



Quality is Our Bottom Line

Labor Committee Public Hearing

Thursday, February 26, 2015

Connecticut Association of Health Plans

Testimony in Opposition to

SB 913 AN ACT CONCERNING HEALTH CARE DATA REPORTING

The Connecticut Association of Health Plans respectfully urges the Committee's rejection of SB 913 An Act Concerning Health Care Data Reporting. Sections 1 and 2 of the bill before you significantly broaden the carefully negotiated language of Public Act 10-163 which required the disclosure of certain claims data to municipalities within certain parameters. Coverage contracts are entered into between municipalities and health insurance carriers and as such the current law allows municipal entities to request certain information with respect to their claims experience from their insurance carriers

Sections 1 and 2 of SB 913 require that cities and towns *annually* submit to the State Comptroller *any and all* information regarding their employee and retiree health insurance benefit packages, coverage levels, premium costs and claims experience including drug benefits by department, bargaining unit, and coverage tier including family status. Likewise, the bill requires health insurance carriers to annually submit such information to the municipalities. A companion bill in the Insurance Committee, SB 14, requires the release of a city or town's *full data set to just one bargaining unit* if that one bargaining unit makes a request.

Public Act 10-163 strove to assure the confidentiality of the employees whose data is being provided presently. While we remain concerned that current law risks exposure of private confidential medical information, the bill before you exacerbates that concern ten-fold by mandating that reams of personal information be forwarded to the state Comptroller on an annual basis and then possibly onto various bargaining units. Furthermore, to the extent that any municipalities are self-insured, it's unclear whether the state has jurisdiction to enact such policy given that self-insured plans are governed by federal ERISA law and therefore not subject to state regulation. The Association is also concerned that such a policy could allow the Comptroller's office to solicit into the Partnership (MEHIP) Plan only those municipalities with "good risk" profiles - disregarding those with "poor risk" profiles potentially disrupting the market at-large.

With respect to Section 3 of the bill which provides the Comptroller convener status and the ability to approve what amounts to provider antitrust exemptions, we would respectfully submit that the granting of such authority goes well beyond the purview of what should appropriately be under the Comptroller's office.

For the last year, stakeholders from all the major health care sectors, including state agencies, payers, hospitals, provider groups, advocacy organizations and employers, have been meeting regularly to advance the goals and objectives associated with the \$45 million State Innovation Model (SIM) grant that the state recently received which is designed to improve population health, strengthen primary care, promote value-based payment and insurance design, and obtain multi-payer alignment on quality, health equity, and care experience measures.. The Comptroller's office has been a welcome and active participant in the discussions. As such, SB 913 would be duplicative at best and detrimental at worst if a separate and distinct effort were to undermine the work of SIM.

With regard to the antitrust provisions and cooperative agreement sections of the bill, we would refer the Committee to our testimony on HB 5345. The cooperative concept has been under consideration by the General Assembly for several years running. Over time, the Federal Trade Commission, the Judicial Department and for the past four years the Attorney General have all weighed in strongly in opposition to the proposal as has the Association. We would strongly urge the Committee to read the testimony submitted on HB 5345 when considering SB 913 and reject it accordingly.

Thank you for your consideration.