June 12, 2020

Governor Ned Lamont
State Capitol
210 Capitol Ave
Hartford, CT 06106

Dear Governor Lamont:

This has been a very challenging time for the residents of Connecticut, and we appreciate the flexibility the state and its agencies have demonstrated in adapting its processes for providing assistance to residents in need during this pandemic. Some of these changes, including HUSKY coverage for telehealth and SNAP online purchasing, have proven to afford greater access, and we ask that you continue them. We would also like to see the streamlined SNAP application process made permanent and expanded. Finally, we ask again for action to ensure all of the residents of our state have some basic protections during this unprecedented time, including medical assistance for the undocumented. This action is needed to protect Connecticut residents as the economic and public health crises enter a new phase and short-term emergency relief ends.

Specifically, we ask that Connecticut:

- Continue HUSKY coverage for expanded telehealth services
- Continue efforts to bridge the digital divide, while maintaining other avenues to communicate
- Expand SNAP online purchasing
- Continue to streamline SNAP application process, and extend streamlining to other benefit programs
- Maintain suspension of 21 month Temporary Family Assistance (TFA) time limit
- Extend your emergency order regarding continued commercial health insurance coverage
- Extend Access Health CT special enrollment period
- Extend state medical assistance to the undocumented
- Extend moratorium on terminations of benefits beyond Medicaid, for the duration of the emergency
- Continue moratorium on overpayment recoveries
- Delay administrative hearings until at least video hearings are available
Continue Telehealth. First, thank you for implementing telehealth requirements for Medicaid and state licensed health insurance, and for demonstrating flexibility in adding audio capability as not all patients could access video systems for consulting with their providers. It has been an enormous benefit, keeping individuals out of crowded waiting rooms, and expanding access during a medical emergency. We hope that the state will continue to reimburse telehealth for Medicaid and mandate that state-licensed programs provide it even after the pandemic. It is a great benefit to our clients with mobility issues, as well as those in the highest risk categories for COVID-19 infection and resulting adverse health outcomes. We trust that the Connecticut Department of Public Health will hold these services to the highest standards and the Department of Social Services (DSS) will continue to monitor and evaluate patient satisfaction with the telehealth services offered by HUSKY providers.

Bridge the Digital Divide. The telehealth program, along with remote learning efforts, has laid bare the digital divide in our state. The gaps in broadband internet access in the rural areas of the state are well documented, but perhaps less fully appreciated are the gaps that exist in urban coverage. Only sixty-seven percent of urban residents have access to broadband connectivity¹. In a society increasingly connected only online, during a time when public sources of internet access such as libraries are closed, not having access to broadband internet service can affect not only access to health care, but also the ability to participate in distance learning when schools are closed, apply for unemployment benefits and DSS administered benefits, find a job, or simply be connected to the ones you love who do not live in the same household. Lack of internet access can also impede access to the courts as judicial hearings, pretrial conferences, and arguments are conducted in virtual conference rooms during the pandemic, and potentially beyond. Internet access has become a social determinant of health. We urge the state to work with Lifeline providers to find ways to expand access to broadband services for low-income families and to explore options with municipal leaders to provide local hotspots. We also note for many access to broadband services is limited due to lack of access to devices that allow them to connect to the internet. This has been particularly apparent for families trying to connect with their children’s schools for distance learning.

Because broadband is not as universal as it should be and because those who are older or have cognitive limitations may not be able to access online options, we also seek assurance that the State will maintain in-person options. Services could also be improved by affording the possibility to apply by phone.

Expand SNAP Online Purchasing. We also thank you for joining the online buying program for the Supplemental Nutrition Assistance Program (SNAP). We believe this will be a significant improvement, particularly for SNAP recipients most at risk of contracting and suffering serious health consequences from COVID-19. We ask this option continue after the pandemic ends.

Streamline SNAP Applications and Extend Streamlining to Other Benefit Programs. We also appreciated the efforts made to streamline the process of applying for SNAP, suspending interviews in those cases where the record is complete. This is important not only during the

¹ Mark Masselli of the Community Health Center, Inc. noted this in a presentation before the Insurance and Real Estate Committee of the General Assembly on June 4, 2020
pandemic, but also in the days to follow, as many of those currently receiving augmented
unemployment benefits may discover they need additional assistance to feed their families.
Indeed, we are seeing a new client base of individuals who are wholly unfamiliar with the DSS
benefits system. We anticipate, as it becoming more apparent that many lost jobs will not return
quickly if at all, there will be many more people who need help than have been enrolled in DSS
programs before. Thus, we hope that the current streamlined application process continues
beyond the pandemic.

We also ask that efforts continue to streamline and simplify the verification process for other
DSS programs, including HUSKY C and SAGA, at least during the pandemic, when requested
documentation is particularly difficult to obtain. Specifically, individuals should be placed on
benefits upon application, based on a presumption of eligibility, with verification either waived or
delayed, and individuals maintained on full benefits while any verification is being sought, with
reliance upon third-party verification wherever possible. Presumptive eligibility is being
extended in other states to elderly and disabled Medicaid applicants, during the pandemic. This
would also treat HUSKY C enrollees similarly to HUSKY A, B, and D applicants.

**Extend TFA Time Limit.** We also anticipate that many people who have had difficulty finding
work in the past will continue to struggle, perhaps even more so, as lower skilled jobs are
eliminated. Moreover, as we learn about the long-lasting effects of the illness on survivors, we
anticipate that many COVID-19 patients may be unable to work for some time even after they
have been discharged from the hospital or are no longer infected. Based on experience with
SARS, in which 10 out of every 46 people had reduced lung capacity three years after infection
and 44% had some sort of cardiovascular abnormality 12 years after infection, doctors expect
that recovered COVID patients may experience physical impairment for years to come. ²

Between reduced employment options and increased health impairments, we ask that you
permanently remove the 21 month time limit for Temporary Family Assistance (TFA). Connecticut’s TFA time limit is one of the shortest in the nation. Not only is it a difficult timeline for recipients to find a job in the midst of the coming COVID-19 caused recession, it is utterly
inadequate for someone who has been directly impacted by COVID-19 to make a full recovery
back into the work force.

**Extend your emergency order 7S regarding continued commercial health insurance coverage.**
Where it is within the state’s regulatory power, we urge you to extend the two month grace
period for health insurance premiums to 120 days, requiring health insurers to maintain
coverage for those enrolled prior to the COVID-19 outbreak. This will help people to remain on
the same insurance during the emergency, and to continue to see their current providers. In
addition, we received reports that despite this order some lost coverage because they did not
meet the criteria or process set by the insurance carrier. We urge you to amend the order to
explicitly state those enrolled in coverage at the time of the outbreak must be automatically
continued for this period, absent a request for cancellation from the insured. We also ask that

you urge employers who provide self-funded health insurance continue to do so for workers they terminate as a result of the COVID-19 outbreak for at least 120 days.

**Extend Access Health CT Special Enrollment Period.** We also anticipate that many people who had relied on employer provided health care insurance will now need to access HUSKY or arrange for a private policy on the Access Health CT (AHCT) Exchange. Because it can take several months for unemployment or pandemic unemployment to be processed and received by an individual, one might not have the money to purchase insurance from the AHCT before the sixty day qualifying event period expires. For that reason, we ask that you extend the special enrollment period for the AHCT Exchange again. Judging from the calls we have gotten on our hotlines and helplines, the newly unemployed are often people with no prior experience with DSS systems who do not know of the programs available and how to access them. An extension of the special enrollment period may help reduce a potentially large and growing uninsured population.

**Extend state medical assistance to the undocumented.** We also ask that the state make available medical assistance coverage to immigrants who would be otherwise eligible but for their immigration status. As has been made so apparent during this health crisis, our immigrant community is often employed in essential and public facing work, exposing them to greater risk of infection of COVID-19. The state’s pledge to cover the testing and treatment of COVID-19 for all who are financially eligible for Medicaid regardless of immigration status was the right thing to do, but to help encourage people to seek treatment when they need it, we must also cover any costs incurred should one’s symptoms turn out to be unrelated to COVID-19. Full coverage under the HUSKY program is necessary for the duration of the pandemic.

To ensure all of our residents have access to providers near them, we urge you to reimburse Medicaid providers who see an uninsured patient at Medicaid rates for all services, even if the person is not ultimately placed on Medicaid, and advise all providers accordingly so that they will not be dissuaded from providing care due to reimbursement concerns.

**Extend moratorium on terminations of DSS benefits for the duration of the emergency.** We request that no one be terminated from any DSS-administered benefits or have any benefits reduced until the public health emergency has ended, absent an affirmative request from the individual or proof that the individual has moved out of the state or died. This protection has been implemented for all Medicaid enrollees under the Families First Act, and has proven to be successful at keeping people insured; extending it to other essential benefits during the pandemic is critically needed.

**Suspension of Overpayment Recoveries.** We ask the Department to continue the suspension of overpayment recoveries until the economy improves. Current benefits do not provide the amount needed for subsistence, and that bare minimum should not be further eroded by withholding to recover overpayments.

**Delay administrative hearings until at least video hearings are available.** Audio-only hearings by telephone do not comport with due process because the claimants seeking essential needs-based benefits cannot adequately cross-examine witnesses against them and the hearing
officer cannot fully assess credibility. Accordingly, hearings should be suspended and the individual should receive, or continue to receive, the benefits requested which are the subject of the hearing, until either in-person or video hearings are available to all.

We thank you for the many steps you have taken to ensure that Connecticut residents are protected during this pandemic, and we ask that you consider these additional steps to further protect our most underserved populations.

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