

CONNECTICUT ALLIANCE TO END SEXUAL VIOLENCE



Support. Advocate. Prevent.

**Testimony of Lucy Nolan, Director of Policy and Public Relations
Insurance and Real Estate Committee
February 27, 2020**

HB 5247, An Act Concerning Explanations of Benefits

Good day, Senator Lesser, Representative Scanlon, and members of the Insurance and Real Estate Committee. My name is Lucy Nolan and I am the Director of Policy and Public Relations at the Connecticut Alliance to End Sexual Violence (The Alliance), the statewide coalition of Connecticut's nine community-based sexual assault crisis services centers. Our mission is to create communities free of sexual violence and to provide culturally affirming trauma-informed advocacy and prevention centered on the voices of survivors. I am here in support of raised H.B. 5247 An Act Concerning Explanation of Benefits.

One out of every six women and one in thirty-three men have been a victim of an attempted or completed rape in their lifetime. The physical and emotional trauma can have devastating short and long term health consequences on victims and their families. Close to forty percent of all PTSD cases include a sexual assault. Victims need compassion, support, and access to services and justice. They do not need barriers to receiving health care during this time or afterward when it may be critical to them.

The Alliance supports this legislation because it addresses a crucial barrier to accessing health care by those who need it by ensuring when multiple people are on the same insurance plan, confidential health care information is protected and not shared with anyone other than the patient.

One of our advocates related a story of a victim who was worried about having a sexual assault kit done after an assault. She did not want to get the prescription for HIV prophylactics, which the victim has to get from the pharmacy, because she was still on her father's insurance. She was afraid he would find out. She did not want to tell him because she knew he would blame her for what happened. Because of these fears, she did *not* have the kit done and did *not* report the assault. She lost valuable care all because of the EOB.

Victims are placed in ambulances when they report their sexual assault at school, or even if they drive themselves to the police station. They're traumatized and upset yet they worry where the bill will go and will their parents find out they have been assaulted. Once a sexual assault kit is done in the hospital, which is completely confidential and paid for by the Office of Victim Services, there could be prescriptions for HIV prophylactics or other prescriptions that may end up on an insurance EOB.

Sixty-nine percent of sexual assaults are perpetrated on individuals between the ages of 12-34, up to age sixteen there is mandated reporting to DCF. Many high school and college students are on their parents' insurance, and others up to age twenty-six. They may not want the EOB to be the messenger of the

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assault or for better or worse they do not want their parents to know, perhaps due to shame, being scared of punishment, forced withdrawal from school, and their trauma. These victims need to be able to go to therapy, to get whatever medical attention they need without the worry of more trauma or harm to themselves or ruining familial relationships. Passage of this legislation will help.

I'd like to share one other scenario with you. Eight out of ten rapes are committed by someone known to the victim. It could be a family member, a family friend, or even the policyholder. The response from the victim may be years later requesting medical help to deal with the issue. We do not know what grooming, power, and control that person has on the victim, who may have found their voice. They do not want the policyholder to know. It should always be the victim's decision if, when, and to whom to disclose. It should never lie in the hands of an insurance company.

Our advocates are very knowledgeable. They would be able to assist victims with the information to request the suppression of the EOB or to choose an alternative method of receiving it, perhaps through email, an alternative address, or phone number. This will not be a hardship and would become a regular part of our assistance. Our goal is to give victims back their own agency and this would help.

The Connecticut Alliance to End Sexual Violence strongly supports raised HB 5247 and it is our hope that the committee will protect the confidentiality of sexual assault victims by passing this bill.

Thank you.

Lucy Nolan

Lucy@EndSexualViolenceCT.org