



# Community Health Center Association of Connecticut

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Testimony of

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Supporting

*SB 821: An Act Concerning Equitable Medicaid Reimbursement  
for Federally Qualified Health Center Practitioners*

Human Services Committee

February 19, 2019

Thank you for the opportunity to provide support for Senate Bill 821, An Act Concerning Equitable Medicaid Reimbursement for Federally Qualified Health Center Practitioners.

On behalf of the Community Health Center Association of Connecticut (CHCACT), and its sixteen member federally-qualified health centers, I want to thank the Committee for raising this bill.

### ***About eConsults***

eConsults are a type of telehealth that allows a primary care provider to consult with a specialist about a patient, through a secure exchange of information. They are an innovative way to improve access to specialty services.

For example, an otherwise healthy patient complains to his primary care provider that he has heart palpitations during exercise. Under traditional health care models, the primary care provider might do an EKG in the office and write a referral to a cardiologist. The patient then makes an appointment with the cardiologist (often receiving a second EKG once there), and the cardiologist advises on next steps. Under an eConsult model, the primary care provider can upload patient information and relevant tests through a secure messaging system; a cardiologist will then examine the information and provide advice to the primary care provider within 48 hours, often much sooner. This advice might be that the patient should see a cardiologist; however, in many cases, the specialist visit can be avoided. Instead, the cardiologist advises the primary care provider on treatment, and the primary care provider calls the patient with that advice.

eConsults are valuable because:

- They enhance access to specialty services, particularly for HUSKY patients, who often have to wait several months to get an appointment;
- They help the patient avoid having to take another day off from work/childcare and get transportation to another medical appointment;
- They save money in the system because they avoid more expensive specialty visits;
- They enhance communication between specialists and primary care providers; and,
- Primary care providers report that they enjoy learning from the specialists.

### ***Current Situation***

In order for the eConsult model to be effective, both the primary care provider and the specialist need to be reimbursed for their time, expertise and infrastructure. Many commercial insurance plans cover eConsults. Many other state Medicaid programs cover eConsults. Although the HUSKY program provided reimbursements for eConsults for a brief time, currently, the program does not.

In December, 2018, the state Department of Social Services released a [Policy Transmittal](#), indicating that HUSKY would pay both primary care providers and specialists for eConsults (approximately \$17 and \$34, respectively, for each eConsult).

### **However, providers at federally-qualified health centers are excluded.**

The transmittal states, “Federally Qualified Health Centers (FQHCs) are encouraged to continue performing services related to the preparation of material and/or communications to the specialist as a supplemental service to an established medical or behavioral health visit. There is no supplemental payment for the services performed related to the specialist referral in an FQHC setting.” (CT Medical Assistance Program, Policy Transmittal 2018-24).

It is our understanding that the Policy Transmittal may be withdrawn and re-released with edits, but that health centers would still be excluded from participating.

CHCACT has been working with health centers and the state Department of Social Services on the eConsult issue for over two years, through both the brief time HUSKY covered eConsults and through a grant CHCACT received, that facilitated a time-limited eConsults pilot program. We have provided data to the Department, demonstrating cost savings and enhanced access to specialists for HUSKY enrollees. CHCACT’s data, working with the Department of Social Services, point to a conservative estimate of **\$6 million in savings** for the state, with implementation of eConsults. These savings were achieved primarily through the reduction of unnecessary specialist visits.

### ***About the Bill***

CHCACT supports this bill, which would require **equal treatment** between primary care providers at health centers and in private practice – which ultimately means **equal access** to eConsults for all HUSKY enrollees, regardless of who their primary care provider is.

Health centers would like to provide eConsults to their patients. However, there is cost associated with:

- Having the secure messaging system that eConsults requires; and,
- Having the primary care provider interact with the specialist and then back with the patient.

Excluding health centers from the payment model serves as a significant barrier to providing this service. Instead, many health centers will make the difficult choice to revert to writing a referral for their patients to see a specialist.

Connecticut's health centers serve about 400,000 people each year from across the state, including over 240,000 HUSKY enrollees. It simply doesn't make sense to put these 240,000 patients at a disadvantage to accessing specialty services.

Let's work together to provide equal access to eConsults for all HUSKY enrollees.

Thank you for your consideration and your hard work on behalf of Connecticut residents. Please feel free to reach out with any questions: [dpolun@chcact.org](mailto:dpolun@chcact.org) or 860.667.7820.