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**Connecticut State Medical Society**  
**Testimony Submitted to the Insurance and Real Estate Committee**  
**February 3, 2009**

Senator Crisco, Representative Fontana and members of the Insurance and Real Estate Committee, On behalf of the over 7,000 members of the Connecticut State Medical Society (CSMS) thank you for the opportunity to present this testimony to you today on several proposed pieces of legislation. We feel that these bills will have an impact on appropriate coverage and access to healthcare services in Connecticut, as well as the overall well-being of Connecticut residents.

**Proposed Bill 5018 An Act Requiring A Cost-Benefit Analysis of Health Insurance Benefits in This State**, would establish a working group to conduct a cost-benefit analysis of existing health insurance benefits mandated in this state and require that a cost-benefit analysis be conducted prior to the implementation of any new health insurance law. We agree that it is important that the impact of requirements placed on the healthcare industry through mandates be understood from both a quality and cost perspective. As you know through years of testimony by this organization, we believe that a service deemed medically necessary by a patient's treating physician should be afforded insurance coverage and payment. Unfortunately, the refusal by many health insurers to cover medically necessary services has led to the need for this body to require health insurers to do what is right through the passage of certain mandates or coverage requirements.

Language for this legislation must be clear that any review of the "benefit" would recognize the impact on the "health and well-being" of those in need of such services, including, but not limited to, enhanced life expectancy, improved activities of daily living, maintenance of health and reduction of pain or discomfort. Any system to evaluate the impact of legislation passed that impacts the health of our citizens must provide for an analysis on the increased in quality of life to individuals receiving the benefit. Therefore, we ask that if it progresses through the session that organized medicine be invited to participate in the development of an appropriate and comprehensive review of our state "mandates. Cost is an important factor, but the benefits to the citizens of Connecticut must be evaluated and foremost in the minds of legislators, regulators and those who intend on evaluating the effectiveness and advantages of mandated medical services.

Additionally, passage of **HB 5018** would impact no fewer than seven other proposed bills on your agenda today including:

**HB 5673 AAC Health Insurance Coverage for Wigs For Individuals with Permanent Hair Loss**

**HB 5021 AA Expanding Health Insurance Coverage for Ostomy-Related Supplies**

**HB 5023 AA Requiring Health Insurance Coverage for Wound Care for Individuals with Epidermolysis Bullosa**

**HB 5024 AAC Health Insurance Coverage for Bone Marrow Testing**

**SB 290 AA Requiring Health Insurance Coverage for Bone Marrow Testing**

**HB 5672 AA Expanding Insurance Coverage for Hearing Aids for Children**

**HB 5671 AAC Health Insurance Coverage of Prosthetic Devices**

Without a doubt, passage of these bills would provide a tremendous benefit to patients afflicted with these conditions. They would strengthen an individual's health status and/or increase quality of life. These benefits cannot be compared or contrasted to the financial cost of their implementation. However, we must once again stress that the position of the CSMS is that none of these bills would be necessary if a rational determination of a medically necessary service by a physician to improve health or increase a patient's quality of life was the trigger for insurance coverage and payment.

Finally, today we wish to provide comments to you on **Senate Bill 458 An Act Requiring Communication of Mammographic Breast Density Information to Patients**. Early screening and detection of breast cancer must be priority. Nothing should preclude appropriate coverage and payment for the imaging services or potentially any medically necessary follow-up services or care provided. We welcome the opportunity to work with this committee to ensure that appropriate information is provided and appropriate follow-up care is covered.

Thank you for the opportunity to provide this testimony to you today. We look forward to working with you on these and other important issues addressed by this committee throughout the session.