



## Public Health Committee

March 6, 2023

### Written Testimony on

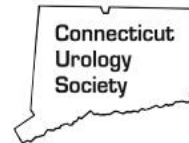
### S.B. No. 1077 (RAISED) AN ACT CONCERNING THE ACCEPTANCE BY PHYSICIANS OF PATIENTS WHO ARE MEDICAID RECIPIENTS

On behalf of over 800 Connecticut physicians in the medical specialties of Ophthalmology, Dermatology, Otolaryngology and Urology, we would like to voice our **strong support of SB 1077: An Act Concerning the Acceptance by Physicians of Patients who are Medicaid Recipients**

As physicians, we are all too familiar with the challenges healthcare providers face in delivering quality care to those in need. Despite our best efforts, too many of our most vulnerable patients struggle to access needed care, due to their lack of resources and the difficulty of navigating the system - often without guidance, transportation, and other basic needs. This is particularly true for those who rely solely on Medicaid for their healthcare. Despite the vital role Medicaid plays in providing access to healthcare, Connecticut struggles to maintain an adequate physician network for these patients. The reason for this deficiency is obvious to providers. This network is built on a system that lacks a decent and sustainable reimbursement fee schedule.

The medical profession has a long history providing care for those who cannot pay for their care, and long before 2007 - when physicians received their last Medicaid fee update - physicians continued providing care although Medicaid rates were often significantly below the cost of **providing** care. They participated despite dismal reimbursement rates and the fact that Medicaid patients often have complex medical histories, heightened expectations, and other difficulties that often cause a higher rate of missed appointments (precious appointment spots which precludes other patients from care and treatment for their maladies). Other reimbursements from insurers sometimes helped to augment these heavily discounted fees.

It is unfortunately true that most physicians feel Medicare rates are the lowest acceptable rates that their practices can possibly tolerate. Due to increased administrative burdens placed on them by insurers and EHR systems, not to mention rising costs of employee benefits and



inflation, and ongoing annual Federal Medicare rate reductions, many physicians are struggling to keep their doors open. Covid precautions that protect the health of patients and staff greatly increase the time and resources required for each patient.

For those of you who are new to this committee or the General Assembly, we will illustrate what this actually means:

- Medicaid fee schedules –which were last increased in 2007 – are approximately *half* of the Medicare rates, which are already heavily discounted.

The bottom line is that there are fewer and fewer physicians who can afford to see these patients.

If we can step outside the box and examine other factors, besides reimbursement, that would help increase physician participation in Medicaid, we should certainly consider giving private practice physicians parity medical liability coverage equal to that afforded to state-employed physicians. State and federally employed physicians who experience a medical liability claim are covered by the State of Connecticut rather than a private carrier. The state defends the physician, and the case is litigated by a judge for liability and damages versus a jury. Why would this make a difference? The medical liability premiums would decrease for these private practice Medicaid providers if this burden was covered by the State of Connecticut, and not by the physician's medical liability carrier. This bill simply asks that private physicians who participate with Medicaid be given the same consideration and benefits in recognition of increased resources required to provide for these vulnerable patients.

We ask you to support this bill, which would be a good start to increasing participation with the Medicaid provider network.

Thank you for your consideration.