Testimony of
The Connecticut ENT Society
The Connecticut Society of Eye Physicians (CSEP),
The Connecticut Dermatology and Dermatologic Surgery Society (CDS)
Connecticut Urology Society
In Support of
H.B. No. 5345 (RAISED) AN ACT CONCERNING COOPERATIVE HEALTH CARE ARRANGEMENTS.

Given by David Emmel, M.D.

Before the Labor Committee

March 11, 2014

Good afternoon Senator Holder-Winfield, Representative Tercyak and other distinguished members of this committee. For the record my name is Dr. David Emmel and I am a board certified ophthalmologist practicing in Wethersfield, CT. I am here to support the testimony of the Connecticut State Medical Society and to represent over 1000 physicians in the medical specialties of Urology, ENT, Ophthalmology and Dermatology in **Strong Support** of H.B. No. 5345 AN ACT CONCERNING COOPERATIVE HEALTH CARE ARRANGEMENTS. This subject matter is not new to this committee. In fact, one of my colleagues Dr. William Ehlers gave testimony on this very same bill on Feb 29th (leap year) in 2000.

Since the year 2000, many physicians, including members of these above mentioned societies, have testified in support of this concept in front of various legislative committees. Our message is clear and remains unchanged since 2000 - "We need to level the playing field between MCO's and health care providers." But more importantly, during this time we have all witnessed a decline in the ability to deliver quality healthcare and an increase in consumer spending on healthcare premiums.

Physicians in this state and across the nation are shocked by the industry's management of premiums. We have watched, year after year, our patients' premiums rise, and co-pays and deductibles increase while reimbursements to physicians and other healthcare providers decrease, and the MCO medical loss ratios decline. Although the Affordable Healthcare Act addresses medical loss ratios to keep valuable dollars going to direct medical costs, we remain skeptical of the accounting and still believe many of these dollars are going into the deep pockets of Managed Care Organizations CEOs, upper and middle management, as well as lobbyist's fees, advertising and stockholder profits.

There is no profession more qualified to go head to head with the industry and advocate for our patients than medical doctors. By passing HB 5345 it will dramatically change this imbalance by creating new mechanisms that would strengthen the ability of physicians to negotiate with MCOs, which is currently not allowed under federal antitrust laws. The new proposals by CSMS would give physicians the ability to bring the managed care industry to the table and debate some of the more egregious consumer benefit cuts and the arbitrary denials of services, procedures and hospital stays which we are

experiencing today. We would also like to highlight that the insurance industry is already afforded a limited exemption from antitrust prosecution under the McCarran Ferguson Act of 1945.

Everyone on this committee knows that there have been significant changes in Health Care since my colleague, Dr. Ehlers testified in 2000. Our office expenses including energy, regulatory compliance, and the costs of providing benefits including health care for our employees have increased dramatically. In addition, much of the nation experienced a professional liability cost crisis in recent years. It is time to allow the physicians in this state the power to be advocates for their patients and ensure that quality care and assess are not lost.

On behalf of the 1000 Eye, ENT, Urology and Dermatology doctors in this state, we ask you to support HB5345 and restore balance to Health Care in Connecticut before it is too late.

Thank you for your consideration.