

◆ ◆ ◆ 2024 LEGISLATIVE REPORT ◆ ◆ ◆



“We continue to educate lawmakers that we don’t need regulatory hurdles to protect the practice of medicine; we need to fix administrative burdens, shift the balance of power away from the health insurance industry, and deal with the high cost of running a medical practice, including the sub-standard Medicaid payment rates.”

## ◆ ◆ ◆ PASSED! ◆ ◆ ◆

- ◆ **Telehealth:** Secured permanent extension of telehealth payment parity (PA 24-110)
- ◆ **Prior Authorization:** (PA 24-19)
  - Peer to Peer review must be of the same specialty as the requesting physician (current law allows for a similar specialty) (effective 1/1/2026)
  - Clinical peer is authorized to overturn adverse determinations
- ◆ **Residency Spots:** Expanded the charge of the physician recruitment work group to explore issues related to primary care residency positions in the state and methods to retain those residents (PA 24-19)

## ◆ ◆ ◆ DEFEATED! ◆ ◆ ◆

- ◆ **Telehealth:** Legislation that would have expanded the presence of commercial telehealth companies
- ◆ **Telehealth:** Legislation that would have allowed health insurers to use commercial telehealth companies to meet state network adequacy requirements
- ◆ **Scope of Practice:** Attempt by the naturopathic physicians to prescribe medicines
- ◆ **Worker's Compensation:** Effort by the trial attorneys to fine physicians up to \$500 for missing certain deadlines as well as have to appear in-person before an Administrative Law Judge to explain why a deadline was missed
- ◆ **Medical Records:** Legislation championed by the trial attorneys that would potentially decrease payments for copies of medical records provided to third parties as well as require that such records be provided free if unable to meet an expedited timeline when requested by the third party
- ◆ **Certificate of Need:** Numerous legislative attempts to regulate the practice of medicine including physician practice reporting, CONs for most physician practice mergers, CONs for relocation of office space that crossed municipal lines
- ◆ **Device Representatives:** Legislation that would have prohibited device representatives to be in the operating room

## An Important Note About **Telehealth**

**This session, despite opposition from the health insurers, we were able to secure permanent pay parity for telehealth services.** However, the battle over telehealth is far from over. We were able to thwart a strong attempt by the health insurers to allow commercial telehealth networks (e.g. a health insurer contracts with Teledoc) to fulfill network adequacy requirements. **The magnitude of this victory cannot be overstated.** Had this legislation passed, it would have posed a dire threat to in-network, in-state physicians. Health insurers would have gained considerable financial leverage to prioritize commercial telehealth providers, displacing Connecticut physicians in favor of allied health professionals and less expensive telehealth physicians. **It is a near certainty that the health insurers will continue to push this legislative initiative and it underscores the ongoing need for unwavering advocacy from physicians.**

## In the words of legendary football coach Paul “Bear” Bryant, “Offense sells tickets, defense wins games.”

Similar to a football game, this brief, 90-day legislative session unfolded at a rapid pace with intense encounters and occasional rough and tumble moments. We entered the session with a robust offensive strategy, championing initiatives such as **Medicaid payment rate increases for physicians**, and building upon last year’s efforts to **reduce administrative burdens including further reforms to prior authorization and step therapy**.



**Our game plan had to quickly change when two significant events unfolded. Firstly, the unforeseen, complete collapse of the Insurance and Real Estate Committee!** The committee was paralyzed by internal discord, resulting in the unprecedented failure to advance a single bill out of the Committee. Collaborating closely with the leadership of the Public Health Committee, including physician and committee chair, Saud Anwar, we were able to introduce some of our insurance-related initiatives through that committee.

**Secondly, the decision not to reopen last year's budget left no fiscal room for additional Medicaid expenditures.** We quickly pivoted to defense where some of our biggest successes this legislative session came as we defended the physicians of Connecticut and the medical profession from legislative initiatives that would have had significant negative impacts.

The escalating trajectory of healthcare costs, coupled with ongoing consolidation, the proliferation of private equity, and the entrance of for-profit hospital systems like Prospect Medical Holdings into our state, has spurred legislators into a frenzy of introducing purportedly protective measures for the practice of medicine. **However, much of this proposed legislation, though well-intentioned, would in reality be harmful, burdensome, and intrusive into the practice of medicine.**

A recurring misconception within the legislature is the belief that stringent control over remaining private practices and meticulous oversight of mergers, relocations, etc., through the Certificate of Need (CON) program, will effectively counteract the consolidation trend. **In this session alone, we successfully defeated legislation** that sought to mandate CONs for the majority of physician practice mergers and impose CON requirements on certain medical practices that relocated but happened to cross municipality borders. We continue to educate lawmakers that **we don’t need regulatory hurdles to protect the practice of medicine; we need to fix administrative burdens, shift the balance of power away from the health insurance industry and deal with the high cost of running a medical practice, including the sub-standard Medicaid payment rates.**

*“...some of our biggest successes this legislative session came as we defended the physicians of Connecticut and the medical profession from legislative initiatives that would have had significant negative impacts.”*

This session, we thwarted legislation that aimed to penalize physicians participating in the Worker’s Compensation program with fines of up to \$500 for missing reporting deadlines. We also defeated many scope of practice challenges from allied health professions. **These victories underscore our commitment to safeguarding the autonomy and integrity of medical practice in Connecticut**, amidst evolving healthcare landscapes and legislative challenges.

**While our defensive stance largely dictated the flow of play, a big offensive success came in the realm of Telehealth.** Recognizing the impending expiration of Telehealth pay parity, we worked with a coalition to secure payment parity indefinitely in Telehealth, notwithstanding strong opposition from the health insurers. We also defeated attempts by the health insurance industry to expand the prevalence of commercial telehealth companies in Connecticut, as well as attempts by the health insurers to allow physicians working for commercial telehealth companies to satisfy network adequacy standards in Connecticut. The latter, if successful, would have rendered the concept of network adequacy meaningless by expanding access to out-of-state telehealth providers at the expense of brick and mortar Connecticut practices. In-state practices would have faced enormous pressure to lower rates in order to stay in-network.

**As the President of CSMS, I am frequently asked about our organization's role. This session vividly illustrates the critical role CSMS plays in championing the physicians of Connecticut. Through a combination of defensive legislative strategies and offensive maneuvers, we not only championed proactive legislation beneficial to physicians, but also effectively halted the advancement of numerous detrimental bills. This is the essence of our mission: protecting physicians and the practice of medicine in Connecticut.**

While we anticipate we will have to continue to defend the practice of medicine indefinitely, next session we will once again be at the forefront advocating for Medicaid rate increases for physicians. Speaker of the House Matt Ritter noted that Medicaid rate increases were at the top of his priorities next legislative session when crafting a new, two-year budget, and we have high hopes to see a transformed Insurance and Real Estate Committee. The long legislative session beginning in January of 2025 will be here before we know it and **we need the help of ALL of Connecticut's physicians to stand up to the powerful health insurers and help educate our lawmakers about what physicians really need to deliver the highest caliber of medical care to Connecticut's patients.**

Stacy Taylor, MD, President, CSMS

## GEARING UP FOR 2025: WHAT CAN YOU DO?

1.

### **Become a CSMS Member/ Renew Your Membership**

Scan the QR code below, or go to  
[csms.org/membership/joinrenew/](https://csms.org/membership/joinrenew/)



2.

### **Have Coffee with Your Legislator**

Talk to them about what it is like to be a physician  
in Connecticut and the concerns you have.

Half of the battle is developing relationships with  
legislators!

Find your legislator at :

<https://www.cga.ct.gov/asp/menu/cgafindleg.asp>

3.

### **Attend This Year's CSMS Annual Meeting**

September 19th – 5:30pm  
TPC River Highlands, Cromwell



### ***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!