

**The Case for the Office of the Healthcare Advocate (OHA)**

**THE STATEMENT Quote of Governor's Spokesperson, Christopher Cooper, *The Day*, 3/13/09:**

"Governor Rell proposed elimination of [OHA] because Connecticut already has a Department of Public Health, an Insurance Department, a Department of Social Services and an attorney general's office," he said. "The proposal was designed to *streamline government, reduce duplication* and *save Connecticut residents* money, since a portion of their insurance premiums are used to fund the \$2 million budget of the health care advocate's office."\*

**THE FACTS**

- 1. Streamlining** – Webster's Dictionary defines the verb to streamline as: "to make simpler or more efficient."
  - OHA's process IS simple for consumers. We almost always pick up the phone on the first call, we return calls the same day, we assist people step-by-step—we make the insurance appeals process simpler and successful.
  - OHA is probably the most efficient office in state government – we return \$5.20 for every dollar spent on our office. In addition we conduct a healthcare policy agenda on the state and federal levels. We do all of this with only 7 full-time staff. Maybe that's why OFA cites our office as an outstanding example of Results Based Accountability (RBA).
- 2. Reducing Duplication** – This is often cited by administrative officials as a reason to eliminate our office. *No state agency does what we do.* How do we know?
  - We've received repeated referrals directly from the Governor's office, DPH, DSS, OHCA and DOI. (In one case early on, a consumer complaint went from the Governor's office to DPH to DOI and then to OHA. It was our office that resolved the case.) Now agencies refer directly to us.
  - State regulatory agencies are not advocates. They do not walk with people through appeals processes. They certainly do not advocate for policies that help consumers, but may conflict with the administration's directives.
  - OHA is the only independent healthcare watchdog entity in state government. We ensure accountability in private and public healthcare insurance programs.
- 3. Save money since a portion of the insurance premiums are used to fund our budget** – Not true. Why?
  - If OHA were eliminated, our \$1.03M annual budget would go back as a credit to the insurance companies, not to consumers.
  - For the sake of argument on savings, let's run through the calculations:
    - ◊ Domestic insurance carriers collect approximately \$6 billion of premiums across all lines of insurance.
    - ◊ OHA's \$1.03 million budget is assessed on these domestic insurance entities operating across all lines of business in Connecticut.
    - ◊ If insurers actually chose to pass any savings on to consumers, the elimination of OHA would "save" consumers \$0.00017 per dollar of premium.
    - ◊ Put another way, closing OHA would save a mere 17 cents for every \$1000 in assessed premiums.
    - ◊ The closing of OHA also would put the \$5.2 million in consumer savings that we generate back into the pockets of the insurers.

*We thank you for your support and your continued referrals to our office.*

\* OHA's annual budget is approximately \$1.03 million.

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