



**Statement in Support of**

**Senate Bill 203 - An Act Concerning Full Payment to Medical Assistance Providers for Services Provided to Dually Eligible Patients**

**Human Services Committee**

**February 6, 2007**

This testimony is being submitted on behalf of the physicians of the New London County Medical Association and their patients to urge your support of Senate Bill 203. Our position on this issue is similar to that in recent years.

As physicians, we are fortunate to be able to come before the legislature to voice our concerns. However, there are groups that are unable to make their voice heard. One of these groups is the dually eligible Medicaid/Medicare patients. It is on behalf of those patients that we urge this committee to support the two bills before you today. These patients are often the sickest of patients. They are often elderly, poor, and in need of special treatments and are least able to make their voice heard.

As advocates on behalf of these patients, the physicians of New London County feel a responsibility to make the legislature aware of what the current cuts to Medicare Part B crossover claims do. If a patient qualifies for both Medicare and Medicaid, that means that they are often elderly and fall below 100% of the federal poverty level. Further, these low income nursing home residents and disabled adults and children are in need of specialized treatments such as mental health services, renal dialysis, and cancer treatment.

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For services covered under Medicare, such as physicians' services, there is usually a co-payment that must be made by the patient to the provider. However, if that client is also eligible for Medicaid, Medicaid paid that deductible, usually about 20%. With Connecticut's implementation of the 1997 Federal Balanced Budget Act, physicians had their reimbursement reduced by 20%, something for which they cannot bill the patients. Furthermore, patients do not have the resources to pay.

By reducing this payment, dually eligible patients are losing access to the special services they need, because physicians will be unable to absorb the cost. Remember that this reduction is on top of the skyrocketing cost of professional liability insurance. The financial reality of this budget reduction is that it will be extremely difficult for medical practices to assume new dually eligible patients. Changes in health care have required physicians to see more patients in a day, hire more staff to process approvals by HMOs and to handle billing issues, and in short change the way we manage our practices. These changes have increased overhead costs. Unlike nursing homes and hospitals, physicians have not had a Medicaid rate increase in 10 years. Despite this, physicians in Connecticut have continued to treat dually eligible patients. We do so because we are committed to providing patients with the best possible health care. However, past years' reductions will make it difficult to accept any new such patients. We will continue to treat our current patients, but many physicians will be unable to assume any new ones.

We respectfully request that you support Senate Bill 203. It is the patients of Connecticut who will benefit.

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