



February 11, 2021

Written Testimony on

SB844 AN ACT CONCERNING THE INSURANCE DEPARTMENT'S RECOMMENDATIONS REGARDING VALUE-ADDED PRODUCTS AND SERVICES AND PROHIBITED INSURANCE PRACTICES.

On behalf of the above-mentioned medical societies, representing over 800 physicians and physicians in training, we have significant concerns about SB844 AN ACT CONCERNING THE INSURANCE DEPARTMENT'S RECOMMENDATIONS REGARDING VALUE-ADDED PRODUCTS AND SERVICES AND PROHIBITED INSURANCE PRACTICES. For decades physicians have been deeply concerned with the trends in medicine that favor cost over quality of care and outcomes. The bill before you today attempts to lump healthcare into the same category as other commercial industries that market themselves as providing “more or better services than their competitors”. For some industries this is appropriate and serves the public well. An example would be offering a year of free tech support on a new computer. This is an easily identifiable **value-added** feature that would benefit consumers . But healthcare is different and not merely a commodity.

Physicians have grave concerns about allowing the unregulated marketing of “value added benefits in health” and the significant unintended consequences, including the risk to the vulnerable patient population of isolation and alienation in the already confusing healthcare arena. This could accelerate the loss and retirement of independent medical practices, while strengthening the insurers’ power to usurp the decision-making process. Healthcare value, to most of us, is fairly straightforward, and was well-defined by the World Health Organization as health outcomes exceeding the cost of achieving those outcomes.

The medical community agrees that health outcomes should include all domains of health including physical, mental and social aspects which together comprise physiological homeostasis. Such homeostasis is especially difficult through changing conditions, such as the COVID -19 pandemic, which has accentuated a growing dissatisfaction by many patients who feel lost or even abandoned in larger health care institutions. The healthcare delivery system is in dire straits and this current bill would further stress and strain the providers who are doing their best to serve their patients in the most effective and efficient manner possible

Physicians are facing the biggest clinical challenge of their careers and feel the fatigue and anxiety of their patients as well as themselves. Now is not the time to make seminal, permanent policy changes as outlined in SB 844. Let us get through these difficult times and allow the medical community to work with the hospitals who are also caught up in the wave of

patient dissatisfaction as well as the insurance companies. Healthcare improvement should be driven by outcome measurements and the core values listed below. We must remember that patient care and satisfaction should not be by cost-driven corporate goals.

The implementation of true value-based healthcare, should not embrace policies focused on promoting cost savings and marketing over true evidence-based health treatment options and outcomes. We cannot permit industries to steer patients into “Value-based centers of excellence” by enticing them with short-term patient “kickbacks” (money paid directly to patients). Although the “kick-backs” seem enticing at the outset, the patient may be cast into a corporate health environment which fosters abandonment of their long-time practitioner for a participating provider whose motivations may not place optimum care as the highest priority. As corporate endorsed providers are supported over “non-participating” providers, these “non-par” providers may be forced into retirement or sale of their practice to a large hospital system or a venture capitalist system.

We firmly believe that large corporate entities involved in health care become more powerful, sometimes at the expense of the values and advantages that independent practitioners who truly place patient health and well-being over profits and costs.

Such practitioners’ foundational principles and core values include:

- **Patients always come first.**
- **Respect and dignity.**
- **Commitment to individual quality of care.**
- **Compassion.**
- **Improving lives regardless of the patients’ conditions - You may not always be able to cure, but you can always comfort.**
- **Everyone counts.**
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Connecticut physicians support and welcome strengthening primary care, building integrated physician-led health systems, and implementing appropriate health payment plans that promote value and reduce hazards. However, profitability cannot override evidence-based studies of medical treatments and outcomes, nor the experience and dedication of our CT physicians.

Physicians are uniquely qualified to synthesize the most appropriate and best interventions to promote patient health, and should not be influenced or coerced into treatments based on profitability over optimal care

Patients rely on physicians to make the best recommendations to cure their ailments, and to provide and administer treatments which will optimize their good health. These decisions of “value” should be made by, or at a minimum, include doctors who understand the treatment options, and the pros and cons of any such treatment, much better than the insurers.

We sincerely hope that you will consider taking a much needed pause before we allow industries including insurance companies, corporations, and venture capitalists to determine and define what is “value added”. Patients are misled into signing arrangements that are marketed and disguised as “high value”, while the true underlying purpose is often corporate cost-savings and profit generation.

Thank you for considering a vote against SB844 for further discussions and to provide the residents/patients of Connecticut the best options about their health and well-being.