SB 1090, An Act Establishing A Commission To Study A HUSKY For All Single Payer, Universal Health Care Program

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning SB 1090, An Act Establishing A Commission To Study A HUSKY For All Single Payer, Universal Health Care Program.

Before commenting on this bill, it is important to acknowledge that, since early 2020, Connecticut’s hospitals and health systems have been at the center of the global public health emergency, acting as the critical partner in the state’s response to COVID-19. Hospitals expanded critical care capacity, stood up countless community COVID-19 testing locations, and are a critical component of the vaccine distribution plan. Through it all, hospitals and health systems have continued to provide high-quality care for everyone, regardless of ability to pay. This tireless commitment to the COVID-19 response confirms the value of strong hospitals in Connecticut’s public health infrastructure and economy and reinforces the need for a strong partnership between the state and hospitals.

SB 1090 would create a commission to study the development and implementation of a single-payer healthcare program in Connecticut. This work would also include recommendations related to provider budgets and payment rates under such system.

We appreciate that the legislation includes participation on the committee by CHA.

Every day, Connecticut hospitals and caregivers see how the lack of health insurance prevents people from getting the right care, at the right time, in the right place. Hospitals support helping people get health coverage to better ensure their access to essential medical and behavioral health services, and have long assisted patients with getting access to coverage available to them. We know that access to affordable health insurance that fairly and equitably reimburses healthcare providers for the cost of the services provided is essential to building a healthier Connecticut.
Should the legislation be adopted and the committee formed, provider voices will be imperative if the committee is to fully understand the provider reimbursement deficiencies in government-sponsored health insurance programs. In 2019, hospitals received reimbursements from government payers for only about 78 percent of what it cost to provide care to patients. In the same year, Connecticut hospitals incurred $899 million in Medicare losses and $794 million in Medicaid losses, and these losses are growing each year.

Historically, single-payer healthcare systems have relied on current government healthcare programs as a model for universal adoption, just as this legislation does. Adopting a single-payer system in Connecticut that relies on a universal reimbursement structure that systematically underpays providers will be devastating to patient care in our state.

Again, should the committee be formed, CHA would bring this clear-eyed provider perspective to the discussion.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.