



Quality is Our Bottom Line

Insurance & Real Estate Committee

Public Hearing

Thursday, February 3, 2011

Connecticut Association of Health Plans

Testimony in Opposition to

S. B. No. 12 AN ACT PROHIBITING COPAYMENTS FOR PREVENTIVE CARE SERVICES.

The Connecticut Association of Health Plans respectfully urges the Committee's rejection of SB 12 AA Prohibiting Copayments for Preventive Care.

The Patient Protection and Affordable Care Act of 2010 (PPACA) already addresses this issue in significant detail requiring that all non-grandfathered plans (both insured and self-insured) provide federally defined preventive care at no cost to the patient meaning no copay, no deductible and no coinsurance. The federal regulations define preventive care down to the specific coding level for a long list of services that's even further defined by the primary purpose of the office visit. It has taken thousands of man hours for insurers to retool their systems in compliance with the new rules. If Connecticut enacts legislation that is different than that imposed by the federal government, the costs of reconfiguring IT systems alone to make them Connecticut specific is substantial. Furthermore, if Connecticut enacts this mandate it would apply to certain plans that were specifically grandfathered under the federal legislation which runs contrary to the intent of the federal law.

Implementing PPACA is an enormous undertaking and we would respectfully request that health plans be allowed to invest in the promise of health care reform without being encumbered by additional state regulation at this time.

Many thanks for your consideration.