



**Testimony of Victoria Veltri
Office of Health Strategy, Executive Director
Before the Public Health Committee
In Support of SB 1, Sections 6, 17 and 18
An Act Equalizing Comprehensive Access To Mental Health, Behavioral and
Physical Health Care In Response To The Pandemic**

March 17, 2021

Good afternoon, Senator Abrams, Representative Steinberg, Senator Hwang, Senator Somers, Representative Petit and members of the Public Health Committee. For the record, I am Vicki Veltri, Executive Director of the Office of Health Strategy (“OHS”). OHS brings together current state efforts and staff to provide integrated, comprehensive leadership to fulfill its mission to implement comprehensive, data driven strategies that promote equal access to high quality health care, control costs and ensure better health for the people of Connecticut.

I appreciate the opportunity to comment in support of SB 1, An Act Equalizing Comprehensive Access To Mental Health, Behavioral and Physical Health Care In Response To The Pandemic, specifically, sections 6, 17 and 18. This Committee bill addresses several important issues critical to promoting Connecticut’s sustainable recovery from the COVID-19 pandemic. In particular, I support SB 1’s declaration of racism as a public health crisis in Section 6. This important designation continues the State’s efforts to promote meaningful policy reforms that address longstanding inequities for many communities in our state. OHS believes it is paramount to adopt a health in all policies strategy to address the conditions that affect health.

Section 17 requires state entities that collect data concerning race, ethnicity and primary language for residents receiving health care services state do so in a manner that allows for aggregation, and that there be a common data standard implemented for all impacted state

entities. OHS is supportive of this important initiative and encourages the state to align this work with complementary efforts underway to promote greater harmony among these data standards. While this section of SB 1 focuses solely on state entities, having common standards greatly enhances the ability of all stakeholders to better understand the full patient experience across all health care settings.

Section 18 revises Section 19a-127k of the general statutes to enhance the State's ability to monitor the impact of hospitals' community benefit programs on the communities each hospital serves. As you know, OHS proposed language to amend this statute, raised as HB 6550, after engaging with key stakeholders. The language seeks to establish consistent community benefit reporting requirements across all Connecticut non-profit hospitals, increase public transparency about how hospitals are providing community benefits to individuals within their respective service areas, require meaningful engagement and participation in the development of non-profit hospitals' federally required needs assessment and related implementation strategies. While the bill was passed out of committee on March 12th, OHS heard the valuable feedback of your members and is committed to further collaboration with hospitals and others to reach consensus language. OHS respectfully requests that any final language adopted in this bill match that consensus language.

Thank you for providing me the opportunity to deliver OHS' testimony today. If you have any questions concerning my testimony, please feel free to contact me at victoria.veltri@ct.gov.