CSMS President’s Message

As the curtain falls on yet another legislative session in Connecticut, it is imperative to reflect upon the critical role advocacy plays in shaping healthcare policies that directly impact Connecticut physicians and our patients. As President of the Connecticut State Medical Society (CSMS), I have witnessed firsthand the importance of advocacy in promoting the wellbeing of patients and the challenges encountered in achieving desired outcomes.

Physicians are more than just healthcare providers; they are champions and advocates for their patients. We see the profound impact legislation can have on patient care and understand that the policies governing healthcare can have far-reaching consequences. Advocacy allows us to lend our expertise and experiences to shape these policies, ensuring that the realities of the current healthcare delivery system are reflected in legislation.

Achieving favorable legislative outcomes can be a difficult task. The political landscape is rife with competing priorities, differing ideologies, and a range of interest groups vying for attention. The healthcare system is multifaceted, and legislative changes require a nuanced approach that balances the varied needs of patients, physicians, payers, and policymakers.
This legislative session, we achieved a significant milestone by making strides in addressing the issues of prior authorization and step therapy. For the first time, legislative action was taken to tackle these burdensome practices that hinder timely access to necessary treatments and medications. This is a first step in our efforts for prior authorization reform, and it is important to recognize that legislative outcomes are an ongoing process that often spans years. Incremental progress should be celebrated, as it sets the foundation for future advancements.

We found ourselves frequently raising awareness and educating legislators about potential policies and concepts that would be detrimental to effective healthcare delivery as well as patient and physician wellbeing. Critically important in legislative advocacy is the prevention of implementation of policy that would further detract from quality healthcare delivery and drive physicians to increased levels of professional dissatisfaction. The best offense for advocacy at times is often a good defense. As physicians, we had to mobilize swiftly to protect our patients and the integrity of healthcare practices from potential threats posed by proposed legislation. By being proactive in identifying and countering harmful measures, we effectively safeguarded the wellbeing of our patients.

Defensive advocacy allowed us to stand firm, educate decision makers about the potential repercussions of certain policies, and rally support within the medical community. We successfully defeated legislation that sought to impose caps on out-of-network payments to physicians providing inpatient and outpatient hospital services. The proposed cap, limiting payments to 150% of the Medicare fee schedule, would have had detrimental consequences for physicians and patients alike. Such a measure would have disproportionately favored health insurers, stripping physicians of any remaining negotiating leverage. It would have created a disincentive for insurers to offer fair and reasonable in-network contracts to physicians above this arbitrary cap. The defeat of this legislation is a crucial win for physicians and patients. Connecticut already faces challenges in retaining and recruiting physicians to practice in our state. Imposing such restrictive payment caps on out-of-network services would have only further driven physicians out of the state, compounding the shortage of physicians and leaving patients with limited access to essential care.

Legislative processes can be challenging, and we may not achieve all our desired outcomes each session. In this session, one of our primary goals was to advocate for increased Medicaid payment rates for specialty physicians. While the final result may not have met our initial expectations, we did secure a modest increase in rates for FY’25. Furthermore, a significant commitment was made to allocate $3 million in resources to conduct a comprehensive study on Connecticut’s Medicaid rates in comparison to those of neighboring states. This study will provide valuable insights and serve as the foundation for future advocacy efforts. As we look ahead to the legislative session in February 2024, enhancing Medicaid payment rates for specialty physicians will remain a top priority on our agenda.

As CSMS President, I had the privilege of working with an impactful team both at CSMS as well as at Sullivan LeShane. This team helped educate me about effective strategies within the legislative process and allowed me to see how much work is needed on a daily basis, both during sessions and in the months between. There were of course moments of frustration and challenges that tested our collective resolve. However, emerging from this experience, I am filled with a sense of pride in our physician community and the profound impact that advocacy can have on the practice landscape for physicians and, most importantly, our patients. Through this legislative journey, I witnessed the determination of my fellow physicians as we joined forces to advocate for policies that prioritize patient care and address the needs of our profession. Despite the obstacles we encountered, our collective voice resonated, and we made significant strides toward positive change. It is through advocacy that we can shape the trajectory of healthcare, ensuring that our patients receive the quality care they deserve and ensuring that physicians will have a better professional and personal quality of life.

David Hass, MD
President, CSMS

Thank you to all of our physician advocates!

CSMS physicians were involved in every aspect of advocating for our physicians and their patients, including meeting with legislators and stakeholders, writing, reviewing, and/or delivering testimony, penning op-eds, and participating in media interviews. Your contributions to CSMS’ advocacy efforts cannot be overstated. Thank you!
2023 Legislative Highlights

PRIOR AUTHORIZATION (included in Public Act 23-204)

For the first time in Connecticut, we were able to pass prior authorization reform! Highlights of this reform include:

- Decision time for non-urgent prior authorizations reduced from 15 to 7 days (in most cases)
- Decision time for urgent prior authorization requests reduced from 48 hours to 24 hours.
- Removal of the “weekend exemption” which gave insurers additional time to review prior authorizations if the window of review fell over a weekend
- Insurers must acknowledge receipt of a prior authorization within 24 hours or less
- “One and Done” prior authorization requests for drugs for autoimmune disorders, multiple sclerosis & cancer

STEP THERAPY (included in Public Act 23-204)

- Reduces time an insurer may require step therapy from 60 to 30 days
- Implements a 3-year trial on removal of step therapy for medications used to treat schizophrenia, major depressive disorder, and bipolar disorder

CAPS ON OUT-OF-NETWORK PAYMENTS

- Defeated portions Senate Bill 983 that would have capped out of network charges for inpatient and outpatient hospital services at 150% of Medicare
- This bill would have shifted all negotiating powers to the health insurers, reducing access to care for Connecticut’s patients and driving more physicians out of Connecticut, exacerbating Connecticut’s continued challenge to recruit and retain physicians in our state

STATE CAUSE OF ACTION UNDER HIPAA

- Successfully defeated House Bill 6739 that would have created a statutory cause of action for the unauthorized disclosure of PHI in violation of HIPAA
- This was a bill championed by the trial lawyers that would have undoubtedly increased legal actions in Connecticut and raised malpractice and other insurance rates for physicians

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WIN!

DEFEATED!

300+ total number of bills tracked during the 2023 Legislative Session

20+ written testimony submitted by CSMS physicians

15+ media opportunities (TV, print, radio)
Why is membership in CSMS so important?

CSMS is YOUR representative with decision-makers at each level of government, continuously staying engaged and advocating for YOUR best interests. Since 1792, the CSMS has worked on behalf of physicians and patients in Connecticut. Through CSMS, physicians stand together regardless of specialty to ensure patients have access to quality care and to make our state the best place to practice medicine and receive care. CSMS is part of a federation of county and state medical societies and the American Medical Association.

Physician Retention and Recruitment

Retention and recruitment of physicians in Connecticut has been at the forefront of CSMS’ legislative agenda for many years. This past legislative session, CSMS President, David Hass, MD, co-chaired a physician recruitment and retention working group initiated by the Department of Public Health (DPH). The workgroup has been tasked with making tangible, concrete recommendations to the DPH, and in turn the legislature, as to how Connecticut can better retain the physicians that we train in our state as well as recruit new physicians. The workgroup has been diligently working for many months and will be making their recommendations to the DPH in the coming weeks. Special thanks to CSMS Vice-President, Khuram Ghumman, MD and CSMS Board Member, Mariam Hakim-Zargar, MD, who sit on the workgroup. We look forward to working with the legislature next session on implementing the recommendations of this critically important workgroup.

MEDICAID REIMBURSEMENT RATES

- CSMS has been advocating for increases in Medicaid physician payment rates
- The initial legislative budget proposal had in excess of $30 million in funding for Medicaid rate increases, but the final budget reduced that to $7 million in FY’25
- Final budget also allocates $3 million to a study of how CT Medicaid rates are set and compared to neighboring states. CSMS successfully advocated for legislative mandate that the study must have results to legislature by February 1, 2024. (Public Act 23-186)
- Governor Lamont and the Office of Policy Management indicated at a post-session press conference that Medicaid rates are too low and said they “have a plan” to address next year
- Medicaid rate increases will be at the top of CSMS’ legislative agenda for 2024

SCOPE OF PRACTICE

- CSMS worked with a coalition of infectious disease physicians on very strict parameters and guidelines which will allow pharmacists, in the future, to prescribe limited duration HIV prophylaxis medications when certain conditions are met (Senate Bill 1102, Public Act 23-19)
- CSMS is carefully watching what appears to be a movement to significantly advance the scope of practice for pharmacists to a clinical care role.

2023 Legislative Highlights (cont.)