



P.O. Box 854, Litchfield, CT 06759 Tel- 860-567-3787 Fax 860-567-3591

Please Support SB 28: AN ACT CONCERNING REIMBURSEMENTS UNDER CERTAIN HIGH DEDUCTIBLE HEALTH PLANS

To require that health carriers that issue certain high deductible plans directly reimburse participating providers for the cost of covered benefits.

✓ **SB 28 Places Responsibility Back on Insurance Companies**

- This is a crisis of monumental proportions confronting the medical community.
- Physicians have been thrust into the role of bill collectors.
- Insurers have unilaterally decided to burden in the form of escalating deductibles and have punted the responsibility of collecting this money from patients squarely onto the shoulders of the providers.

✓ **SB 28 Improves Physician/Patient Relationship**

- Physicians are unnecessarily spending more and more precious time trying to remain financially solvent which negatively impacts upon the time we have to treat and improve our patients' illnesses and health.
- Physicians are trained to diagnose and treat diseases, and to optimize our patients' health and wellness. With the innumerable other tasks and time-consuming burdens which have been cast upon us (such as MIPS and quality compliance, opioid prescription rules with double authentication and PMP verification, federal mandates, etc.), they cannot also serve as bill collectors.

✓ **SB 28 Allows Physicians to Concentrate on Medicine Not Bill Collections**

- Insurers must carry the load of collecting the high deductibles from patients. They created these rules, they collect real dollar premiums up front from their patients, and they have the business expertise and acumen to collect these monies. We as physicians do not.

The future of medical care will be impacted by these decisions today, and for the sake of the patients and providers of the State of Connecticut, we implore you to strongly consider making the necessary changes to stabilize a system which is toppling.

(Turn page to other side)

What Are High Deductibles?

- 90% of plans offered by all state insurance exchanges are HDHPs
- Deductibles have risen 600% faster than wages from 2010-2015
- \$5,277 average out-of-pocket payments (up 78% from 2006) in employer market
- Emergency departments have a 41% collection rate on patient responsibility. Down from 47% in 2013.

Deductibles - what patients pay for their healthcare before insurance kicks in – have increased far faster than wages, even as paycheck deductions for premiums have soared.³

High Deductibles

Plans with deductibles larger than \$1,300 for single coverage and \$2,600 for families are known as high-deductible health plans (HDHPs).

- These plans allow employers and workers to pay lower monthly premiums in exchange for agreeing to satisfy larger annual out-of-pocket costs before a health plan starts paying for medical care and prescription drugs.
- One in four covered employees now have a single-person deductible of \$2,000 or more, *Kaiser Health News* and *CT Mirror* reported.⁴
- Employers and consultants once claimed patients would become smarter medical consumers if they bore greater expense at the point of care. Those arguments aren't heard much anymore.⁵
- What has occurred is a more adversarial relationship between doctors and patients.
- The burden of collecting these deductibles has sometimes resulted in delayed treatment and transferred a stressful economic burden to providers.
- It should be noted that the provider has a relationship for reimbursement with the insurer not the patient, yet insurers use providers to collect their patient/insured deductibles.

Please Support SB-28

it places the responsibility for the deductibles
back to where it belongs.

^{3,4, 5} <https://ctmirror.org/2018/10/07/high-deductible-health-plans-falling-grace-employer-based-coverage/>

