low-income individuals in institutions and in the community who have mental health conditions. We support initiatives that integrate individuals into the community. Our clients utilize the services of the Department of Social Services. For this reason, we are against several proposals in the Governor's budget.

These are certainly challenging fiscal times for Connecticut, and there is a clear need to identify priorities for state funding. This will be a difficult task for those who have to make the final decisions. Agencies have been instructed to identify what they consider to be core services. One example of agency identification of core services in the budget presentation from OPM was this for DSS: "promoting and supporting the choice to live with dignity in one's home and community."

It is not clear to me how consolidating funding for these various line items into one pot of money subject to a 5.75 percent cut promotes and supports a person's choice to live with dignity in one's home and community: Safety Net Services, Emergency Assistance, Services for Persons with Disabilities, TANF, and Domestic Violence Shelters. These seem to be exactly the kinds of core services individuals would need to have available in order to live with dignity in the community.

We are opposed to the consolidation of agency operating funds into a single line for every agency, with agency discretion as to expenditures, because there is no clear indication how various programs will be affected. If all lines are subject to across-the-board cuts there is no opportunity to more closely examine individual lines for merit and their potential for cost savings. The current proposal makes it difficult, if not impossible, for the public to give meaningful input on specific line items because no process has been identified for determining whether and when cuts will be made, and how much will be left to agency discretion.

Another policy choice currently affecting people who are eligible for both Medicare and Medicaid – people who are elderly or disabled – was the removal of the \$15.00 cap on prescription co-pays that was instituted as of July 1, 2015. People whose medication costs have gone up since July may not understand why their medications are more expensive when they go to the pharmacy to fill their prescriptions. Many of these individuals take multiple medications, and they live on fixed incomes – they do not have additional money in their limited budgets for these expenses. People are likely choosing between getting a prescription necessary for their health and using their money to meet their other basic needs. They should not be forced to make this choice.

Seniors and people with disabilities who utilize the rent rebate program will not be able to access those benefits if the program is redesigned so that it is only awarded “within available appropriations.”

The state’s Centers for Independent Living are slated for elimination from the DORS budget. The impact of this cut will not only be felt by the people with disabilities who will lose their jobs and those who are no longer able to access vital services – it will also be felt on both sides of the state budget (revenue and expenses) as it will result both in a loss of federal matching dollars and in likely increased expenditures for more costly institutional placements for people with disabilities of all ages.

We oppose the governor’s proposal to eliminate the procedure for legislative committee review and approval of Medicaid waivers prior to submission to the federal Medicaid agency (CMS). Eliminating the review by legislative committees, in the guise of efficiency or leaner state operations, not only changes the checks and balances between the legislative and executive branch, but also the role of the Appropriations and Human Services Committees in ensuring that a Medicaid waiver or waiver amendment is in the public interest. This is a critical

protection for Medicaid enrollees and applicants. There is no reason to change the existing process outlined in C.G.S. §17b-8.

These proposed cuts would seriously impact the ability of state agencies and programs that receive funding through agency budgets to plan for the provision of services and cost-effective supports for persons with serious mental health conditions, and interfere with the rights of individuals to be protected from discrimination and fully integrated into their communities.

Thank you for time and attention to these concerns.