

Public Health Committee

Public Testimony of the Connecticut Women's Education and Legal Fund (CWEALF)
H.B. 6424: An Act Revising Data Collection Requirements for Health Care Providers

Connecting to the State-Wide Health Information Exchange

Submitted by: Nicole Sanclemente, Policy and Program Associate

March 3, 2021

The Connecticut Women's Education and Legal Fund (CWEALF) is a statewide, nonprofit organization that advocates for and empowers women and girls in Connecticut, especially those who are underserved and marginalized. For forty-seven years, CWEALF has been a leading advocate in the development of policy solutions that advance women's economic security, combat discrimination, and increase gender equity in Connecticut.

CWEALF supports H.B. 6424: An Act Revising Data Collection Requirements for Health Care Providers Connecting to the State-Wide Health Information Exchange.

The COVID-19 pandemic has exacerbated existing issues and inequities in our state. The collection of race, ethnicity, and language (REL) data is a critical component of evaluating health outcomes and ensuring health equity for everyone. By consistently collecting and publishing health data broken down by race and ethnicity, we can evaluate who, how, and where disparities occur. To ensure that we are accurately monitoring and capturing the impact of the COVID-19 crisis on the health outcomes and equity of marginalized and underserved populations, we must support proposals to standardize and improve the collection and sharing of REL data in Connecticut.

The COVID-19 crisis compounds existing health disparities among communities of color in Connecticut. Minoritized populations are at a greater risk of contracting COVID-19 since many have pre-existing health conditions that make them more susceptible and vulnerable to the virus. These conditions include asthma, diabetes, heart disease and high blood pressure.

Severe health inequities also exist in maternal and infant mortality and morbidity: the maternal mortality rate of the general population in Connecticut is currently 19.0 per 100,000 births, a 5.8 jump within one year from 2018. In Connecticut, babies born to

black mothers are more than three times more likely to die in their first year of life, and babies born to Latina mothers are more than twice as likely to die in their first year than those born to white mothers. The gathering of this data is crucial as we work towards ensuring that these issues are solved efficiently and effectively.

House Bill No. 6424 will guarantee uniform and consistent collection and reporting of disaggregated race, ethnicity, and language data not only in the Health Information Exchange, but also in all state agencies collecting health data.

We urge the Committee to pass H.B. 6424 to ensure that all Connecticut residents have a fair and just opportunity for wellbeing during and after the pandemic.