



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
HUMAN SERVICES COMMITTEE
Thursday, March 11, 2021**

**HB 956, An Act Providing Medical Assistance To Certain Individuals
Regardless Of Immigration Status**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **HB 956, An Act Providing Medical Assistance To Certain Individuals Regardless Of Immigration Status**. CHA offers conditional support for this bill with recommended amendments.

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.

Many immigrants are at high risk of being uninsured because their immigration status affords them limited access to coverage options. Although some individuals are able to access employer-sponsored insurance, such insurance is limited as a result of the high cost of coverage or health plans' unwillingness to process applications. In addition, federal law precludes coverage under Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and Access Health CT's health insurance exchange.

As a result of this lack of coverage, these immigrants have a great deal of difficulty accessing care. As is the case with other uninsured individuals, they may delay care or forego care entirely until their condition requires emergency department visits or hospitalizations. These services, which are avoidable if care is provided earlier, may ultimately be covered by Medicaid at significant taxpayer expense. Use of non-emergency hospitals services increases charity care costs, which may indirectly impact reimbursement under employer-sponsored insurance.

Uninsured immigrants do have access to a limited range of discounted healthcare services through Federally Qualified Health Centers, but they encounter sizable barriers if they need specialty care. The impact is worst for pregnant women and children. Lack of access to prenatal care can have a marked impact on maternal and infant birth outcomes. Lack of coverage for children as a result of immigration status affects long-term health and development.

This bill attempts to extend coverage to certain individuals who lack access to health insurance coverage as a result of their immigration status. Although the bill provides coverage to adults without dependent children, pregnant women, and children in households with incomes above 196 percent of the federal poverty level, it appears to overlook low-income parents and children. We recommend that the bill be amended to provide coverage for low-income parents and children commensurate with HUSKY A household income limits.

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