

**Testimony Regarding SB 201: An act establishing a task force to study health insurance and health care inequity in this state. &**

**Testimony In Support of HB 5251: An act establishing a task force to study health insurance coverage for undocumented immigrants in this state.**

Senator Lesser, Representative Scanlon, Senator Kelly, Representative Pavalock-D’Amato, and distinguished members of the Insurance and Real Estate Committee,

I submit this testimony on behalf of the Connecticut Oral Health Initiative (COHI), a 501(c)3 nonprofit and the only entity in the state with the sole mission of increasing access to quality, affordable oral health services **for all Connecticut residents**.

*Regarding SB 201: An act establishing a task force to study health insurance and health care inequity in this state.*

In Connecticut, racial and ethnic oral health disparities exist throughout the life-course. Black and Latino children have higher rates of cavities and are more likely to need urgent dental treatment, compared to their White classmates.<sup>1</sup> Among older adults in Connecticut, a disproportionate number of adults of color ages 55 and older, compared to White adults of the same age, have no natural teeth.<sup>2</sup> COHI values equity and believes an equity lens is essential to improving oral health outcomes for all Connecticut residents. We encourage any efforts to further understand health inequities in Connecticut and design solutions for reducing and eliminating those inequities.

**We respectfully request oral health be included in the established task force’s study of coverage and care inequities**, specifically because dental coverage is distinct from health coverage in our system. If the task force is to make our understanding of inequity more complete and build towards solutions that address inequities and improve outcomes, it is crucial to include oral health. We suggest the following language.

- 1 Section 1. (Effective from passage) (a) There is established a task force
- 2 to study inequity in the provision of health and dental insurance coverage and
- 3 health and oral health care services in this state. Such study shall include, but need not
- 4 be limited to, identifying any means available to promote equity in the
- 5 provision of health and dental insurance coverage and health and oral health care services in this
- 6 state.

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<sup>1</sup> Connecticut Department of Public Health. 2017. Every Smile Counts: The Oral Health of Connecticut’s Children. [https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/oral\\_health/PDF/Every-Smile-Counts-2017-REV-August-2018.pdf?la=en](https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/oral_health/PDF/Every-Smile-Counts-2017-REV-August-2018.pdf?la=en)

<sup>2</sup> Connecticut Department of Public Health. 2013. The Oral Health of Vulnerable Older Adults in Connecticut. [https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/oral\\_health/PDF/VulnerableAdultOralHealthReportpdf.pdf?la=en](https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/oral_health/PDF/VulnerableAdultOralHealthReportpdf.pdf?la=en)

**We strongly support House Bill 5251**, which will establish a task force to study health insurance coverage for undocumented immigrants in Connecticut.

COHI recognizes the difficulty undocumented immigrants face accessing care. Firstly, dental services are often expensive. Researchers have found that dental care, compared to all other kinds of health services, presents the highest level of financial barriers.<sup>3</sup> In a twelve-month period, 8.9% of Americans report needing dental care, but going without care due to cost. This is nearly double the 5% of Americans that go without medical services due to cost.<sup>4</sup> Coverage is an important part of bringing down the cost of care. Without coverage, people are left paying out-of-pocket, which is not feasible for low-income families and individuals.

For individuals and families with incomes low enough to qualify for HUSKY (\$17,237 a year for an adult or \$34,128 for a family of three)<sup>5</sup>, there are no affordable health or dental insurance plans for purchase on the market. Additionally, people without social security numbers may not be able to complete insurance application forms. Connecticut’s HUSKY program should be available to income-eligible residents, regardless of immigration status. Immigrants are our neighbors, co-workers, friends, and fellow Connecticuters and they should have access to care.

**We respectfully request the words “and dental” be added to language, as oral health is essential to overall health.** We suggest the following language.

- 1 Section 1. (Effective from passage) (a) There is established a task force
- 2 to study health and dental insurance coverage for undocumented immigrants in
- 3 this state. Such study shall include, but need not be limited to, an
- 4 examination of any means available to promote and increase health and dental
- 5 insurance coverage for undocumented immigrants in this state, and any
- 6 obstacles to promoting and increasing such coverage for such
- 7 immigrants in this state.

I urge you to support House Bill 5251 and include oral health in both House Bill 5251 and Senate Bill 201. Thank you for the opportunity to testify. I can be reached at 860-246-2644 x 203 or [pareesa@ctoralhealth.org](mailto:pareesa@ctoralhealth.org).

Regards,



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Executive Director

<sup>3</sup> Vujicic, M. et. al. 2016. Dental Care Presents The Highest Level Of Financial Barriers, Compared To Other Types Of Health Care Services. <https://www.healthaffairs.org/doi/pdf/10.1377/hlthaff.2016.0800>

<sup>4</sup> American Dental Association. 2015. Cost Barriers to Dental Care in the U.S. [https://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIgraphic\\_1117\\_4.pdf?la=en](https://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIgraphic_1117_4.pdf?la=en)

<sup>5</sup> Department of Social Services. 2019. HUSKY Annual Income Chart <https://portal.ct.gov/-/media/HH/PDF/HUSKYAnnualIncomeChart.pdf?la=en>