

Human Services Committee

JOINT FAVORABLE REPORT

Bill No.: HB-6937

AN ACT CONCERNING MEDICAID COVERAGE FOR MEDICALLY

Title: NECESSARY CHILDREN'S DIAPERS.

Vote Date: 3/5/2025

Vote Action: Joint Favorable

PH Date: 2/27/2025

File No.: 114

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SPONSORS OF BILL:

Human Services Committee

REASONS FOR BILL:

As the cost of diapers continues to rise, an increasing number of families cannot afford diapers for their children, leading to otherwise preventable health complications such as diaper dermatitis, urinary tract infections (UTIs), or other skin conditions related to inadequate diaper hygiene. These families are not currently eligible for Medicaid assistance as 42 C.F.R. § 440.70(b)(3)(i) of the federal Medicaid regulations, which details that medical supplies shall only be provided if medically deemed necessary to address an individual's medical disability, illness, or injury. Consequently, Connecticut's Department of Social Services (DSS) only provides coverage of diapers under Medicaid when medically necessary to manage incontinence associated with the medical condition of children aged three and older. This bill seeks to close the gap between the families who are not able to afford diapers with those who are by having the Commissioner of Social Services amend the Medicaid state plan to extend Medicaid coverage to children from birth to age three for whom the provision of diapers is deemed medically necessary.

RESPONSE FROM ADMINISTRATION/AGENCY:

Department of Social Services (DSS), Andrea Barton Reeves, Commissioner; opposes this bill, citing concerns on whether the U.S. Centers for Medicare and Medicaid (CMS) would approve a waiver to provide these services and on the fiscal impact. In their research on the practices of other states with Medicaid waivers that provide diaper coverage, they found that both Delaware and Tennessee were approved by CMS for such coverage in their 1115

demonstration waiver. This allowance, however, was permitted only in conjunction with the much larger and broader 1115 demonstration waiver, and therefore its outcome is not a determinant to Connecticut's ability to be granted this as well. Moreover, DSS modeled the cost that would result from providing these services and calculated that the total gross expenditures would amount to, at minimum, \$31 million – with an approximate state share of \$16 million based on September 2024 enrollment data. This calculation, however, only accounts for the number of children who had reported diagnoses that would deem diapers a medical necessity. Because this bill extends to providing diapers to prevent or ameliorate the listed medical conditions, DSS foresees that this bill may result in costs over \$123 million – with an approximate state share of \$64 million. These costs may be further increased by an estimated \$400,000 with the additional expenditures related to quality assurance measures, increased administrative costs related to utilization management requirements, and updates to the Medicaid Management Information System (MMIS).

State of Connecticut Treasurer's Office, Erick Russell, State Treasurer; supports this bill as it would further their efforts to help children in need. The Office of the Treasurer administers CT Baby Bonds, a program designed to end generational poverty by investing in individuals whose birth was covered by HUSKY. These children would receive additional help through this expansion of Medicaid coverage. It is asserted that this coverage is essential for the health of babies and toddlers, who have dealt with adverse health conditions because of inadequate access to diapers.

State of Connecticut Office of the State Comptroller, Sean Scanlon, State Comptroller; supports this bill as expanding Medicaid coverage to provide clean diapers was a main priority of the Women's Subcommittee in the "Healthcare Cabinet" convened by the Office of the State Comptroller. Furthermore, it is stated that this bill will help the state move forward in their effort to provide affordable and accessible healthcare.

NATURE AND SOURCES OF SUPPORT:

Connecticut General Assembly, State Representative Aundre Bumgardner; supports this bill, expressing his personal connection with the bill as the grandson of a pediatrician who recognized the troubles that families face when trying to care for their children. Representative Bumgardner cites that the cost of diapers has risen 22% since 2018, exacerbating the financial challenges of low-income families. This bill is believed to help alleviate the financial stress of these families and prevent costly medical interventions and economic losses from parental work absences.

Connecticut General Assembly, State Representative Manny Sanchez; supports this bill. As a father, he empathizes with parents who struggle to afford the costly expense of diapers – a nonoptional essential item.

Connecticut General Assembly, State Senator Martha Marx; supports this bill because it will help alleviate the demand for resources on the Connecticut Diaper Bank, which is unable to supply all the families who need their assistance. Senator Marx furthered that this bill is critical to improve health outcomes, alleviate financial strain, and ensure accessibility to basic needs.

Connecticut General Assembly, Representative Bobby Gibson; supports this bill because his work with community organizations such as Laurel Family Resource Center and Bloomfield School Readiness has not been able to meet the full needs of parents, and there should be additional resources to match the demand.

Student, Nathaniel Aroin; supports this bill, offering a variety of sources that provide information on the need for Medicaid expansion to include diaper coverage, such as the asserted links between diaper insecurity and maternal depression, food insecurity, avoidable health conditions, and income loss from families unable to work. The historical context is also offered, as well as instances of what other states, such as Delaware, have done to expand Medicaid coverage for diapers. This testimony recommends that the language of the bill be clarified to state more explicitly who would qualify for this assistance. It is also recommended that the bill should include language that guarantees assistance to organizations such as the National Diaper Bank, as applying for Medicaid can take up to 45 days to be reviewed by the Department of Social Services (DSS).

Health Equity Solutions, Kally Moquete, Esq., Senior Manager of Policy; supports this bill because through their conversations with Connecticut residents, they learned of the concern that was had for being able to pay for basic needs, one of which being diapers. The testimony indicates that this bill also has the potential to create \$4,287,208 in statewide savings due to the resulting reduction in medical treatment needed.

Fairfield County's Community Foundation, Mendi Blue Paca, President & CEO; supports this bill because it would help further the efforts of the Community Foundation and their partnership with Optimus Health Care, which provides an annual grant to organizations that address the social determinants of health for women and girls in Fairfield County.

City of New Haven Fire Department, Maurice Edwards, Lieutenant; supports this bill and details his experience with the Diaper Bank of Connecticut, a program that would become instrumental in his ability to provide for his children and send them to daycare without concern of not having proper supplies.

Eastern Connecticut Health Network (ECHN), Donna Cameron, MSN, Ed, BSHCA, RN; supports this bill as it would extend the current coverage for children aged three and up to those under three as well. Additionally, ECHN supported 218 families who received 100 diapers a month from Connecticut Diaper Bank, however, this assistance slowed down to 25-50 diapers a month until the gradual end of the Diaper Bank program. It is asserted that during the period when families were receiving such assistance, there was a considerable improvement in the ability of the families to provide for their children.

Connecticut Hospital Association, Anonymous; supports this bill because it would allow parents who could not send their children to childcare due to inadequate diaper supply to do so.

The Commission on Women, Children, Seniors, Equity & Opportunity (CWCSEO), Christian Duborg, Food & Nutrition Policy Analyst; supports this bill because it would improve child health outcomes, alleviate family financial burdens, and reduce long-term healthcare costs. It is noted that this problem disproportionately affects Black, Indigenous, and

Latinx children. Additionally, the testimony discussed how there are no federal assistance programs that currently cover diapers, creating a gap that leads to families having to choose between purchasing diapers or other basic needs.

Connecticut Early Childhood Alliance, Merrill Gay, Executive Director: supports this bill as early childcare providers rely on parents to supply diapers for the children, and when they are unable to do so, there is an increased burden on the childcare facilities. Additionally, this bill is proposed to help more infants and toddlers enroll in early education programs, which will result in more families being able to work.

Timothy Gabriele: supports this bill because, as a father, he understands the economic strain of paying for diapers. He explains that this strain is furthered by the lack of wage increases, inflation, and the loss of the child tax credit.

Emi Glass: supports this bill as it will help low-income families, and having DSS track the impact of diaper coverage would be valuable in providing data that will enable Connecticut to make informed policy decisions.

The Diaper Bank of Connecticut, Janet Stolfi Alfano, Chief Executive Officer: supports this bill as the organization currently serves over 6,000 infants and toddlers a month when the need is 70,000 based on Connecticut's DSS numbers of how many children under four are on Medicaid. Moreover, the testimony provides further evidence of the need to decrease families in need of diapers and cites Tennessee and Delaware, who were successful in their initiative to obtain Medicaid coverage for diapers.

The following members of The Diaper Bank of Connecticut submitted testimony in general support of the bill:

Board Chair, April Capone

Board Member, Mario Bucciero

Board Member, Nick Schupbach

The following testimony was provided citing the loss on the Diaper Connections Program, a piloted program with the Connecticut Hospital Association which once serviced around 46,000 diapers a month, being cut, as a main reason for their support of the bill:

Trinity Health of New England, Vice President of Advocacy and Government Relations, Dan Keenan

UConn Health, Anonymous

Hartford Healthcare, Regional Director of Community Health Joseph Zuzel

St. Patrick – St. Anthony Church, Michael Johnson, Priest and Executive Director Fr.: supports this bill he believes that as Catholics and Franciscans, the right to life extends past birth and that this bill would help families who have chosen to have their children by providing them with the supplies needed to thrive. It is cited that Tennessee has taken steps towards recognizing the importance of this coverage from Medicaid through the establishment of their program called TennCare. The testimony provides that this initiative should be continued in Connecticut.

St. Patrick – St. Anthony Church Member Dominic Basile-Vaughan; supports this bill because as a father of two children who were adopted through DCF, he has experienced his children returning from their mandated visits with their birth parents with the same diapers they had left with, resulting in multiple doctor appointments that may have been avoided had there been diapers provided to them.

The following members of St. Patrick – St. Anthony Church submitted testimony in general support of the bill:

Daniel Heur

John Szeghy

Adam Mackie

Anne Condon

Margaret Sullivan

John Szeghy

Patricia Spring

Rosina Marquis

John Wentland

Charlotte Saab

Testimony submitted expressing general support of the bill:

IRIS, Senior Manager Daniela Carranza

ACLU Connecticut, Policy Counsel Jess Zaccagnino

HUSKY for Immigrants, Coalition Director Katherine Villeda

Laurel Family Resource Center, Director Gail Nolan

Connecticut Children's Medical Center, Community Relations Manager Luis Rivera

Cornell Scott Hill Health Center, Pediatric Care Coordinator Bianca Romano

Connecticut Voices for Children, Research & Policy Advocate Ruchi Sheth

National Diaper Bank Network, Manager of Legislative Policy Ariana Smith

Edith B. Jackson Child Care Program, Director Amy Angelo

CT Maternal and Child Health Coalition, Consultant Marijane Carey

Middlesex Health, President & CEO Vincent G. Capece, Jr.

Center for Children's Advocacy, Executive Director Sarah Eagan, JD

Connecticut Association for Community Action, Executive Director Rhonda Evans

Reproductive Equity Now, Connecticut State Director Liz Gustafson

Connecticut Catholic Public Affairs Conference, Executive Director Christopher Healy

American Academy of Pediatrics – CT, Advocacy Committee Chair Molly Markowitz, MD

Waterbury School Readiness Liaison Krista Pisano

Nuvance Health, Andrea Rynn

Shelaugh McGrath, RN

Timothy MacDonald

Ledyard High School Student

Lynn Broder

Sara Moeller

Pamela Peatman

Deirdre Roberts

Michele S

David Smith

Michelle Noehren

NATURE AND SOURCES OF OPPOSITION:

None expressed.

Reported by: Danielle Colbath

Date: April 2, 2025