



Quality is Our Bottom Line

Insurance and Real Estate Committee

Public Hearing Agenda

Thursday, February 23, 2017

Connecticut Association of Health Plans

Testimony regarding

H.B. No. 7042 AN ACT CONTROLLING CONSUMER HEALTH CARE COSTS.

S.B. No. 544 (COMM) AN ACT REQUIRING PRIOR LEGISLATIVE APPROVAL OF INCREASES IN ASSESSMENTS AND USER FEES CHARGED BY THE CONNECTICUT HEALTH INSURANCE EXCHANGE.

H.B. No. 7023 (RAISED) AN ACT AUTHORIZING SHORT-TERM CARE GROUP INSURANCE POLICIES, PERMITTING HEALTH CARE CENTERS TO CHARGE COINSURANCE, AMENDING THE INSURERS REHABILITATION AND LIQUIDATION ACT AND REQUIRING THAT INSURERS ISSUE NOTICES TO INSUREDS REGARDING PERSONAL AND COMMERCIAL RISK POLICIES.

S.B. No. 810 (RAISED) AN ACT CONCERNING COST-SHARING FOR MAMMOGRAMS AND BREAST ULTRASOUNDS.

The Connecticut Association of Health Plans is pleased to support the Governor's bill HB 7042 allowing for a financial review of proposed health insurance mandates. In an effort to do "good" mandates often have the opposite effect of increasing costs for consumers. A comprehensive review that allows for an independent assessment of the full financial impact based on all the facts makes a lot of sense particularly in light of the changing landscape of the Affordable Care Act. We applaud the Intent of HB 7042 and ask for your support.

The Association also endorses the concept of SB 544 which is to provide a check and balance on the ability of the Exchange to levy additional assessments. It is important to assure that our limited resources are used in the most efficacious manner possible. We look forward to working with the proponents on aligning the proposal with current processes.

The provisions of HB 7023 that allow health care centers to incorporate coinsurance into their benefit designs is also worth consideration. Flexibility is a key component in designing benefit structures that are responsive to consumer demands for innovative products.

With respect to SB 810, the Association respectfully urges your opposition. Please note that any limitations on cost-sharing simply result in increased premiums. The expenses just shift from one column to the another. Whether something is preventive or not does not change the underlying cost of the service. It must be accounted for in some manner.

Thank you for the opportunity to comment.