



**Connecticut Department of Public Health**

**Testimony Presented Before the Public Health Committee**

**March 18, 2015**

**Commissioner Jewel Mullen, MD, MPH, MPA  
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**Senate Bill # 955 - An Act Implementing Provisions Of The Budget Concerning Public Health.**

The Department of Public Health (DPH) supports Senate Bill 955, which was proposed by the Governor to implement his budget.

Section 1 of this bill moves funding for the Department's needle and syringe exchange program, AIDS services, breast and cervical cancer detection and treatment, x-ray screening and tuberculosis care and venereal disease control programs from the general fund to the insurance fund established pursuant to section 38-52a, which will be funded by a fee paid by each domestic insurer or health care center doing health insurance business in Connecticut. Transitioning these public health programs to the insurance fund recognizes that they promote early detection and prevention of disease and likely benefit the health insurance industry by avoiding more costly treatments as diseases progress. Under this proposal, the funding for these services is not changed.

Section 2 of this bill increases the fees charged by the Department's newborn screening program from \$56.00 to \$98.00 to support ongoing State Public Health Laboratory costs related to newborn screening (NBS), as well as to continue support for regional treatment centers.

Section 3 of this bill repeals section 19a-490t which mandates the Commissioner of public health to provide financial assistance to community health centers. The Governor's proposed budget will transfer \$4.4 million in funding for community health centers from DPH to the Department of Social Services (DSS). The transfer of these funds will be added as a supplemental pool to existing Medicaid funding in DSS for federally qualified health centers and allow the state to leverage federal funding resulting in a savings of \$2.6 million due to the availability of federal funding. Funds will be distributed from DSS based on acuity and performance measures, which will incentivize community health centers to serve higher-need patients and provide high-quality services.

This section also repeals section 38a-1051 which will eliminate the Commission on Health Equity under the Office of the Health Care Advocate, as it is duplicative of functions already

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performed by DPH's Office of Health Equity. The Office of Health Equity works to ensure that health equity is a cross-cutting principle in all agency programs and planning efforts. Program activities focus on the underlying social determinants of health and the agency's federally-funded initiatives regarding promotion and implementation of culturally and linguistically appropriate services in DPH contractors, local health, and community-based organizations.

The language in this bill is consistent with the Governor's budget which will allow these important programs to continue serving the residents of Connecticut.

Thank you for your consideration of the Department's view on this bill.