Dear Committee Members:

My name is Ibrahim Elali. I am the President of UCHC-AAUP, the union that represents over 600 medical, dental, and research faculty at UConn Health. I am an assistant professor of medicine, a practicing nephrologist, and a medical school teacher who is also actively engaged in medical innovation via the UConn technology incubation program. I am here to offer testimony in support of S.B 8.

UConn Health is the only public hospital in the state. One of our missions is to serve individuals receiving Medicare or Medicaid benefits. In fact, those patients constitute nearly one half-million of the annual visits to our facility. Among them are individuals with special and mental health needs who would be hard-pressed to find care elsewhere. In terms of my own area of practice, we provide the only nephrology outpatient care available for the Medicaid population in the Hartford area.

UConn Health is our flagship institution, where professionals, trainees, and students deliver world class education and care to people from all walks of life. UConn Health houses the only public medical school in the state of Connecticut. Our faculty work for the citizens of the State of Connecticut by educating the next generation of physicians, dentists, and scientists. The professionals we train serve our citizens across all socioeconomic classes and, thus, work every day to help resolve healthcare delivery disparities in our state.

We are committed to continuing to provide the backbone of the state’s public medical care and education along with advances in science and medical innovation for years to come. We are committed to continue to attract bright minds to the state to help create the growth we need. Together we must support our only public medical school and only public hospital.

While the state covers 100% of the salary costs for most other state agencies, UConn health is required to fully fund the salaries and fringe costs through tuition fees, clinical and federal research grant revenue putting a huge strain on the UConn Health research community.

We ask that you please support SB 8 and ask that you amend the statute as follows: Section 1. (NEW) (Effective on passage). For the fiscal year ending June 30, 2023, and for each fiscal year thereafter, the Comptroller shall fund the retiree pension and retiree health care liability portion of the fringe benefit costs for all employees of the constituent units of the state system of higher education.

Sincerely,

Ibrahim Elali MD, FACP
President, UCHC-AAUP
Dear Committee Members:

My name is Laura Haynes and I am a Professor at the Center on Aging at the Department of Immunology. My work examines how aging impacts the response to infectious diseases such as influenza. This is important because older folks are more susceptible to infection and they exhibit significantly decreased resilience following infection. For example, we are examining how influenza infection impacts muscle loss and how this is related to physical disability in older folks.

Ultimately, loss of mobility resulting from influenza infection could result in the inability to live independently and require relocation to an assisted care facility. We are using an aging mouse model of influenza infection to understand the mechanisms of how flu impacts muscle and how this can be prevented.

My research is funded by NIH grants. Because of the high fringe benefit rates for employees at UConn Health, I have had to cut back on the experiments proposed for each grant that I have submitted. Importantly, this can severely impact the overall strength of the grants that I can submit and is disadvantageous since our competitors do not have to deal with this issue. I have also had to severely limit the percent effort of my staff on my grants. This limits the number of experiments that I can conduct and it also limits the number of follow up experiments that we can do when we find something interesting or unexpected. The end result is that our research is not as robust and cutting edge when compared to our competitors, and our chances of obtaining future funding from NIH are diminished because of this.

I support SB 8 with the Amendment to the statute as follows: Section 1. (NEW) (Effective on passage). For the fiscal year ending June 30, 2023, and for each fiscal year thereafter, the Comptroller shall fund the retiree pension and retiree health care liability portion of the fringe benefit costs for all employees of the constituent units of the state system of higher education.

Thank you,

Laura Haynes
Dear Committee members:

I am a Professor at UConn Health and a Principal Investigator and Co-Director of the Center for Reproducible Biomedical Modeling. This is a National Biotechnology Resource Center funded by a six-year grant from the National Institutes of Health. It is a multidisciplinary and multi-institutional center: a collaborative effort between the University of Washington, Seattle, the Icahn School of Medicine at Mount Sinai, New York, UConn Health, Farmington, and the Auckland Bioengineering Institute, New Zealand.

One of the salaried positions funded by this grant is for a computer scientist to work on one of the joint projects between UConn Health and Mount Sinai. This position was originally supposed to be hired through UConn Health, but due to the high fringe benefit rates imposed on research (resulting from the unfunded state pension plan liability), we could not meet the dollar cap on the grant award and the position was moved from the UConn Health budget to the Mount Sinai budget.

The direct result was that UConn Health and the State of Connecticut lost approximately $1.4 million in federal funds, as well as a newly-created six-year, full-time, highly-skilled STEM job, to Mount Sinai and the State of NY. Were the State of Connecticut to have funded fringe costs appropriately, in this particular case it would have increased state expenditures only by about $165,000 (total over the five year period). This is one concrete example of how the high fringe benefit rates put UConn Health and the State of Connecticut in a losing position, and of the high return of investment that would result from reducing fringe rates to appropriate levels.

Therefore I am writing in support of SB 8 with the Amendment to the statute as follows: Section 1. (NEW) (Effective on passage). For the fiscal year ending June 30, 2023, and for each fiscal year thereafter, the Comptroller shall fund the retiree pension and retiree health care liability portion of the fringe benefit costs for all employees of the constituent units of the state system of higher education.

Thank you for your time,
Ion Moraru