

## Insurance and Real Estate Committee JOINT FAVORABLE REPORT

**Bill No.:** HB-6626

AN ACT CONCERNING REQUIRED HEALTH INSURANCE AND MEDICAID

**Title:** COVERAGE, AMBULANCE SERVICES AND COST TRANSPARENCY.

**Vote Date:** 3/22/2021

**Vote Action:** Joint Favorable Substitute

**PH Date:** 3/18/2021

**File No.:** 351

***Disclaimer:** The following JOINT FAVORABLE Report is prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose.*

### **SPONSORS OF BILL:**

Insurance and Real Estate Committee

### **REASONS FOR BILL:**

The purpose of the bill is to mandate insurance coverage for certain necessary medical procedures and treatments and ensure transparency when estimating costs to consumers. The mandates introduced by the bill include coverage of: motorized wheelchairs, cochlear implants, medically necessary coronary calcium scan tests, genetic cystic fibrosis screenings for women, the treatment of neurological conditions and diseases, equine therapy for veterans, gambling disorder treatment, audiologic, ophthalmologic and optometric care, and specialized formulas for individuals twelve years of age or older. The bill also requires Medicaid coverage for audiologic, ophthalmologic and optometric care. The bill modifies required health insurance coverage for ambulance services to include medically necessary transportation to a covered person's place of residence and require that such benefits be provided at an in-network level, provide for electronic notification of assignments of bills for ambulance services, and require an ambulance provider to notify, and obtain consent from, a person before providing transportation services to the person if the provider reasonably believes that such services are not emergency services. The bill also requires the Insurance Commissioner to, within available appropriations, establish a program to advance breast health and breast cancer awareness, and promote greater understanding of the importance of early breast cancer detection, in this state. The bill also expands required health insurance coverage under certain individual and group health insurance policies to include coverage for colorectal cancer diagnoses and related benefits, breast health and breast cancer benefits regardless of sex, diagnostic and screening (mammograms, comprehensive breast ultrasounds, and magnetic resonance imaging of an entire breast or breasts), breast biopsies, prophylactic mastectomies for certain insureds, and breast reconstructive surgery for certain insureds. The bill also requires a health care provider who provides a mammogram to a patient to provide to the patient advance notice disclosing information

regarding certain tests or examinations proposed to further investigate the results of the mammogram, and an opportunity to determine whether the cost of such proposed tests or examinations are covered under the terms of the patient's health coverage, and authorize the Commissioner of Public Health, in consultation with the Insurance Commissioner, to adopt regulations.

#### **SUBSTITUTE LANGUAGE:**

Language was changed to remove subdivision 10 from the list of subdivisions which describe the group health insurance policy types affected by the bill.

#### **RESPONSE FROM ADMINISTRATION/AGENCY:**

**Department of Social Services:** The Department of Social Services testified that Section 17 of the bill is unnecessary because DSS already covers audiologic, ophthalmologic, and optometric services under Medicaid.

#### **NATURE AND SOURCES OF SUPPORT:**

**Alexander Graham Bell Association for the Deaf and Hard of Hearing, Connecticut Chapter:** AG Bell testified that cochlear implants are necessary to allow deaf and hard of hearing children to develop and flourish alongside their hearing peers. They state that cochlear implants should not be denied due to inequitable health coverage.

**Gregory B. Allard, President, Association of CT Ambulance Providers:** Mr. Allard testified that he is in support of Sections 22 and 23, but suggests a language change to clarify the term "in-network cost sharing." He also requested that Section 27 be removed because it places an additional burden on EMS providers to label transports as emergency or non-emergency and calculate approximate costs.

**Myles Kessler, Director of Audiology and Implant Services, Ear Nose and Throat:** Mr. Kessler testified that the correlation between untreated hearing loss and cognitive decline is well documented. He states that cochlear implants are necessary and should be covered by all insurance providers.

**Mark Bianchi, Member, American Cochlear Implant Alliance:** Mr. Bianchi testified that the correlation between untreated hearing loss and cognitive decline is well documented. He states that cochlear implants are necessary and should be covered by all insurance providers.

**Andrew and Karen Brecher, Connecticut Residents:** Mr. and Mrs. Brecher testified that young women are often unable to afford necessary treatments for breast cancer and that HB 6626 will help to alleviate this problem.

**Francesca Bruno, Connecticut Resident:** Ms. Bruno testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**Frank Bruno, Connecticut Resident:** Mr. Bruno testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**Audrey B. Carlson, Connecticut Resident:** Ms. Carlson testified in support of HB 6626 for cost-effective savings and essential testing for early detection of breast cancer.

**Sandy Cassanelli, Connecticut Resident:** Ms. Cassanelli testified that she was diagnosed with Stage III breast cancer two years after her first mammogram because the radiologist, who informed her she had dense breast tissue, failed to suggest she get an ultrasound.

**Connecticut Children's Medical Center:** CCMC testified in support of the provisions extending insurance coverage for motorized wheelchairs and unilateral cochlear implant surgery. They oppose the inclusion of used motorized wheelchairs in the bill because there is liability associated with the use of used wheelchairs. They also testified that studies demonstrate the benefit of cochlear implants for patients with single-sided deafness.

**Connecticut Hands and Voices:** CHV testified that insurance coverage for cochlear implants is critical for children and adults, and HB 6626 will provide necessary coverage.

**Julia Davis, Clinical Audiologist, Yale Hearing and Balance Center:** Dr. Davis testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**Marc Eisen, Connecticut Doctor:** Dr. Eisen testified that insurance coverage should be extended for cochlear implants. He also suggested that the coverage include necessary aftercare.

**Julie Gershon, Breast Radiologist:** Ms. Gershon testified that breast cancer screening saves lives. By increasing testing for women, breast cancer can be detected early which makes treatment easier and breast cancer more curable.

**Alice Gold, Connecticut Resident:** Ms. Gold testified in support of Section 24 and the expansion of diagnostic and screening procedures in Sections 25 and 26.

**Diana Goode, Executive Director, CT Council on Problem Gambling:** Ms. Goode testified that Section 13 of the bill requires that insurance providers cover treatment for gambling disorder, solving a large problem with treatment of people with gambling disorders.

**Megan Harriman, Connecticut Resident:** Ms. Harriman testified that her daughter, who needs a cochlear implant, does not meet the criteria required for their insurance policy to cover the implant. She stated that families should be able to choose what action is right for them, not the insurance companies.

**Douglas M. Hildrew, Medical Director, Yale Hearing and Balance Program:** Dr. Hildrew testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**Thomas Hinchey, VP of Governmental Affairs, Connecticut Academy of Audiology:** Dr. Hinchey testified that hearing loss is a serious issue which can be fixed with cochlear implants. By expanding insurance coverage for cochlear implants, Connecticut residents can be protected from various other issues which are caused by untreated hearing loss.

**Jennifer Franson-Hopper, Clinical Audiologist, Yale Hearing and Balance Program:** Dr. Franson-Hopper testified that studies demonstrate the benefit of cochlear implants and that insurance mandates are needed to ensure these necessary procedures are covered.

**Kristin Hutchinson Spytek, President, National CMV Foundation:** Ms. Hutchinson Spytek testified that children should not be denied a medically approved surgery which could improve their quality of life.

**Jason P. Prevelige, Chair, Legislative Affairs Committee, Connecticut Academy of Physician Assistants:** Mr. Prevelige testified in support of HB 6626, but requested the inclusion of Physician Assistants in Sections 25 and 26 to avoid confusion about PA's ability to perform certain procedures.

**Nina Kashanian, Doctor of Audiology, ProHealth Physicians:** Dr. Kashanian testified that patients often cannot afford procedures which would improve their quality of life and HB 6626 will help to reduce financial burdens on these families.

**Jan Kritzman, Connecticut Resident:** Ms. Kritzman testified that Connecticut is number 2 nationally in breast cancer and the testing enabled by HB 6626 will improve early detection of breast cancer and save lives.

**Yan Ho Lee, Connecticut Doctor:** Dr. Lee testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**Joan Lunden, Connecticut Resident:** Ms. Lunden testified that HB 6626 will remove the financial pressures associated with diagnostic breast cancer testing and allow for early detection, saving lives.

**Cara Mallett, Connecticut Resident:** Ms. Mallett testified that women need to stay vigilant about breast cancer screening and HB 6626 will ensure that women do not go without the tests they need because of prohibitive costs.

**Cristina Marino, Connecticut Resident:** Ms. Marino testified that studies demonstrate the benefit of cochlear implants and that insurance mandates are needed to ensure these necessary procedures are covered.

**Senator Patricia Billie Miller:** Senator Miller testified that one of the most significant barriers for women receiving mammograms is a lack of insurance coverage.

**Polly Moran, Connecticut Resident:** Ms. Moran testified that lack of insurance coverage for diagnostic tests prevents many women from undergoing the tests they need for early detection of breast cancer, and this contributes to the racial disparity in healthcare.

**Erika L. Nair, Pediatric/Educational Audiologist, Soundbridge:** Dr. Nair testified that cochlear implant surgery should not be considered elective because untreated hearing loss delays critical development in children.

**Megan A. Narron, Lead Audiologist, Yale Adult Cochlear Implant Program:** Dr. Narron testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**New England Center for Hearing Rehabilitation:** NECHR testified that once cochlear implants are deemed necessary for a patient, implementation must take place as soon as possible, but insurance delays these procedures unnecessarily.

**NYU Otolaryngology Associates:** NYU testified that patients with single-sided deafness need cochlear implants to improve many aspects of life and that HB 6626 will expand insurance coverage so patients can get the procedures they need.

**Kim O'Rourke, Connecticut Resident:** Ms. O'Rourke testified that studies demonstrate the benefit of cochlear implants and that insurance mandates are needed to ensure these necessary procedures are covered.

**Dale Osborn, Connecticut Resident:** Mr. Osborn testified that his daughter-in-law was charged with high deductibles after her breast cancer diagnosis. He and his husband were able to pay for her, but that is not the case with everyone.

**Senator Cathy Osten:** Senator Osten testified that motorized wheelchairs should be covered by insurance policies because without them, people who need them would basically be confined to their homes. She also testified that people diagnosed with PKU need to follow a specific diet which gets expensive, so insurance companies should provide coverage for necessary medical foods.

**Kelly Pietraroia, Connecticut Resident:** Ms. Pietraroia testified that her son needed cochlear implants and they have significantly improved his quality of life. She stated that families should not have to fight for this technology which improves their children's lives.

**Olivia Piper, Fourth-Year Audiology Extern, Yale Hearing and Balance Center:** Ms. Piper testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**Rachel Posner, Connecticut Resident:** Ms. Posner testified that while she was eligible for a cochlear implant, her children are not. The lack of coverage for cochlear implants further complicates the challenges associated with having children with special needs.

**Nancy Ryan, Connecticut Resident:** Ms. Ryan testified that cochlear implants drastically improved her hearing abilities. She stated that cochlear implants provide essential restorative treatment and should be covered by insurance.

**Nofrat Schwartz, Connecticut Doctor:** Dr. Schwartz testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

**Donna L. Sorkin, Executive Director, American Cochlear Implant Alliance:** Ms. Sorkin testified that studies demonstrate the benefit of cochlear implants and that insurance mandates are needed to ensure these necessary procedures are covered.

**Representative Gary Turco:** Representative Turco testified that many women put off diagnostic testing for breast cancer because of high out-of-pocket costs. Previous legislation has attempted to remedy this, but insurance companies have used the loophole that only screening, not diagnostic, procedures were covered. HB 6626 will remove this loophole and allow more women to get the diagnostic tests needed for early detection of breast cancer.

**Jennifer Violette, Connecticut Resident:** Ms. Violette testified that her son has single-sided deafness and she had to battle with the insurance company to get him the cochlear implant he needed.

**Joan Walker, Connecticut Resident:** Ms. Walker testified that cochlear implants are a critical advancement in medicine and should be covered by insurance.

**Michael S. Weinstock, Connecticut Doctor:** Dr. Weinstock testified that cochlear implants are necessary and HB 6626 will help people afford the necessary procedure.

#### **NATURE AND SOURCES OF OPPOSITION:**

**Bruce Baxter, Interim President, CT EMS Chiefs Association:** Mr. Baxter testified that while he supports the idea of the bill, HB 6626 as proposed fails to take into account the unique operating environment of CT ambulance services. He suggested alternative solutions to solve the problem of surprise ambulance billing without placing undue strain on EMS providers.

**W. Wyatt Bosworth, Assistant Counsel, CT Business and Industry Association:** Mr. Bosworth testified that insurance mandates increase costs to Connecticut residents and outweigh the benefit of the mandate. He suggests the legislature recontinue the Health Benefit Review Program, which conducted cost-benefit analyses of any mandates at the request of the legislature.

**Connecticut Association of Health Plans:** CAHP testified that while they understand the intention of the bill, additional insurance mandates will increase costs for consumers. They states that the mandates proposed in HB 6626 go above and beyond those in the Affordable Care Act.

**Christopher Roberts, Senior Associate, State Government Relations, AFLAC:** Mr. Roberts testified that there is a technical error in the proposed bill which cites subsections 6 and 10 as relating to a particular section that they are not, in fact, related to. This error is fixed in the substitute language.

**Reported by: Mallory Ferrick**

**Date: April 8, 202**