Testimony Regarding House Bill 5040: An Act Concerning the Governor's Budget Recommendations for Human Services

Universal Health Care Foundation of Connecticut
March 1, 2022

Thank you for the opportunity to submit testimony on House Bill 5040: An Act Concerning the Governor’s Budget Recommendations for Human Services.

Universal Health Care Foundation of Connecticut works to accelerate the movement for health justice for everybody, because health is a human right and core to social justice and equity.

We would like to take this occasion to elevate several important issues related to the Human Services budget, particularly in areas where equity can be strengthened. Black, Indigenous and people of color are disproportionately affected and adversely impacted by lack of access and equity in health care. The following recommendations address some of these issues.

**Increase adult Medicaid dental reimbursement rates to increase access and equity**

Dental Medicaid rates have not been increased in 14 years and adult dental rates are a fraction of pediatric dental rates. Two out of three adults on HUSKY do not access dental care, many because they cannot find a dentist. Increasing adult dental reimbursement rates would increase the number of dentists taking adults with HUSKY – right now those rates are so low that dentists receive 37 cents on the dollar compared to average insurance.

While we support the proposed 25% increase in adult dental reimbursement rates, we recommend a larger increase that matches adult rates to the child reimbursement rates for all procedures, in addition to the already proposed endodontic reimbursement rate.

**Fund Community Health Workers to support access and equity**

Community Health Workers are effective beyond the doctor’s office or the hospital – they can bridge the gap between individuals, communities, and the services they need. They can help people get and remain insured, as well as counsel people on how to use their coverage, especially for those that may churn between HUSKY and Covered CT coverage.

With potentially tens of thousands of residents no longer being eligible for HUSKY once the public health emergency declaration ends at the federal level, and the change in Covered CT eligibility coming in July, it is critical for residents to have Community Health
Workers that can help connect them with public or private insurance coverage and navigate the system to access care. It is imperative to fund Community Health Workers that can ensure continued access to insurance for all, especially in our BIPOC communities.

**Address health care access for people with incomes between 175% to 200% of Federal Poverty Level**

HUSKY and Covered CT are only accessible to those with incomes up to 175% of the Federal Poverty Level (FPL), but we know that those with incomes between 175% and 200% of FPL are still struggling to afford and access care. People of color are more likely to go without insurance than the state average. While having health insurance is not enough to ensure access to care, it is a necessary and vital part of access.

For families with incomes above 175% of FPL, the cost of having and using private health insurance on Access Health CT can be prohibitively expensive, despite premium subsidies and cost sharing reductions. Covered CT is a great step towards increasing the insured rate, but we need to continue to find ways to help everyone who is struggling with the affordability of health care.

**Expand access to HUSKY regardless of immigration status to ensure equity**

We applaud last session’s passage of HUSKY coverage for children 0-8 and prenatal and postpartum coverage for pregnant people, regardless of immigration status. We also want to thank the committee for raising a bill to further expand coverage to all children up to age 18, which we strongly support.

Children do better when their parents do better, so we encourage you to consider how all adults, regardless of immigration status, would be able to access health care coverage.

An estimated 52% of undocumented immigrants are uninsured. People without insurance often rely on more expensive emergency room care, instead of accessing primary and preventive care that can address medical issues before they become urgent or an emergency. This often leaves families with high medical bills and debt, not to mention worsened health.

We’re also in the midst of a pandemic; we know that the health of all of us relies on each of us having access to quality, affordable health care.

**Increase HUSKY C eligibility to increase equity**

HUSKY C serves low-income elderly and disabled residents. The program’s income eligibility levels are the lowest in the country, below the Federal Poverty Level (FPL), and do not keep pace with inflation. Eligibility based on the FPL would align with HUSKY A, B, and D. The federal government allows for increasing eligibility in HUSKY C up to 100% of FPL.
We support increasing HUSKY C income eligibility to 100% of FPL. The current eligibility is based on an old, out-of-date standard that does not account for inflation, meaning that fewer people are eligible every year, as inflation increases. Residents eligible for HUSKY C struggle with their health in many ways and, as a state, we should ensure that people that need help are getting help, especially those most in-need.

Conclusion

Thank you for your consideration of this testimony. We hope that this committee continues its promise in investing in human services that make this state better for everybody. Universal means everybody.

*Universal Health Care Foundation of Connecticut’s mission is to accelerate the movement for health justice for everybody because health is a human right and core to social justice and equity.*