



**Testimony on**  
**Senate Bill 1068 An Act Concerning Care Coordination For Chronic Disease**  
**Public Health Committee**  
**March 20, 2013**

Senator Gerratana, Representative Johnson and members of the Public Health Committee, on behalf of the almost 8,500 physicians and physicians in training of the Connecticut State Medical Society (CSMS), American College of Physicians Connecticut Chapter (ACP) and the American College of Surgeons Connecticut Chapter (ACS), thank you for the opportunity to present this testimony to you today on Senate Bill 1068, An Act Concerning Care Coordination for Chronic Disease. Our organization has been extremely active on this issue and have put in place both formal internal structures and external collaborative to address issues of care coordination.

Through its Quality of Care and Health Equity Committees, CSMS continues to reduce the incidence of chronic disease and improve chronic care management, especially as it relates to identifying and addressing health inequity. CSMS has worked with other medical societies, including the Connecticut Chapter of the American College of Surgeons (CT ACS), to improve coordination of initiatives and programs designed to improve quality of care through better health outcomes in our state.

CSMS believes that the development of a statewide plan that takes into consideration existing programs and initiatives at the local, state, and even national levels, as well as identifying new opportunities, is critical in improving care coordination for patients with chronic disease in Connecticut. However, it is equally critical to have practicing physicians actively involved in chronic care treatment participating in the development, evaluation and review of a plan to both reduce the incidence of chronic disease and improve the care coordination and associated outcomes for patients. Furthermore, CSMS believes that the reports referenced in this legislation need to indicate whether specific recommendations will impact or may impact how chronic care medical treatment is provided and whether patient outcomes improved based on the recommended interventions.

Thank you for the opportunity to present this testimony today. We offer our resources to assist this committee in developing the best possible legislation to accomplish our mutual goals of improving access to and the quality of chronic care management and disease prevention.