



**Testimony of  
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**SB 134 AA Requiring the Comptroller to Fund the Unfunded the Unfunded Pension Liability Portion of Fringe Benefit Costs for the University of Connecticut Health Center.**

**Appropriations Committee  
March 26, 2021**

Senator Osten, Representative Walker, and members of the Appropriations Committee, my name is Chris DeFrancesco and I have worked in UConn Health's Office of Communications for nearly 14 years. I am also VP for communication for University Health Professionals Local 3837. I am testifying in favor S.B. No. 134, An Act Requiring the Comptroller to Fund the Unfunded Liability Portion of the Fringe Benefit Costs for the University of Connecticut Health Center.

In favor, mostly, that is.

I am very supportive of the substance of this measure – to relieve the burden of the unfunded pension liability on our state's only public academic medical center.

On the surface, that appears very well-intended. Goodness knows UConn Health could use the relief, between decades of underfunding the state pension system and of course this past year, being in pandemic mode yet carrying on to continue delivering vital services to our population.

But it's the statement of purpose for this seemingly well-intended bill that that is problematic and reveals the true intent – to go down the path of privatization.

Given UConn Health's mission of public service in the form of patient care, scientific research, and training future generations of physicians and dentists, privatization comes with very real and legitimate threats of shifting the focus of my institution's priorities from people to profits.

As you may have heard me say before, UConn Health provides needed care to many among our state's most vulnerable. Is that not one of the fundamental concepts of state government, to protect its most vulnerable? Now what happens when you separate out those services from state government and depend on a private

entity provide them? I would worry greatly that the answer is, the private entity **wouldn't** provide them, because these services, though needed, are not necessarily lucrative.

If a private entity took over our hospital, where would these vulnerable patients turn? Who treats the adult sickle cell disease patients? Patients with multiple sclerosis and other neuro-immunological disorders that can ravish underinsured populations? Who screens newborns for cystic fibrosis? Who delivers care to indigent populations at places like the South Park Inn or migrant farm clinics? Who takes Medicaid patients other places don't want to treat?

Understand I am speaking as a private citizen and union officer when I say, I personally can not get behind an effort that will lead to privatization of my institution. I hope you won't either.

I ask that you support the bill in concept, but with an amended statement of purpose. Might I offer this:

"To facilitate the fiscal stability of the state's only public academic medical center, positioning it to continue to meet its missions of public service in the years to come as it moves toward becoming self-sustaining."

With a collective will among our elected officials and our institutional leadership, I believe this can be done. Or, as we like to say at UConn Health, "the power of possible."

Thank you for your consideration and for your public service.