



Scott Brabant
Board Chair

Luis B. Pérez, LCSW

President & CEO

Human Services Committee
In Support of H.B. 1056 An Act Expanding Access to Medical Services
and Amending Language
Public Hearing
Thursday, March 25, 2021

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

My name is Luis Perez, LCSW. I am the President and CEO of Mental Health Connecticut (MHC). MHC is a 113-year-old nonprofit which has provided essential community services, across the system of care that impacts more than 1,000 people served daily by our dedicated staff. We create environments that support long-term health and wellness. MHC supports approximately 1,000 people per day through our advocacy, community education, and services that include housing supports; employment supports; educational supports and wrap around services in Stamford, Bridgeport, Danbury, Waterbury, Torrington, and West Hartford.

I am testifying in strong support of SB 1056, which will address the extremely low income limits for eligibility of adults across all three of the main Medicaid programs (HUSKY A, HUSKY C and HUSKY D). Almost 100% of all the people served by MHC are eligible for and receive Medicaid. After the devastation of the Corona virus, the importance of access to comprehensive, affordable insurance could not be more important for everyone. This measure addresses a situation that blocks very low income persons from the health care that they need because they are poor but not poor enough. This would be a most welcome because it expands health care for those who could not otherwise afford it. The Corona virus has shown how necessary healthcare is for everyone if we are all to remain healthy. This is a solution to an issue that disparately impacts persons with disabilities and for minority communities that has now become so apparent during this pandemic. We support the bill but urge two revisions to further the purposes of the bill.

The current income limits for HUSKY C (for people who are elderly or disabled and not able to regularly work) are just 82% of the Federal Poverty Level in most parts of the state (93% in Fairfield Count). This is \$885/month or \$10,620/year for a single person (\$11,900/year in Fairfield County).

While somewhat higher, at 138% of the Federal Poverty Level and 160% of the Federal Poverty Level, for HUSKY D and HUSKY A adults, respectively, these figures are still too low (138% of the poverty level for one is \$17,785 per year). Bringing HUSKY A adults to 200% is essentially just bringing them back up to the 201% of poverty level income limit before the program was cut back years ago.

This change also has the benefit of not treating people unequally across a greater range of different income limits and across different programs which often causes confusion among the programs and is

Administrative Offices

61 South Main Street, Suite 100, West Hartford, CT 06107 • T: 860-529-1970 • F: 860-529-6833 • www.mhconn.org





administratively burdensome. By ensuring income eligibility is the same for all adults (except pregnant women, who are temporarily higher) across all three main Medicaid programs, at 200% of the poverty level. This is still a relatively low income level for our state, with 200% of poverty for one being \$2148/month (\$25,776/year), however, it is a major improvement, which we strongly endorse.

With this change, many people who cannot qualify now under the very low income levels for HUSKY C, except by “spending down” excess income, would newly qualify for Medicaid and avoid having to go without treatment for their illnesses. The spend down process is not available under HUSKY A and D. This measure will qualify thousands more to be able to afford health care, significantly shrinking the roles of the uninsured in one stroke.

Two suggestions for improvements one of which is required by federal law:

- (1) we urge that the limitation of the income level increase to cover only individuals under 65 be removed since people over 65 and on Medicare are in the same situation as people under 65, disabled and on Medicare, and the second group is already included in the bill to be eligible for HUSKY C up to 200% (and, for both groups, Medicaid costs are low because Medicaid payment is always secondary to Medicare payment).
- (2) Many people who now must spend down to get on HUSKY C will be saved from that often difficult process, some elderly and disabled individuals with incomes over 200% will still have large medical bills which could be used to qualify for Medicaid under spenddown. In addition, because we are what is called a “209b state,” it is required under federal Medicaid law that spending down continue to be allowed for this population. Accordingly, this language in current C.G.S. Section 17-261 proposed to be removed needs to be retained:

“Any income in excess of the applicable amounts shall be applied as may be required by said federal law, and assistance shall be granted for the balance of the cost of authorized medical assistance.”

We urge support of H.B. 1056 An Act to Expand Access to Medical Services and proposed additional language changes.

Thank you.

Sincerely,
Luis B. Perez, LCSW
President/CEO

