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**Appropriations Committee
Human Services/Medicaid - Department of Social Services
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Comments from the American Cancer Society Cancer Action Network on H.B. No. 5044 - AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR THE FISCAL YEAR ENDING JUNE 30, 2017.

The American Cancer Society Cancer Action Network (ACS CAN) is pleased to provide comments on H.B. No. 5044 - AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR THE FISCAL YEAR ENDING JUNE 30, 2017. ACS CAN is the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society that supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem.

During these challenging economic conditions it is understandable that difficult choices have to be made. These are decisions that need to be made with careful and deliberate consideration, and we recognize the efforts of the legislature in achieving that end. As careful as these decisions need to be, there also needs to be deliberation regarding the long-term effects that specific actions may have. In 2016 it is estimated that approximately 21,700 Connecticut residents will be diagnosed with cancer while 6,780 will die from the diseaseⁱ.

- **Medicaid Tobacco Use Cessation Funding - Maintain Funding at Current Levels**

We applaud the Governor for proposing to continue to fully fund tobacco use cessation services and programs through Medicaid. With this funding, Medicaid enrollees will continue to have access to comprehensive cessation services including prescription drugs, nicotine replacement therapy and counseling.

Research has long indicated that one of the most effective and sweeping methods of significantly reducing smoking among adults and youth is through providing cessation services.

There is a need: Connecticut Medicaid beneficiaries smoke at almost a 50% higher rate than the population as a whole and tobacco use costs Medicaid \$520.8 million per year in Connecticut--costs borne primarily by Connecticut taxpayersⁱⁱ.

Funding Medicaid coverage of cessation services allows for the state to take advantage of federal matching funds, reach a higher concentration of lower income smokers and ease the impact tobacco related illnesses have on the cost of the program.

- **Annualize FY 2016 Deficit Mitigation Savings – Maintain Hospital Supplemental Funding at Current Levels**
- **Reduce Funding for Connecticut Children's Medical Center - \$775,407 (5%)**

The painful cuts to supplemental funding of hospitals during the previous budget cycle as well as the December 2015 Special Session have already had a real impact on access to care. In September, for example, Stamford Hospital was forced to suspend its Mobile Wellness Van program, which had been providing breast health education and digital mammography screenings to uninsured and underserved women in a variety of community locations. All across the state, hospitals are suspending capital projects, eliminating programs and services and laying off staff.

Connecticut hospitals are trusted partners of the American Cancer Society's mission and play an important role in our communities by serving as the healthcare safety net. In just a few short years, Connecticut hospitals have become the fourth highest source of tax revenue while also being subject to hundreds of millions in cuts creating serious access to care issues for our most vulnerable citizens.

Taxes and cuts on hospitals will not only strain them fiscally, reduce innovation and patient care but will also lessen their ability to invest and partner with community and statewide organizations and will impact the day to day economies of towns and cities across the state.

- **Consolidate Agency Operating Funds – Block Grants**
- **Reduce Agency Operating Funds 5.75%**

The Governor's budget proposal creates block grants for agencies shifting responsibility over spending from the legislature to the Office of Policy Management and Agency Commissioners giving far more power and influence to fewer people. The lack of line items makes it very difficult to track funding levels as well as expenditures and the proposal does not clarify to what extent non-governmental experts such as doctors and nurses as well as the public itself, would have any opportunity to provide input and influence the funding of a given program.

Additionally, without the safety of legislative oversight, the public may not even be aware of a program cut until after it has already been made.

At a time when collaboration, innovation and coordination between programs should be encouraged to ensure greater savings and more positive outcomes, this proposal would essentially require internal agency programs as well as external organizations that

traditionally or typically receive state budget funds to have to compete with each other for funding.

- **Impact of State Employee Reductions**

Caseload as well as system concerns have been well documented at DSS and continue to be a struggle, despite some improvements. ACS CAN urges the Appropriations committee to consider the potential impact on DSS clients when considering the breadth of proposed state employee workforce reductions.

- **SB 17 - An Act Implementing the Governor's Budget Recommendations for Human Services – Section 32 – Repeal of Legislative Review of Medicaid Waivers**

Finally, we are concerned about Section 32 of SB 17 – An Act Implementing the Governor's Budget Recommendations for Human Services, which would eliminate a statutory procedure for legislative committee review and approval of Medicaid waivers prior to submission to the Federal Center for Medicaid Services. Eliminating this 20-year-old review and oversight process would take away the ability of the Legislature to exercise its role in ensuring the public interest is being served. The review process is intended to provide oversight and to protect Medicaid enrollees and applicants and we urge caution in relaxing such standards.

Connecticut faces a very real and very serious budget deficit. This fiscal emergency will need to be addressed through painful and necessary solutions and all options need to be on the table, including painful ones. As we continue to feel the impact of this economic downturn, however, it is important that we look for creative ways to utilize our resources that will allow us to protect access to the full range of health care for patients.

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ⁱ American Cancer Society Cancer Facts and Figures - 2016
<http://www.cancer.org/acs/groups/content/@research/documents/document/acspc-047079.pdf>

ⁱⁱ Campaign for Tobacco Free Kids – The Toll of Tobacco in Connecticut, 2015.
https://www.tobaccofreekids.org/facts_issues/toll_us/connecticut