



Testimony before the Health and Human Services Committee

LD 1539, An Act To Provide Maine Children Access to Affordable Health Care

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Senator Gratwick, Representative Hymanson and distinguished members of the Health and Human Services Committee—my name is Chris Pezzullo, and I serve as Clinical Director at the Maine Primary Care Association (MPCA).

I regret that I can't be here today to testify in person but I am honored to provide written testimony in strong support of LD 1539, An Act To Provide Maine Children Access to Affordable Health Care. On behalf of MPCA and its members, which include all of Maine's 19 Federally Qualified Health Centers (FQHCs) and one FQHC Look-Alike, I ask you to vote in favor of this bill.

As a pediatrician and former Chief Medical Officer for MaineCare, I believe LD 1539 is an important bill that merits your support. This bill makes significant improvements to CHIP, ensuring medical coverage for some of Maine's most vulnerable--those uninsured children whose family incomes range from 200-325% FPL. Additionally, it removes the 3-month waiting period for enrollment in the Cub Care program following the loss of health insurance or coverage under an employer-based plan, ensures that eligibility is not subject to an asset test. It also provides coverage to persons 19 and 20 years of age and to noncitizens under 21 years of age.

CHIP/Medicaid provides a comprehensive child-focused benefit: the Early and Periodic Screening, Diagnostic, and Treatment benefit (EPSDT). It is designed to ensure that children receive recommended preventive screenings, follow-up diagnostic assessments, and all medically necessary services that health care providers deem essential to prevent, treat or improve the diagnosed condition.

The U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA) has done considerable work in identifying factors that can influence the capacity of individuals or populations to reach their full potential for health and well-being. What they found, among other things, is that early experiences can "program" an individual's future health and development. What does this mean given our current situation in Maine?

We know that up to 5% of Maine's children remain uninsured. These children are at risk for substandard health and wellness, and are more vulnerable to trauma, adverse childhood experiences and health disparities. This bill will help level the playing field and foster greater opportunities for our children to reach their future health and development.

Investing in children's health has the potential to reduce rates of future chronic diseases and addictions, potentially saving Maine's healthcare system millions of dollars. Additionally, research has linked CHIP/Medicaid coverage in childhood to long-term benefits, including:

- Improvements in educational outcomes at the elementary, high school and college levels;
- Decreased high school dropout and increased college attendance and completion rates; and
- Produces economic benefits in adulthood, including increased employment and higher tax payments (one study found that each additional year of Medicaid eligibility from birth to age 18 increased cumulative tax payments by \$186 and reduced cumulative Earned Income Tax Credit receipts by \$75!)

In closing, the Institute of Medicine, National Academy of Sciences' definition of children's health sums up what this bill intends to provide for Maine's most vulnerable children:

"Children's health is the extent to which individual children or groups of children are able or enabled to (a) develop and realize their potential, (b) satisfy their needs, and (c) develop the capacities that allow them to interact successfully with their biological, physical, and social environments."

It is for these reasons – and more – that I respectfully ask that you support LD 1539.

Thank you for your careful review of this bill and if you have any questions please don't hesitate to contact me directly at cpezullo@mepca.org.