



Testimony of Hartford HealthCare

Submitted to the Human Services Committee – March 11th, 2021 in support of:

SB 956, An Act Providing Medical Assistance to Certain Individuals Regardless of Immigration Status

Thank you for the opportunity to submit testimony in favor of this proposal. SB 956 would remove some of the barriers that disqualify otherwise eligible HUSKY health coverage applicants based on their immigration status.

Undocumented immigrants are already at increased risk for poor health due to the impacts of stigma, marginalization, discrimination, fear of deportation and the social determinants of health such as poverty; food, employment and housing insecurity; and lack of educational attainment. Compounding these conditions, undocumented residents also face significant barriers to accessing health insurance, leading to delayed and forgone care.

As you may know, undocumented immigrants are not eligible for Medicare, HUSKY (Medicaid or the Children's Insurance Program) or to purchase insurance through Access Health CT, Connecticut's health insurance exchange, which offers subsidies to income-eligible consumers. While some undocumented residents may be eligible for employer sponsored insurance or to purchase individual coverage, often these plans are out of reach due to affordability or documentation requirements.

Hartford HealthCare treats many undocumented patients through the Hartford Hospital Community Health clinic, formerly known as the Brownstone Clinic. The undocumented patients who receive our services are often reluctant to seek out housing and other social services, which would improve their health status, for fear of being reported and deported.

Undocumented patients struggle to access medications, hemodialysis, specialists, transportation and post-acute care, among other services. Although our clinic has recruited many specialists to provide free care, there is significant unmet need. In addition, a number of undocumented patients need post-acute rehabilitation services or nursing home care. Despite the efforts of our complex case management team, if there is no insurance, there is often no appropriate placement available for these patients and they can become stranded in the hospital for extended periods of time. While under federal EMTALA law, hospitals care for emergency patients regardless of coverage status, the same is not true of other health care services. Patients who need skilled nursing level care may ultimately return home, where their families try to care for them, often jeopardizing employment and income.

Finally, some undocumented patients who are wheelchair or bed bound do not have appropriate transportation to follow-up and routine medical appointments. If they were on HUSKY, specialized nonemergency medical transportation would be covered.

In addition to the coverage categories addressed in the bill, we would strongly recommend that the committee extend HUSKY A benefits to undocumented low income parents and children.

Thank you for your consideration of our position. For additional information, contact Cara Passaro at cara.passaro@hhchealth.org.

The HHC system includes seven acute care hospitals, the state's most extensive behavioral health network, a physician group, a clinical care organization, a regional home care system, an array of senior care services, and a large physical therapy and rehabilitation network.