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Connecticut State Medical Society
Testimony In opposition to
Senate Bill 479 An Act Concerning the Authority and Duties of the Connecticut Health
Insurances Exchange and Establishing Certain Standards for Certain Stop Loss Insurance
Policies
Presented to the Insurance and Real Estate Committee
March 18, 2014

Senator Crisco, Representative Megna and other distinguished members of the Insurance and Real Estate Committee, on behalf of the physicians and physicians in training of the Connecticut State Medical Society (CSMS) American College of Surgeons Connecticut Chapter (CTACS) and the American College of Physicians Connecticut Chapter (CTACP), thank you for the opportunity to provide this testimony to you today in opposition to Senate Bill 479 An Act Concerning the Authority and Duties of the Connecticut Health Insurances Exchange and Establishing Certain Standards for Certain Stop Loss Insurance Policies

CSMS has been involved in the establishment of the All-Payer Claims Database (APCD) since its inception with formal representation on the Advisory Group. We have continually raised concerns regarding the collection, use and distribution of information gathered under the APCD. For that reason, we must raise further concern with language contained in Senate Bill 479 that seemingly put a tremendous amount of authority in the hands of one individual and not the entire board of the APCD in an open and transparent process. Under Senate Bill 479 the chief executive officer of the Exchange and not the Exchange Board itself, would now have the expressed authority to determine who has access to data collected through the APCD and in what form the data would be made available, if at all, for public review, use and evaluation. This amended language does little to instill confidence that patient or physician identified data will not be released to the general public or any entity upon request and goes in the opposite direction of transparency and data protection. CSMS believes that the APCD and then the Exchange Board should be making these decisions as the General Assembly previously established and these decisions should not rest with a sole individual without public comment, review and evaluation of a process of formal decision. There are no checks and balances and no ability for patients, physicians or other providers, employers or insurers to have a voice in a process that is devoid of transparency.

Further, CSMS believes that since the State of Connecticut is requiring insurers to provide this information, that the General Assembly should and must be ultimately responsible for the regulations that outline who is to be able to access critical health information tied to the

physicians and patients through the APCD. Such authority should not be granted solely to the top executive of a quasi governmental body without direct accountability to the General Assembly or the public. There must be safeguards in place for the review, evaluation and determination of what data is shared and who it is shared with in order for there to be public confidence in the process and the use of the data. These safeguards are the role of the Exchange Board and the established process for developing policies and procedures, with public review and accountability. These decisions should not be left in the hands of any one individual.

We are aware that the Healthcare Advocate has been working diligently with the APCD and exchange staff to improve this language and eliminate our concerns. CSMS fully supports those efforts.