

Testimony before the Appropriations Committee
On Governor's proposed Midterm Budget Adjustments FY2017
H.B. No. 5044 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR
THE FISCAL YEAR ENDING JUNE 30, 2017
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Good evening Senator Bye, Representative Walker and members of the Appropriations Committee.

I am submitting testimony as the Executive Director of Health Equity Solutions, a new organization in Hartford committed to promoting policies, programs, and practices that result in equitable health care access, delivery, and outcomes for all people in Connecticut.

Our vision is for every Connecticut resident to obtain optimal health regardless of race, ethnicity, or socioeconomic status. Currently, when reviewing the adjustments to the budget proposed by the Governor, it is hard to envision this future for the state.

Given the fiscal crisis, I understand the difficult decisions legislators have before them; however we cannot ignore the devastation the proposed cuts will have on health equity in Connecticut. Specifically, I am concerned about the impact of the Governor's proposed midterm budget adjustments related to the Department of Mental Health and Addiction Services (DMHAS) and the Office of the Healthcare Advocate.

The proposed cuts will have a devastating impact on mental health and behavioral health support and services in Connecticut. Eliminating the inequities in mental and behavioral health starts with ensuring access to necessary high quality services. The cuts to DMHAS threatens the agency's ability to deliver high quality, cost-effective services for individuals with mental and/or behavioral health conditions. This runs the risk of further exacerbating disparities in mental health access and outcomes rather than fostering greater equity.

The proposed elimination of the Commission for Health Equity in the Office of the Healthcare Advocate is concerning. For the last two years, the Commission for Health Equity neither had staff nor has been able to hire staff, making it challenging for the commission to fulfill its mission. At a time when Connecticut has done such great work to advance the ACA, it is critical to maintain the state's commitment to health equity by having an active and functioning body focused on health equity. It is problematic to suggest that the Department of Public Health's Office of Health Equity can absorb the duties of the Commission. While the DPH's Office of Health Equity does great work, it cannot be expected to fulfill the charter of the Commission and affect legislation with limited staffing.

Health equity is achieved when every Connecticut resident is able to obtain their optimal health without barriers and without regard to race, ethnicity, or socioeconomic status. As you face the tough decisions regarding these programs, I urge you to consider the health equity impact of your funding choices.

Thank you for your time and consideration.