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**Connecticut State Medical Society Testimony**  
**House Bill 6600 An Act Concerning the Establishment of the Sustinet Plan**  
**March 2, 2009**

Senator Harris, Representative Ritter and members of the Public Health Committee, Senator Crisco, Representative Fontana and members of the Insurance and Real Estate Committee, Senator Doyle and Representative Walker and members of the Human Services Committee, my name is Matthew Katz, Executive Vice President of the Connecticut State Medical Society (CSMS). On behalf of our more than 7,000 members thank you for the opportunity to testify before you today on **House Bill. 6600 An Act Concerning the Establishment of the Sustinet Plan**

CSMS provides its strong support for the guiding principles of the Sustinet proposal and the associated legislation. CSMS is proud to have provided its assistance in reviewing and evaluating the initial documentation and approaches that have now become the Sustinet proposal.

In 2007, CSMS was one of the first organizations, medical or otherwise, that called for a statewide comprehensive health care system that provides access to affordable quality patient health and medical services. CSMS then and now believes that our health care system needs to be reformed and that such reform must provide for greater access to medical care for ALL state residents; must be based on scientific evidence and ensure quality medical care is delivered; must be based on transparent information associated with how care is delivered and how it is paid for; and must be appropriately and adequately funded. We believe that the Sustinet proposal meets these objectives.

CSMS partnered with the Universal Health Care Foundation of Connecticut to issue the first physician workforce survey of its kind in the state. The results from the 2008 CSMS Physician Workforce Survey show too many practicing physicians are actually considering leaving Connecticut or no longer practicing medicine, and we know that recruitment of new physicians is difficult if not practically impossible within certain specialties and subspecialties of medicine.

The seven-page self-administered survey sought physician opinions on a broad range of issues ranging from satisfaction with their chosen career to the kinds of challenges they face in caring for Connecticut's citizens and how those challenges affect patients' access to quality medical care. Surveys were completed by 1077 physicians in 17 specialty areas spread across the state's eight counties, of varying ages. A majority of survey respondents were in solo practice or groups of five or fewer physicians, and 57% were self-employed. Some key findings included:

- 19% of physicians indicated they are contemplating a career change because of the practice environment in Connecticut. 10% plan to leave the state because of the practice environment.
- More than 90% of respondents in Litchfield, New London and Windham counties reported recruiting physicians was very or somewhat difficult.
- 47% of surveyed physicians increased their work hours seeing patients over the course of the last three years.
- 32% of payments to physicians surveyed came from Medicare; 13% of payments came from Medicaid/HUSKY; and 7% of care was delivered for free.
- 40% of respondent physicians said they are providing fewer high-risk procedures and 34% are seeing fewer high-risk patients due to professional liability concerns.
- 90% of emergency room physicians and 72% of pediatricians – specialties that make the most referrals and see high rates of uninsured or underinsured patients – indicated that it has become more difficult to obtain referrals and consultations.
- The longest mean average wait time for new-patient office visits was 24 days, reported in Windham County, which also reported the biggest reduction in provision of high-risk services, the second-largest reduction in care of high-risk patients and the highest percentage of physicians contemplating a career change.
- Physicians were supportive of creating a large insurance pool to cover the uninsured, those on public insurance programs and others; they were equally supportive of backing expanding current safety-net programs.

The Connecticut Workforce Survey 2008 provides valuable, never-before-available information about the reality of practicing medicine in Connecticut. Physicians are working more while patients are waiting weeks for appointments. Physicians are cutting back on seeing some of the patients who need them the most because of the professional liability climate. Practices are having a harder time recruiting colleagues to work here. Increased specialization and sub-specialization mean physicians are less interchangeable than they once were; bare totals of the number of physicians in an area do not paint an accurate picture of patient access to medically necessary care.

The professional liability situation is depressing the availability of physicians and procedures for Connecticut patients. This is where common-sense reform that respects both patients and physicians would be most welcome. To increase physician retention and recruitment, CSMS has advocated student loan forgiveness and forbearance in exchange for practicing in Connecticut's most fragile areas.

SustiNet was developed with input from physicians, health care economists and policy experts, residents statewide, business, labor and policy-makers and consumer advocates. It emphasizes primary care and preventive services through the medical home concept; disease management, care coordination, quality reviews and quality guidelines without lapsing into what is commonly referred to as "cookbook medicine;" certain limits or safe harbors from medical liability; health information technology, specifically electronic medical records and electronic health records; and payment approaches that not only increase the level of payments to physicians and other providers but anticipates further changes in payment approaches and provides the flexibility necessary to account for this evolution in payment methodologies. These are all elements that CSMS believes are essential in a well-thought-out and structurally sound health care reform proposal.

CSMS also commends this proposal for its approach to assisting physicians in the redesign of their offices to allow for more rapid transition to a computerized, interoperable and interconnected system of health information through training and associated consulting services, as well as access to and incentives and discounts for electronic medical record and health record systems, similar to what CSMS presently offers its membership.

In addition, CSMS appreciates how Sustinet could negotiate on behalf of physicians who participate in the Sustinet plan to obtain discounted prices for vaccines and other health care goods and services. This is critical as so many of Connecticut's physicians are solo- and small-practice physicians that there is very little economy of scale in negotiating for goods and services necessary to manage and run a practice and provide quality patient medical care.

Furthermore, CSMS, a recent recipient of a grant from the Connecticut Health Foundation for physician education on health disparities, believes that educational services, programs and materials designed to assist physicians and their offices provide effective access and quality medical care regardless of patient background is essential in any progressive and effective health care delivery system.

CSMS also believes that Sustinet, if implemented effectively, could strengthen insurance markets through providing consumers as well as providers extra choices and increased transparency. Sustinet will establish a repository of claims and patient information that can be used to improve both the transparency of care, through cost information, and the quality of care through education based on the tracking of medical care provided and the associated outcomes.

CSMS also appreciates the phased-in approach of Sustinet, that avoids issues with implementation, such as inadequate networks of physicians, especially medical specialists and subspecialists.

CSMS strongly believes that physicians can, will and must be part of all facets of the body politic, the "SustiNet Authority," including, but not limited to its board, and its associated committees and task forces: physicians are the foundation of the health care delivery system in Connecticut and have been so since before the founding of the Connecticut State Medical Society in 1792. The guidelines and procedures specific to how medical care is delivered within the SustiNet plan, must be based on sound scientific evidence and a rational understanding of medical care, but also must allow for the necessary flexibility associated with the uniqueness that each patient and each episode of care or treatment requires.

CSMS supports and is advocating for the adoption of the SustiNet proposal's guidelines for health care reform in Connecticut in order to move forward not only the debate on true health care reform, but to speed toward a health care system that is based, and will be judged on, its collaborative approach to providing access to quality medical care that takes advantage of health information technology while still remembering that the individual patient matters most.