



Testimony in Support of S.B. 284, An Act Increasing the Age from Eight to Eighteen Years for an Income-Eligible Person to Obtain Medical Assistance Regardless of Immigration Status.

Harley Webley & Karen Siegel, MPH
Human Services Committee
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Dear Representative Abercrombie, Senator Moore, Senator Berthel, Representative Case, and esteemed members of the Human Services Committee,

Thank you for accepting this testimony in support of S.B. 284 on behalf of Health Equity Solutions (HES), a nonprofit organization with a statewide focus on promoting policies, programs, and practices that result in equitable health care access, delivery, and outcomes for all people in Connecticut. Our vision is for every Connecticut resident to attain optimal health regardless of race, ethnicity, or socioeconomic status.

Each year, HES conducts annual listening sessions to inform our policy agenda. For 2022, healthcare access was one of the top two health equity priorities identified by our partners.¹ Last year, the Connecticut General Assembly took the important step of creating access to HUSKY programs for young children and pregnant and postpartum adults. To further address gaps in access to health insurance, ***HES supports increasing access to HUSKY for all immigrants up to age eighteen.***

Lack of health insurance is one of the most significant barriers to health and, though Connecticut has one of the lowest uninsured rates in the United States, significant racial and ethnic disparities in coverage rates persist.² Insurance coverage makes it possible for people to seek health care services to stay healthy and address injuries and illnesses as they arise. Adults and children enrolled in Medicaid are more likely to seek regular care and receive preventative services.³ Further, a significant amount of research demonstrates that public health insurance for children has a high and fast return on investment, protects families' economic security, and improves health throughout the life course.⁴

An estimated 23% of uninsured people in Connecticut are immigrants without legal status.⁵ Many immigrants are ineligible for Medicaid due to visa status, and immigrants without documents are ineligible for Medicaid AND unable to purchase health insurance on Access Health. Based on country-of-origin estimates, it is reasonable to assume that the majority of immigrants without documents living in

¹ Health Equity Solutions. Health Equity Solutions 2021 Listening Sessions. Retrieved from: <https://www.hesct.org/blog/health-equity-solutions-2021-listening-sessions/>

² U.S. Census Bureau (2019), American Community Survey 1-year estimates , Tables S2701, Selected Characteristics of Health Insurance Coverage in the United States. Retrieved from <https://data.census.gov/cedsci/table?q=United%20States&t=Health%20Insurance&g=0400000US09>

³ American Hospital Association, *The Importance of Health Coverage*. The Importance of Health Insurance Coverage. Available at: https://www.aha.org/system/files/media/file/2019/10/report-importance-of-health-coverage_1.pdf

⁴ Chester, A., Wagnerman, K., & Alker, J. (n.d.). *Medicaid is a smart investment in children*. Retrieved from <https://ccf.georgetown.edu/wp-content/uploads/2017/03/MedicaidSmartInvestment.pdf>

⁵ CT Health Foundation. (2020) "Health Disparities in CT." Retrieved from: <https://www.cthealth.org/wp-content/uploads/2020/01/Health-disparities-in-Connecticut.pdf>

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Connecticut are people of color.⁶ As a result, ensuring access to health insurance for all immigrants living in Connecticut is a crucial part of advancing health equity in our state.

Thank you for the opportunity to submit this testimony in support of S.B. 284, An Act Increasing the Age from Eight to Eighteen Years for an Income-Eligible Person to Obtain Medical Assistance Regardless of Immigration Status. We can be reached with any questions at ksiegel@hesct.org or 860.937.6437.

⁶ Migration Policy Institute analysis of 2014-2018 U.S. Census Bureau data. Available at: <https://www.migrationpolicy.org/data/unauthorized-immigrant-population/state/CT>