



**Testimony of Ted Doolittle  
Office of the Healthcare Advocate  
Before the Insurance and Real Estate Committee  
Re SB 369, HB 5249 & HB 5253  
March 10, 2020**

Good afternoon, Senator Lesser, Representative Scanlon, Senator Kelly, Representative Pavalock-D'Amato, and members of the Insurance and Real Estate Committee. For the record, I am Ted Doolittle, Healthcare Advocate for the State of Connecticut. The Office of the Healthcare Advocate ("OHA") is an independent state agency with a consumer-focused mission: assuring consumers have access to medically necessary healthcare; educating consumers about their rights and responsibilities under health plans; assisting consumers in disputes with their health insurance carriers; and informing legislators and regulators regarding problems that consumers are facing in accessing care, and proposing solutions to those problems.

I appreciate the opportunity to submit comment in support of SB 369, An Act Concerning Dental and Vision Insurance Coverage For Children, Stepchildren And Other Dependent Children, HB 5249 An Act Concerning Dental Insurance Coverage For Children, Stepchildren And Other Dependent Children and HB 5253, An Act Concerning Dental and Vision Insurance Coverage For Children, Stepchildren And Other Dependent Children. Under current law, children and stepchildren remain eligible for coverage under a parent's or stepparent's medical insurance plan up to age 26. These bills would bring adult dependent eligibility for dental and vision coverage into alignment with the eligibility rules for medical coverage. Accordingly, adult dependents under age 26 would no longer be forced into shopping for dental and/or vision only coverage, while maintaining their existing medical benefits under a parent's subscription. Given the increasing emphasis on

dental and vision care as equally important components of overall healthcare, as a matter of sound public health policy, this is a logical and reasonable extension of parity between medical and dental/vision coverages.

As a final note, this expansion of eligibility for 18 to 26 year old dependents may result in a *de minimis* premium increase for those plans that include dental and vision benefits. However, the health and financial benefits of expanded eligibility for those dependents and their families will far outweigh any marginal changes in group health plan rates experienced by the small group market as a whole.

Thank you very much for your consideration of this testimony. If you have any questions concerning our position on this issue, please feel free to contact me at [Ted.Doolittle@ct.gov](mailto:Ted.Doolittle@ct.gov).