

Human Services Committee JOINT FAVORABLE REPORT

Bill No.: SB-306

AN ACT PROVIDING FOR THE PHASED-OUT ELIMINATION OF ASSET

Title: LIMITS IN THE HUSKY C PROGRAM.

Vote Date: 3/19/2024

Vote Action: Joint Favorable Change of Reference to Appropriations

PH Date: 3/7/2024

File No.:

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SPONSORS OF BILL:

Human Services Committee

CO-SPONSORS OF BILLS:

Sen. Martin M. Looney, 11th Dist.

Sen. Herron Gaston, 23rd Dist.

Rep. Susan M. Johnson, 49th Dist.

REASONS FOR BILL:

The Husky C Medicaid program was created to provide insurance and healthcare to non-working disabled and older adults. The asset limit of \$1,600/\$2,400 (single/married) has not changed since its creation. This has resulted in individuals “spending down” assets to ensure they have access to needed healthcare. The purpose of this bill is to eliminate asset limits for HUSKY C over five years. This will allow individuals covered by HUSKY C to save money for emergencies and other life circumstances.

RESPONSE FROM ADMINISTRATION/AGENCY:

Commission on Women, Children, Seniors, Equity & Opportunity, Policy Director Werner Oyanadel; supports this bill stating it will allow older and disabled beneficiaries to keep more of their own money, allowing residents to age well in place in the community. It is also stated this would allow for broader participation without punitively requiring a spend down of savings to receive services. It is stated that in terms of asset limits, New York allows as much as \$30,120 for individuals and \$40,821 for married couples.

Department of Social Services (DSS), Commissioner, Andrea Barton Reeves; opposes this bill stating that this expansion of Medicaid would require an amount of funding that has not been reflected in the Governor's budget. It is stated for FY 2025 if the asset limit is increased from \$1,600 to \$10,000 for an unmarried individual and from \$2,400 to \$15,000 for married individuals, the state cost is projected to be approximately \$72 million. It is also stated costs will continue to increase in subsequent years as the bill increases the asset limits further between FY 2026 through FY 2028, with the asset limits being eliminated beginning FY 2029. It is stated there would also be increased administrative costs to support increased enrollment in the program.

Office of the Healthcare Advocate, Acting Healthcare Advocate, Sean King; supports this bill stating asset limits create barriers to medical benefits for people who may rely on their savings to meet other living expenses. It is stated asset limits deprive enrollees of the ability to accumulate savings that may be needed to withstand periods of financial hardship. It is stated beneficiaries must spend down assets to maintain a very modest standard of living. It is stated individuals should be encouraged to engage in good saving habits rather than disincentivizing them via asset tests.

NATURE AND SOURCES OF SUPPORT:

Connecticut General Assembly, President Pro Tempore, Senator Martin Looney; supports this bill stating that Husky D, which covers low-income residents between the ages of 19 and 65 who do not have dependent children, does not have an asset limit. It is stated that it is not plausible to have an asset limit that excludes otherwise eligible residents. It is stated this bill would improve public health in the State of Connecticut.

Black and Brown United in Action (BBUA); supports this bill stating it would assist in remedying years of systemic oppression by reducing costs and increasing access to care. It is stated disabled people are more likely to struggle to access high-quality medical care, suffer from stigma, biases, and ableism, and are also subject to social disadvantage and marginalization. It is stated the number of middle-income Black and Brown elders is expected to double within the next decade, rising from 12% in 2020 to 25% in 2035. It is also stated there are widening gaps among the Black and Brown middle communities when it comes to home ownership, home equity, financial assets, and marriage rates when compared to their white peers. It is stated the asset limits in HUSKY C discriminate against Black and Brown people. It is stated this bill will address the discrimination in asset limits by removing them.

The following individuals have submitted written testimony in support of this bill.

It is stated this bill would allow HUSKY C beneficiaries to save for financial hardships and emergencies. It is stated that the current asset limits were set when the program was first started in the 1970s when the minimum wage was \$1.60 per hour. It is stated the asset limits should be increased to keep up with inflation and increased living costs. It is stated without savings, temporary setbacks such as job loss or a car breakdown can result in significant and permanent financial hardship. It is stated that while the phased-out removal of asset limits is a step in the right direction, it perpetuates discrimination. It is recommended to remove the asset limits in July, as it would resolve such discrimination and save on administrative costs.

AgingCT, Director, Marie Allen

The Arc of Connecticut, Inc., Executive Director, Win Evarts

The Arc of Connecticut, Inc., Director of Advocacy, Carol Scully
Center for Disability Rights, Chief Executive Officer & Chief Advocate, Marc Anthony Gallucci, Esq.
Center for Disability Rights, Advocate, Richard Famiglietti
Connecticut Coalition on Aging, President, Peaches Quinn
Connecticut Legal Rights Project, Executive Director, Kathy Flaherty
Connecticut Resident, Laura Rinaldi
Connecticut Resident, Ray Rinaldi
Disability Rights Connecticut, Litigation Attorney, Sheldon Toubman
Greater Hartford Legal Aid, Policy Advocate, Caleb Rifkin
Keep The Promise Coalition, Board Member, Karen Healy
Keep The Promise Coalition, Executive Director, Jordan Fairchild
National Alliance on Mental Illness (NAMI), Public Policy Manager, Thomas Burr
Social Welfare Action Alliance, Maggie Goodwin

NATURE AND SOURCES OF OPPOSITION:

Connecticut Oral Health Initiative, Executive Director, TJ Clarke II; opposes this bill stating it perpetuates discrimination against people with disabilities and older adults in its current form. It is stated Connecticut had many barriers to overcome to improve the oral health of older adults. According to the 2022 Medicaid Gap Analysis of Oral Health Care for Adults in Connecticut, Medicaid enrollment increased yearly from 2016 to 2020. However, over 60% of enrollees had no claims submitted on their behalf in a single year. It is stated there are barriers for beneficiaries, such as transportation, lack of providers, lack of needed treatments covered, and lack of oral health literacy.

Reported by: Jessica Elizondo

Date: April 4, 2024