Appropriations Committee
Public Hearing, February 11, 2010

Members of the committee, I am Jerry Hardison, practicing optometrist. I am here in opposition to the proposed elimination of optometric care for adult Medicaid recipients included in HB 5018.

I have practiced in Hartford for 31 years and have been intricately involved with all of the Medicaid changes over the years. We have finally begun to form a system that allows us to properly deliver eye care to the Medicaid population. Unfortunately, that is now in jeopardy. Unfortunately, the proposed cuts in eye care discriminate against a class of providers. Connecticut citizens, who have private insurance, are protected by state law from such discrimination. Why shouldn't Medicaid recipients be afforded that same freedom to choose an eye care provider?

If I look at just my adult Medicaid patient base, the majority of these are dual eligible (Medicare/Medicaid). By virtue of that age category, the majority of these people have medical eye conditions. Blocking optometrists from providing this care would result in one of two possibilities: 1. Necessitate referral to an eye physician for care or 2. Drive patients away from care because of a lack of qualified providers or pure patient frustration. The first would cost the Medicaid system more as physicians are paid a higher fee for the same service. The second would be devastating. Unchecked glaucoma or retinopathy may lead to blindness.

I submit to you, the only savings initially in this process is due to needy patients not receiving care. The administration talks about making hard choices to control costs. The decision to cut vision care is an easy choice. The hard choice would be working to improve and economize a working system. Currently I am a member of the Healthcare Quality and Provider Advisory committee of the SustiNet Health Partnership. We are looking at ways to improve access and quality and that includes recognizing the value of all health care providers, not discriminating against a particular class. Lets make the hard choice and look at how we might control costs and still ensure access to and quality care. Some possibilities might include:

- Real time encounter authorizations to ensure that duplicity of services is minimized.
- Minimal co pays which increase the value of the service. But let the provider have control over waving those co pays in cases of hardship.
- Limit the number of eyeglass replacements and again, ensure that duplicity of services is minimized.
- Reduce the frequency of routine or non-medical examinations.

I urge you to agree that cutting Optometric care out of Medicaid is a solution that in the end will only further disenfranchise our neediest citizens. Thank you for your time.

Jerry S. Hardison, OD
553 Farmington Avenue
Hartford, CT 06105
860-236-5831