

Dear Senator Moore, Representative Abercrombie and esteemed members of the Human Services Committee,

My name is Katherine Villeda and I am a resident of Bridgeport, CT. I am a leader and community organizer within the immigrants right and reproductive health and rights movements. Thank you for the opportunity to offer testimony in strong support of S.B. 1056.

As a child I was very fortunate to always have had access to HUSKY A and to continue having access to health care as a college student and young adult with HUSKY D to ensure my health was taken care of. Had I not had access to the essential and preventative services I had access to through the Medicaid program it would have been incredibly difficult to manage my asthma and receive the mental health services I needed after my brother's passing.

Right now, under HUSKY D, an adult in a 1-person household is eligible for HUSKY when earning up to \$17,774/year; if working full time, that would mean making \$8/hour, which is less than minimum wage. Increasing eligibility to 200% of the federal poverty level for HUSKY D would mean an adult could be eligible when earning up to \$25,700/year or \$12/hour- the current minimum wage in Connecticut. As the minimum wage continues to increase in Connecticut, more and more people will lose Medicaid eligibility. This increase to HUSKY A, C, and D is needed and important to ensure that as many people as possible continue to have access to healthcare. Furthermore, as the bill is currently written, increases the income limit for people only up to 65 years old and I urge the committee to expand income limits to all disabled adults, including those over 65 as well as those under 65 under HUSKY C.

Additionally, S.B 1056 should be passed alongside S.B. 956, which will expand HUSKY coverage to all income-eligible CT residents regardless of their immigration status. As the daughter of immigrants, I grew up witnessing the obstacles my parent's faced in accessing healthcare. At one point, my dad did not see a doctor for nearly a decade. Growing up, we knew families that feared acquiring HUSKY for their U.S. Citizen children and forgoing care, because of their parent's immigration status. Studies show that when parents are insured, kids are more likely to be insured and receive primary care, too. The passage of both bills ensures equitable access to healthcare in Connecticut. Immigrants and people of color are far more likely to go without insurance than the state average. This injustice is rooted in discrimination in employment, education, housing, and immigration policies.

Passing these two policies is not only a health equity issue, but also an economic justice solution. Having insurance decreases the risk of medical debt and avoidance of care and increases opportunities to stay healthy and catch an illness before it gets worse and results in needing more expensive care.

The pandemic has made it even more clear that access to health care starts with having health insurance. Without insurance or with deductibles and other costs too high to manage, people are less likely to get tested for COVID-19 or any other illness. We need solutions that will help control the spread of COVID-19 and help manage other illnesses during and beyond the pandemic.

I strongly support the passage of S.B. 1056 and S.B. 956 to ensure more CT residents have health insurance they can afford to use and I ask the committee to support these legislations.

Thank you for your time,
Katherine Villeda