

March 10th, 2016

Insurance and Real Estate Committee Public Hearing

Room 2D, Legislative Office Building  
Hartford, CT 06106

**Re: Written Testimony in Support of Raised S.B. Bill 374,**

***AN ACT PROHIBITING HEALTH INSURERS FROM RESTRICTING OR REDUCING COVERED BENEFITS FOR INSURED'S DIAGNOSED WITH A TERMINAL CONDITION***

**Submitted electronically to:** [instestimony@cga.ct.gov](mailto:instestimony@cga.ct.gov)

Dear Committee Members:

On behalf of the physicians of the Connecticut Oncology Association, I thank you for the opportunity to present this testimony to you today in support of Senate Bill 374, An Act Prohibiting Health Insurers From Restricting or Reducing Covered Benefits for Insureds Diagnosed With a Terminal Condition

Unfortunately, a significant number of cancer patients fall under the criteria described in this bill: "terminal condition" means an incurable or irreversible disease, illness or medical condition that a physician has diagnosed as expected to result in death in twenty-four months or less.

Raised Senate Bill 374 states that "No health insurance company, health care center, fraternal benefit society, hospital service corporation, medical service corporation or other entity that delivers, issues for delivery, renews, amends or continues a health insurance policy providing coverage of the types specified in subdivisions (1), (2), (3), (4), (10), (11), (12), (13) and (16) of section 38a-469 of the general statutes in this state shall restrict or reduce coverage for an insured, based on an insured's diagnosis of a terminal condition, for any service, treatment, prescription drug or device that is a covered benefit and is (1) consistent with best practices for the care or treatment of a disease, illness or condition, (2) prescribed as medically appropriate by the insured's treating health care provider, or (3) supported by peer-reviewed medical literature generally recognized by the relevant medical community for use in the care or treatment of a disease, illness or condition."

Cancer treatment is complex and delicate. Even patients with terminal disease may have treatment options to ease symptoms and side effects, delay progression, or improve quality of life. Often the most appropriate care option for late stage disease patients may be participation in a clinical trial. No physician wants to over treat patients where there is no benefit or value, but no patient should also be denied treatment options that may alleviate their condition, even in a terminal state. Connecticut patients deserve the peace of mind that the coverage for which they have paid will not be restricted or reduced once they have been diagnosed with a terminal condition. They deserve the continued right to receive "any service, treatment, prescription drug or device that is a covered benefit and is (1) consistent with best practices for the care or treatment of a disease, illness or condition, (2) prescribed

as medically appropriate by the insured's treating health care provider, or (3) supported by peer-reviewed medical literature generally recognized by the relevant medical community for use in the care or treatment of a disease, illness or condition."

The oncology physicians who treat the cancer patient of Connecticut appreciate the wisdom and vision of the Committee in moving Raised Senate Bill 374 forward for approval and legislative action.

Thank you for your consideration. We at the Connecticut Oncology Association support this legislative and are very pleased that it is being considered in the 2016 Legislative Session.

Sincerely,



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