

February 7, 2017

Statement
Of
Anthem Blue Cross and Blue Shield in Connecticut
On

Proposed S.B. No. 19 AN ACT REQUIRING HEALTH INSURANCE COVERAGE OF A PRESCRIBED DRUG FOR A CHRONIC CONDITION DURING CERTAIN ADVERSE DETERMINATION REVIEWS

Proposed S.B. No. 20 AN ACT CONCERNING THE FACTORS TO BE CONSIDERED BY THE INSURANCE DEPARTMENT IN A HEALTH INSURANCE PREMIUM RATE FILING REVIEW.

Proposed S.B. No. 22 AN ACT CONCERNING COST-SHARING FOR PRESCRIPTION DRUGS.

Proposed S.B. No. 23 AN ACT REQUIRING SITE-NEUTRAL PAYMENTS FOR HEALTH CARE SERVICES.

Proposed S.B. No. 24 AN ACT REDUCING THE TIME FRAMES FOR URGENT CARE ADVERSE DETERMINATION REVIEW REQUESTS.

Proposed S.B. No. 25 AN ACT REQUIRING HEALTH INSURANCE COVERAGE OF A PRESCRIBED DRUG DURING THE ENTIRE ADVERSE DETERMINATION REVIEW AND EXTERNAL REVIEW PROCESSES.

Proposed S.B. No. 426 AN ACT PROTECTING PATIENTS FROM INAPPROPRIATE BILLING PRACTICES.

Proposed S.B. No. 543 AN ACT CONCERNING INSURANCE COVERAGE FOR INPATIENT SUBSTANCE ABUSE TREATMENT PROGRAMS.

Proposed S.B. No. 546 AN ACT CONCERNING PARTICIPATING PROVIDER DIRECTORIES PROVIDED BY HEALTH CARRIERS AND PARTICIPATING PROVIDERS ACCEPTING NEW PATIENTS ON AN OUTPATIENT SERVICES BASIS.

Proposed H.B. No. 5140 AN ACT CONCERNING REIMBURSEMENTS TO HEALTH CARE PROVIDERS FOR COVERED SERVICES PROVIDED FOR THE TREATMENT OF A SUBSTANCE USE DISORDER.

Proposed H.B. No. 5270 AN ACT DECREASING THE TIME FRAMES FOR URGENT CARE ADVERSE DETERMINATION REVIEW REQUESTS.

Proposed H.B. No. 5441 AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR LONG-TERM ADDICTION TREATMENT.

Proposed H.B. No. 5962 AN ACT PROHIBITING INSURERS AND OTHER ENTITIES FROM REQUIRING THAT INSURED DIAGNOSED WITH METASTATIC CANCER USE STEP THERAPY FOR ANY PRESCRIBED DRUG PRESCRIBED TO TREAT METASTATIC CANCER.

Proposed H.B. No. 6175 AN ACT CONCERNING A STRATEGIC PLAN TO ENSURE CONTINUED ACCESS TO AFFORDABLE AND COMPREHENSIVE HEALTH CARE COVERAGE.

Proposed H.B. No. 6431 AN ACT CONCERNING UTILIZATION REVIEWS.

Proposed H.B. No. 6433 AN ACT CONCERNING CLINICAL PEER REVIEW PERFORMED FOR PURPOSES OF A UTILIZATION REVIEW.

Proposed H.B. No. 6434 AN ACT REQUIRING HEALTH CARRIERS TO INFORM THE COVERED PERSON WHOSE MATTER IS UNDER EXTERNAL REVIEW THAT THE CARRIER COMPENSATES THE INDEPENDENT REVIEW ORGANIZATION CONDUCTING THE REVIEW.

Senator Larson, Senator Kelly, Representative Scanlon and Representation Sampson, thank you for the opportunity to speak to you today on many of bills before this committee. Anthem has

been part of the Connecticut landscape for more than 76 years and employs more than 1200 people here mostly out of offices in Wallingford.

As you all are aware, in Washington DC, there is intense discussion about healthcare reform and the next phase of the Affordable Care Act with the President issuing an Executive Order on the matter. Every bill that you have before you from various benefit mandates to the change in utilization review time to clinical peer affects current plans and products for almost all segments of the health insurance marketplace. The pending legislation affects individual, small group and large group. Those same segments are also impacted by what is being contemplated on the federal level. The insurance marketplace is very vulnerable right now and stability is critical. The instability specifically becomes apparent in the area of price and how we price through rate submissions in an already uncertain marketplace. Stabilizing this marketplace from is so very critical - not only for the companies but more importantly for the members and purchasers of healthcare. We ask respectfully that you do not pass any legislation impacting health insurance until the federal reforms are known and passed.

Thank you for your time and I welcome any questions that you might have today.