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**Legislative Testimony
Insurance Committee
SB 393 AAC Standards In Health Care Provider Contracts
Tuesday, March 9, 2010
Carolyn J. Malon, DDS**

Senator Crisco, Representative Fontana and members of the Insurance committee, my name is Carolyn Malon and I have practiced dentistry for eight years in the town of Farmington, and prior to that, for thirteen years in New Britain. I thank you for the opportunity to present this written testimony to you in support of SB 393.

I am in favor of the language in SB 393 which would prohibit insurers from setting fees for procedures which they do not cover. Rather than helping those whom they insure, these companies may create further access issues if dentists refuse to participate in programs with such restrictions.

Insurers argue that in setting such fees, they are providing a service to the insured. If they truly want to dentists to provide the service, they would cover those procedures! For example, Anthem / Blue Cross does not cover the placement of a "post and core", a relatively common dental procedure. When I called the company some years back to inquire as to why this is so, I was told simply that they don't. This seemingly arbitrary decision on the part of this company should not affect my setting a reasonable rate of compensation for the procedure.

In the interest of such fairness, over thirty states across America have proposed legislation to end this practice. Two states have passed laws to this effect. Furthermore, the U.S. Congress has recently passed a bill which would end insurance companies' exemption from antitrust laws, an issue which may come into play in this issue as well.

I urge you to support SB 393, and put an end to insurance companies dictating fees for services which they do not cover.

I would like to thank the Committee for your consideration of this testimony. Please feel free to contact me if you have any questions.

Sincerely,

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