



Office of the
Healthcare
Advocate
STATE OF CONNECTICUT

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**Testimony of Victoria Veltri
State Healthcare Advocate
Before the Insurance and Real Estate Committee
In support of HB 599
January 31, 2013**

Good afternoon, Senator Crisco, Representative Megna, Senator Kelly, Representative Sampson, and members of the Insurance and Real Estate Committee. For the record, I am Vicki Veltri, State Healthcare Advocate with the Office Healthcare Advocate ("OHA"). OHA is an independent state agency with a three-fold mission: assuring consumers have access to medically necessary healthcare; educating consumers about their rights and responsibilities under health plans; and, informing you of problems consumers are facing in accessing care and proposing solutions to those problems.

House Bill 599 addresses a critical gap in continuity of care that consumers experience when faced with an adverse determination. Utilization review is an important element in claim management, but delays in the appeals process may jeopardize consumer's well being by interrupting their treatment. Failure to cover continued services pending the outcome of an appeal can result in serious disruptions in treatment that result in major complications, including serious side effects of withdrawal of medications and the disruption of a prescribed and ongoing course of treatment.

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HB 599 affirms the principle adopted in federal law (for non-grandfathered plans) that continuation of services pending the outcome of appeal is the most appropriate course of action. This is the principle adopted by the federal government in the appeal regulations adopted under the ACA. See 45 CFR 147.136(b)(2)(iii), which states:

(iii) Requirement to provide continued coverage pending the outcome of an appeal. A plan and issuer subject to the requirements of this paragraph (b)(2) are required to provide continued coverage pending the outcome of an appeal. For this purpose, the plan and issuer must comply with the requirements of 29 CFR 2560.503-1(f)(2)(ii), which generally provides that benefits for an ongoing course of treatment cannot be reduced or terminated without providing advance notice and an opportunity for advance review.

Conn.Gen.Stat. § 38a-591e(c)(3) requires that with respect to urgent requests:

(3) If the review under subdivision (1) of this subsection is an expedited review of a grievance involving an adverse determination of a concurrent review urgent care request, the treatment shall be continued without liability to the covered person until the covered person has been notified of the review decision.

Connecticut's statutory limitation to expedited reviews of this important consumer protection may be less comprehensive than federal regulation.

In terms of providing coverage of prescription medication pending approval of coverage by an insurer, the legislature has acknowledged this deficiency and the potentially serious adverse effects of delayed treatment by requiring Medicaid to cover a 14 day supply of a prescribed medication prior authorization while review is pending. I acknowledge that there may be concerns about this being considered an additional mandate, although it is reasonable to presume the requirement that prescriptions be covered while review is pending merely reinforces the principle that consumers receive prescribed necessary medical treatment until a final determination is rendered. We understand that HHS has

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been contacted and a response is pending on this issue, and we support the revision of this bill should HHS inform the state that this requirement would be considered a new mandate.

OHA requests that the committee adopt HB 599. Alternatively, OHA suggests that the committee amend § 38a-591e(c)(3) to clarify that the discontinuance of a currently covered prescription drug be considered a concurrent review urgent care request, triggering the requirement that the prescription be covered without liability to the consumer pending the outcome of an expedited appeal.

Finally, OHA requests that the committee reexamine our state law on grievances and appeals to mirror the federal provision cited above.

Thank you for providing me the opportunity to deliver OHA's testimony today. If you have any questions concerning my testimony, please feel free to contact me at victoria.veltri@ct.gov.

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