Dear Friends,

2016 was a year of consumers elbowing our way to the front of the room, to make our voices heard before policymakers made decisions that would affect our lives.

Anthem Insurance Co. proposed a merger with CIGNA and Aetna proposed a merger with Humana. If approved by the United States Department of Justice and the Connecticut Insurance Department, each one would have major impact on Connecticut residents. Premiums and out of pocket costs would have gone up and choice of insurance companies would have diminished.

The mergers were not approved. We were there with our partners, amplifying the voice of the Connecticut consumer.

Connecticut hospitals and physician practices continued to affiliate and merge. Yale New Haven Health System and Lawrence + Memorial Hospital in New London sought state approval to merge without the local community’s patients and physicians fully understanding the opportunities and trade-offs for access, quality, cost and equity. With our support and participation, a community coalition formed to ask hard questions and to present conditions that should be part of any state approval of the proposal.

The merger was approved. Several of the coalition’s conditions were incorporated into the approval. The voices of patients and their physicians and nurses prevailed.

The board and staff of the Foundation take the consumer voice and our responsibility to realize the mission very seriously. We look forward to the day when we can say “mission accomplished.” We’re certainly not there yet. So we persevere, in the face of many challenges. And we count on the continued partnership and support of the many organizations and individuals who steadfastly work with us in this crucial endeavor. Thank you!

Frances G. Padilla
President

Dan Livingston
Board Chair
IN HEALTH AND HEALTH CARE . . .

THE VOICE OF PEOPLE NEEDS TO BE AMPLIFIED, CONCERNS ADDRESSED, CONSUMERS PROTECTED FROM MONEYED INTERESTS, AND A VISION OF HEALTH CARE FOR ALL MUST GUIDE US.

TOGETHER, WE HAVE FOUGHT THIS PAST YEAR --

AND TOGETHER WE WILL CONTINUE TO FIGHT.

THESE ARE THE STORIES OF OUR...

#FIGHTFORBETTER
BETTER CARE • BETTER PRICES • BETTER HEALTH

IN 2016, TOGETHER WE:

CHAMPIONED FOR COMMUNITIES TO HAVE A SAY IN THEIR LOCAL HOSPITALS AT PUBLIC HEARINGS FOR

- Yale-New Haven Health System Acquisition of L+M Hospital
- Prospect Medical Holdings For-Profit Takeover of Eastern Connecticut Health Network & Waterbury Hospital
- Certificate of Need Task Force

LIFTED THE VOICE OF CONSUMERS’ CALL FOR AFFORDABLE HEALTH CARE AT

- Insurance Rate Review Public Hearing
- Health Care Cabinet meetings concerning health care costs

FOUGHT AGAINST MONEYED INTERESTS

- Worked in partnership to push back against the Anthem-Cigna mega-merger

TRAINED ADVOCATES

- Leaders in Action to Change Health Care pilot program

ENGAGED REAL PEOPLE

- Gathered stories
- Alerted people for opportunities to speak up at different venues

KEPT CONNECTICUT INFORMED ON CRITICAL ISSUES BY

- Convening people and groups to work together
- Writing regular blogs on relevant topics
- Sharing important information on social media and via our e-newsletter

2016 IN REVIEW
THE ACQUISITION OF LAWRENCE + MEMORIAL HEALTH BY THE YALE-NEW HAVEN HEALTH SERVICES CORPORATION IS A PIVOTAL OPPORTUNITY FOR STEMMING THE GROWTH OF MONOPOLY IN CONNECTICUT’S HEALTH CARE MARKET AND LIMITING THE ILL EFFECTS OF CONSOLIDATION.

REPORT ISSUED DECEMBER 2015 BY SEVEN GROUPS: THE UNIONS AFSCME COUNCIL 4, AFT CONNECTICUT, UNITE HERE! CONNECTICUT, AND NEW ENGLAND HEALTH CARE EMPLOYEES UNION, DISTRICT 1199, SEIU; THE CONNECTICUT CITIZEN ACTION GROUP; THE CONNECTICUT HEALTH POLICY PROJECT; AND UNITED ACTION CONNECTICUT.

In October of 2015, an informal coalition formed in response to Yale New Haven Health System’s application to acquire L+M Hospital in New London, CT. The group, which represented faith-based and other statewide organizers, unions, civic groups, policy experts and health care providers, was granted Intervenor status during the Certificate of Need hearings convened by the Office of Health Care Access.

Experienced organizers and high level policy analysts worked alongside community members with less experience, keeping them aware of hearings, coaching them to share their stories and testify at public hearings and helping them advocate for enforceable conditions to the “deal”—conditions that would respond to the health needs of the community; and keep services local and affordable.

The coalition brought together policy experts, organizers and community members to demand transparency and accountability; and to tell the numbers story and the people story. The result of our efforts resulted in OHCA rendering their decision to approve Yale’s acquisition of L+M with unprecedented conditions.
Alarmed by the proposed Aetna-Humana and Anthem-Cigna mega-mergers, the foundation spent much of 2016 fighting back. Joining in coalition with the Connecticut State Medical Society and the Connecticut Citizen Action Group, we conducted a campaign to educate and engage the public through forums, news articles, blogs, social media and petitions. We raised awareness about the conflict of interest concerns surrounding Connecticut’s Insurance Department Commissioner, ultimately leading to her recusal from the state-level review of the Anthem-Cigna merger. Working with our coalition partners and other national advocacy groups, we enlisted 43 organizations from around the country to send a letter to the United States Department of Justice (DOJ) urging the DOJ to use its “expertise and enforcement power to protect people from the harm these mergers will cause.” In July, DOJ filed suit, opposing both mergers. Ultimately the courts blocked both deals, finding no evidence that everyday people would benefit from these anti-competitive mega-mergers.
We wrapped up our pilot health care leadership program, Leaders in Action to Change Health Care (LIA) in April. The eight-month pilot graduated eleven individuals representing a broad variety of perspectives on our health care system—ranging from community-based activism and consumer advocacy to public health and health equity.

The focus of the pilot was to empower individuals already engaged in some form of health care and social justice work to be more effective leaders and partners in the struggle to achieve quality, affordable health care for all state residents.

Through LIA, seeds of change took root and dynamic new relationships were forged. The Foundation is pleased to have these bold partners working side-by-side with us.
At the end of 2016, we expended our work to include defending health care gains, including defense of the Affordable Care Act, Medicaid, Medicare, and women’s health care. We mobilized our philanthropy to fund 8 organizations to collect health care stories to speak to the impact of proposed health care changes on real people, their families, and their communities.

**GRANTEES**

- Bridgeport Child Advocacy Coalition
- Connecticut Community Care, Inc.
- Community Health Centers Association of Connecticut
- Center for Medicare Advocacy – Connecticut Chapter
- Council on Churches
- Connecticut State Employees Association/SEIU Local 2001
- Hispanic Health Council
- United Action of Connecticut

**THESE KINDS OF STORIES HELP TO TELL THE REAL WORLD IMPACT OF HEALTH CARE POLICY**

My prescription drugs cost is outrageous!

I could go to Canada and pay half the amount.

I have diabetic family members who can’t afford their meds.
Too often the voice of everyday people is not at the table. CCRG helps make sure that changes.

In the face of increasing consolidation of both hospitals and insurance corporations, the people who need quality, accessible care at a price they can afford are getting squeezed. With a rich history of health care advocacy in the state, as well as skill at building coalitions and community organizing efforts to stand up for everyday people, CCRG is a ready partner to educate, engage and activate people.

In 2016, CCRG was a leader in coalition efforts around hospital Certificate of Need applications in New London, Waterbury and Manchester/Rockville - as well as the fight to stop the Anthem-Cigna and Aetna-Humana mega-mergers. In addition, advocacy to protect Medicaid/HUSKY eligibility and coverage for low-income families and individuals was a priority in the face of growing state budget problems.

Ann Pratt led the field efforts to amplify the voice of real people in these struggles, demonstrating the value of CCRG as a key partner in moving toward our mission.
Universal Health Care Foundation of Connecticut is an independent, non-profit philanthropy.

We support research-based policy, advocacy and public education that advances the achievement of quality, affordable health care for everyone in the state.

**OUR MISSION**

To serve as a catalyst that engages residents and communities in shaping a democratic health system that provides universal access to quality, affordable health care and promotes health in Connecticut.

We believe that health care is a fundamental right and that our work is part of a broader movement for social and economic justice.

**OUR VISION**

We envision system that is accountable and responsive to the people it serves, and that supports our health, takes excellent care of all of us when we are sick at a cost that doesn’t threaten our financial security and continues to be an important source of quality employment and vitality in our communities.
The Connecticut Health Advancement and Research Trust (CHART) is the parent organization of Universal Health Care Foundation of Connecticut, Inc. It is a 501(c)(3) research, development and education organization dedicated to assuring that the health care needs of all Connecticut residents are met.

CHART was created in 1999 as a result of the settlement of a lawsuit brought against the for-profit Anthem Insurance Co. during its merger with the non-profit Blue Cross & Blue Shield of Connecticut. The settlement also required the creation of a second, separate foundation, The Anthem Foundation of Connecticut, Inc. (now Universal Health Care Foundation of Connecticut). The purpose of the Foundation is to support CHART’s mission, principally by making grants that will further the goals established by CHART.

CHART is a research, development and education organization that hosts forums on various issues related to health care policy in Connecticut. Universal Health Care Foundation of Connecticut, Inc., supports CHART’s mission by making grants, developing public policy and supporting research to further the vision of quality, affordable health care for all Connecticut residents.

Together with Universal Health Care Foundation, CHART has changed the debate from whether universal health care is possible, to how to achieve the quality, affordable health care system that is best for Connecticut.
DONORS  THANK YOU FOR JOINING THE FIGHT!

INDIVIDUAL DONORS

Andrea Allen
Diane Ariker
Gary Bent
Sheila & Gerry Berkelhammer
Margaret Best
Nancy Burton
Yolanda Caldera-Durant
Nancy Carrington
Lisa Chedekel
Martin Chemiak
William Cibes
Lisa Davis
Steve Derby
Marian Evans
Lisa Freeman
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Steve Wolfson
Jeffrey Wolfson
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Teresa Younger

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Robert Wood Johnson Foundation
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IN MEMORY OF

William Tyszka from Mary Moninger-Elia
Marguerite Marafino from Bette Marafino

DONOR COMPANIES

Qualidigm
Connecticut Coalition of Taft-Hartley Plans

GRANT

Graustein Memorial Fund
## 2016 GRANTEES

### HEALTH JUSTICE PROJECT GRANT
- CT Citizen Research Group - $50,000

### HEALTH CARE STORIES PROJECT GRANTS
- Bridgeport Child Advocacy Coalition - $5,000
- CT Community Care, Inc. - $5,000
- Community Health Centers Association of CT - $5,000
- Center for Medicare Advocacy – CT Chapter - $5,000
- Conference on Churches - $5,000
- CT State Employees Association / SEIU 2001 - $5,000
- Hispanic Health Council - $5,000
- United Action of CT - $5,000

## SUMMARY OF FINANCES

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<tr>
<th>ASSETS</th>
<th>AS OF DECEMBER 31, 2016</th>
<th>AS OF DECEMBER 31, 2015</th>
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<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>138,281.00</td>
<td>120,178.00</td>
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<tr>
<td>Investments</td>
<td>21,664,790.00</td>
<td>22,060,711.00</td>
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<tr>
<td>Property &amp; equipment, net</td>
<td>59,870.00</td>
<td>73,323.00</td>
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<tr>
<td>Grants receivable</td>
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<tr>
<td>Prepaid expenses &amp; other assets</td>
<td>39,177.00</td>
<td>36,380.00</td>
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<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td><strong>21,902,118.00</strong></td>
<td><strong>22,290,592.00</strong></td>
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<table>
<thead>
<tr>
<th>LIABILITIES &amp; NET ASSETS</th>
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<tbody>
<tr>
<td>Accounts payable &amp; accrued expenses</td>
<td>43,970.00</td>
<td>94,639.00</td>
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<td>Grants payable</td>
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<td>10,000.00</td>
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<td>Accrued payroll liabilities</td>
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<td>59,536.00</td>
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<td><strong>TOTAL LIABILITIES</strong></td>
<td><strong>93,151.00</strong></td>
<td><strong>164,175.00</strong></td>
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<td>Unrestricted Net Assets</td>
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<tr>
<td>Temporarily Restricted Net Assets</td>
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<tr>
<td>Total Net Assets</td>
<td>21,808,967.00</td>
<td>22,126,417.00</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES &amp; NET ASSETS</strong></td>
<td><strong>21,902,118.00</strong></td>
<td><strong>22,290,592.00</strong></td>
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</tbody>
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<table>
<thead>
<tr>
<th>STATEMENTS OF ACTIVITIES &amp; CHANGES IN NET ASSETS</th>
<th>AS OF DECEMBER 31, 2016</th>
<th>AS OF DECEMBER 31, 2015</th>
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<tbody>
<tr>
<td>Investment Return Designated for Operations</td>
<td>1,421,000.00</td>
<td>1,860,000.00</td>
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<tr>
<td>Interest, dividends &amp; miscellaneous</td>
<td>21,361.00</td>
<td>5,804.00</td>
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<tr>
<td></td>
<td>1,442,361.00</td>
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<table>
<thead>
<tr>
<th>OPERATING EXPENSES</th>
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<tbody>
<tr>
<td>Management &amp; general</td>
<td>271,394.00</td>
<td>302,684.00</td>
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<tr>
<td>Development</td>
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<td>Public policy</td>
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<td>977,069.00</td>
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<td>Strategic communications</td>
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<tr>
<td>Advocacy</td>
<td>18,533.00</td>
<td>15,792.00</td>
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<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>1,298,538.00</strong></td>
<td><strong>1,389,558.00</strong></td>
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<tr>
<td>Results of Operations</td>
<td>143,823.00</td>
<td>476,246.00</td>
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<tr>
<td>Change in Net Assets</td>
<td>(383,782.00)</td>
<td>(1,942,477.00)</td>
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<td>Net Assets, Beginning of Year</td>
<td>22,192,749.00</td>
<td>24,135,226.00</td>
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<tr>
<td><strong>NET ASSETS, END OF YEAR</strong></td>
<td><strong>21,808,967.00</strong></td>
<td><strong>22,192,749.00</strong></td>
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