

January 31, 2007

To members of the Public Health Committee,

I am Dr. Robert McLean, a primary care internist in New Haven, and I represent over 2100 members of the Connecticut Chapter of the American College of Physicians in urging you to develop and pass legislation which would establish a comprehensive health care system providing access to affordable quality health care for all residents of our state. This will prove a challenging task, but it must be addressed as we continue to face the problems related to uninsured and underinsured citizens who either do not obtain health care or turn to our emergency rooms for simple primary care services because those facilities serve as the providers of last resort.

I will comment on the details of H.B.6332, An Act Increasing access to Healthcare. We support the expansive goals outlined in this bill with some cautionary comments. It cannot be emphasized enough that Medicaid reimbursement rates for providers (especially for primary care physicians for adults and children) must be increased to a level that makes them willing to see these patients. At present, those fees are so low that many (if not most) primary care providers in private practice cannot cover their expenses of practice overhead, employee salaries and benefits, and malpractice insurance with current reimbursement levels. As a result, community health clinics and emergency rooms are frequently overburdened and overcrowded with Medicaid patients unable to receive care elsewhere. Any attempts to merely adjust income requirements to make it easier for our citizens to qualify for Medicaid or HUSKY will not truly improve access to care unless the doctors' offices are able to see such patients with reasonable reimbursement rates.

Greater access to primary care services will clearly improve the health status of many of our citizens as they obtain appropriate preventive care. The Institute of Medicine (IOM) through a series of reports over the past several years has highlighted data showing that the uninsured live sicker and die younger. Emergency rooms are not designed to provide primary care services in an efficient manner. Overcrowding of emergency rooms with uninsured and Medicaid patients who cannot be seen elsewhere for non-emergent conditions has become a major problem across the state. Hospitals are increasingly faced with caring for uninsured patients, and as a result there is a large state pool of funds for "uncompensated care". If all our citizens are insured, then the need for those funds would disappear as hospitals are then paid for that care. It must be recognized that any system which provides more insurance to more people will have greater cost, but at each step there will be savings as well.

The IOM's 2004 report "Insuring America's Health: Principles and Recommendations" states that health care coverage should be universal, continuous, and affordable. H.B. 6332 seems to appropriately address the "universal", but not necessarily the "continuous" and "affordable". Any funding mechanism must include enhanced portability of insurance so that changes in employment status, health status, or financial status do not lead to loss of coverage, even temporarily. Using laws related to tax credits and tax deductibility may help some businesses and individuals find health insurance more affordable, but nothing in this bill addresses how to ensure that insurance premium rates are affordable to the many people needing to purchase it on their own.



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