

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: SB-464

AN ACT ESTABLISHING A WORKING GROUP TO ENHANCE PHYSICIAN
Title: RECRUITMENT IN THE STATE.

Vote Date: 3/26/2018

Vote Action: Joint Favorable Substitute

PH Date: 3/20/2018

File No.:

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SPONSORS OF BILL:

Public Health Committee

REASONS FOR BILL:

This bill requires the Commissioner of the Department of Public Health to convene a working group to advise him on methods to encourage physician recruitment in the state. The group must examine the following issues: recruiting, retaining, and compensating primary care, psychiatric and behavioral health care providers; the potential effectiveness of loan forgiveness; access to health care providers and the effect, if any, of the health insurance environment on limiting access; barriers to physician participation in health care networks; and; assistance for graduates pursuing medical education training. The working group must report its findings to the commissioner of DPH by January 1, 2020.

RESPONSE FROM ADMINISTRATION/AGENCY:

None submitted.

NATURE AND SOURCES OF SUPPORT:

The Connecticut Hospital Association (CHA): CHA support SB 464 which is an effort to enhance physician recruitment in Connecticut. The creation of a multi-member working group would serve as the initial step for a critical and necessary conversation on ways to attract and retain physicians in Connecticut.

Connecticut State Medical Society (CSMS): CSMS supports this bill which recognizes the difficulties faced in recruiting and retaining physicians in Connecticut. The testimony submitted by CSMS includes statistics listing the positive economic impact provided to our state by physicians. Recognizing that physicians are significant contributors to economic activity, the testimony also presents statistics which indicate the problems faced by Connecticut in recruiting and retaining physicians. The difficulties faced by our state are not the result of any one specific factor, but a number of factors that can be identified through the establishment of a working group as proposed in SB 464. Identifying the contributing factors would provide a path to correcting the situation. CSMS believes there are certain factors that contribute to this situation: the need for incentives to attract young physicians; a highly concentrated insurance marketplace in Connecticut that prevents physicians from fair and equitable negotiations with insurers; the issue of medical liability; the stringent Certificate of Need (CON) laws in our state; and industry specific taxes.

Lisa Freeman, Executive Director, Connecticut Center for Patient Safety: Our organization recognizes that the number of physicians in our state is declining. For this reason, we support SB 464 to explore ways to enhance physician recruitment in Connecticut. We are concerned that there is no consumer/patient representative on the working group. Patients are important stakeholders in health care and to maintain a person-centered environment should be part of this discussion. Therefore, we propose in addition to the members proposed in the legislation that the language be amended to include an independent patient representative from the Connecticut Center for Patient Safety.

NATURE AND SOURCES OF OPPOSITION:

Connecticut Trial Lawyers Association (CTLA): CTLA opposes SB 464 and believes the data does not support the claim of a physician shortage in Connecticut. The Kaiser Family Foundation compiled research that showed as of 2014, Connecticut ranked 8th for adults who had a personal doctor and 90% of residents had a “usual place” for medical care. Our research also shows that physicians in Connecticut are well compensated. One aspect of SB 464 is to examine the issue of the medical liability system in Connecticut. In the past there was a concern regarding the medical liability system in Connecticut and the impact this issue had on recruitment of physicians to our state. A solution to this concern was achieved in 2005. Since that reform effort, the number of medical malpractice payments has dropped each year and was lower than each of the years from 1996 to 2006. Since its high in 2003, medical malpractice claims have dropped by 50%. As a result, malpractice insurance rates have also declined. CTLA believes this bill is a solution in search of a problem and that proposing a study at this time would only risk disturbing a balance that has already been achieved.

Reported by: Kathleen A. Panazza

Date: 4/9/2018