



CONNECTICUT
LEGAL
RIGHTS
PROJECT, INC.

TESTIMONY OF KATHLEEN FLAHERTY, ESQ.
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HUMAN SERVICES COMMITTEE PUBLIC HEARING
MARCH 11, 2021

In support of: SB 956, AN ACT PROVIDING MEDICAL ASSISTANCE TO CERTAIN INDIVIDUALS REGARDLESS OF IMMIGRATION STATUS.

In support of: SB 957, AN ACT EXPANDING ACCESS TO IN-HOME COUNSELING

Concerns regarding: SB 980, AN ACT ELIMINATING INCOME AND ASSET LIMITS FOR THE MED-CONNECT PROGRAM FOR PERSONS WITH DISABILITIES.

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Senator Moore, Representative Abercrombie, Senator Berthel, Representative Case and distinguished members of the Human Services Committee:

Good afternoon. My name is Kathy Flaherty and I'm the Executive Director of Connecticut Legal Rights Project (CLRP), a statewide non-profit agency that provides legal services to low income adults with serious mental health conditions. CLRP was established in 1990 pursuant to a Consent Order which mandated that the state provide funding for CLRP to protect the civil rights of DMHAS clients who are hospitalized, as well as those clients who are living in the community.

The COVID-19 pandemic has made it clear that this state must increase access to healthcare. I appreciate the steps that this committee has taken in raising bills that would increase access to care for some of the poorest and most marginalized residents of this state, some of whom already experience a disproportionate impact of the virus. This state should expand HUSKY eligibility to residents regardless of

immigration status; increasing access to health care for all and reducing the number of uninsured residents. I urge this committee to support **SB 956**.

We have heard much talk during the last year about the increase in the need for mental health services as a result of the devastating impact of the COVID-19 pandemic on the lives of Connecticut residents. **SB 957** would expand access to in-home behavioral health counseling provided by social workers employed by home health care agencies by providing Medicaid reimbursement for such counseling. The committee should support this bill.

The MED-Connect program is a fabulous program that allows people with disabilities who work to participate in Medicaid. Disabled people who participate in this program can earn up to \$75,000 per year and qualify for full Medicaid/HUSKY Health coverage. Some may pay a monthly premium for this coverage, depending on income. In general, an eligible person with a disability who is employed or becomes employed can qualify for MED-Connect without the use of ‘spend-down’ while earning more income than is allowed under other Medicaid coverage groups. This program already has generous income and asset limits (countable asset limit of \$10,000 for an individual and \$15,000 for a couple); in fact, I have not yet been contacted by a client who has experienced difficulty in meeting these guidelines.

I believe that the intent of this proposal is to increase access to health care coverage. I do not think it is the MED-Connect program that needs modifying. Instead, it is the requirements for the HUSKY C program, for disabled people who are **unable** to work, that ought to change. These are the people who are subjected to the infamous “spend-down” of their unearned income (from, for example, Social Security Disability Insurance) before they are eligible for Medicaid coverage.

These are the income and asset limits for HUSKY C, the program that covers people who are elderly or disabled and NOT able to regularly work. The income limit for a single person on HUSKY C is set at 143% of the Temporary Family Assistance (TFA) cash payment standard for that size family, which, applying the applicable unearned income disregard, is approximately \$10,620/year in most parts of the state and \$11,900/year in Fairfield County. The asset limits for HUSKY C are \$1,600 for one person and \$2,400 for a couple.

I would urge this committee to consider substitute language for SB 980 that would raise HUSKY C Income Limits to match at least the income limits for HUSKY D set at 138% of the federal poverty level (versus HUSKY A, which is set higher), currently \$17,616/year. If this increase was made, many people who can't qualify now for HUSKY C, except by "spending down" excess income, would newly have access to Medicaid and avoid having their health conditions unaddressed. This includes people who are on Medicare, which does not cover dental, vision, hearing aids, most home care services, medical transportation, etc.

Thank you for your consideration of this testimony.