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February 25, 2009

David Parrella Medical Care Administration – 11<sup>th</sup> floor Department of Social Services 25 Sigourney Street Hartford CT 06106-5033

Dear Mr. Parrella:

I am writing to comment on the Department's draft HUSKY waiver proposal. Specifically, my comments relate to the Department's plans for Primary Care Case Management (PCCM).

The CT Health Policy Project's strongly supports the Department's PCCM program. We believe that a strong PCCM program is critical to the long term health of HUSKY. Development of PCCM in Connecticut, as we envisioned in the Department's working group, will be provider and consumer driven. We expect PCCM to attract more providers to HUSKY and result in significant improvements in access and quality of care for consumers. PCCM offers an important alternative to the HUSKY HMOs for consumers, providers and policymakers. Competition between the two programs should encourage better performance and accountability in both options. Care coordination, the centerpiece of PCCM, will ensure the most efficient use of scarce resources in the program.

I am pleased to see and agree with the proposal's contention that PCCM will not impact the cost-effectiveness of the program; that savings generated by PCCM will offset the PCCM management fees, any additional administrative costs, and any possible utilization increases (p. 88 of the waiver proposal document). We at the CT Health Policy Project believe it could result in significant savings over our current system.

I am concerned however that the proposal only describes PCCM as a severely limited program only available to the small number of HUSKY families who are current patients of PCCM providers only in the Waterbury or Willimantic areas (pp. 7, 10, 11, 18 and 19). This was not the agreement of the working group nor does it reflect the Department's plan for PCCM submitted and approved, without revision, by the Appropriations and Human Services Committees last fall. That plan states "The geographic areas for the pilot will be defined based on the catchment area of providers who choose to enroll in the PCCM pilot." Providers from across the state have applied to participate in PCCM, far more than just those serving Waterbury and Willimantic. In fact, there has been a great deal of interest in PCCM from providers. As you know, HUSKY has struggled to attract participating providers since the program's inception. I am concerned that the policy

changes you have proposed are endangering progress in expanding provider panels, and consequently access to care for HUSKY families. I am also concerned that such severe limitations on eligibility will endanger the entire program by artificially suppressing enrollment in PCCM. At the CT Health Policy Project, we have received many calls from consumers eager to enroll in PCCM. However enrollment levels to date have not reflected the consumer interest due to the limitations the Department has imposed, not because there is not interest in the program.

I urge you to revise the HUSKY waiver proposal to give every HUSKY family and provider in Connecticut the option of participating in PCCM.

Thank you for your time and your commitment to the health of all HUSKY members.

Sincerely,

Ellen Andrews, PhD Executive Director

Ellen M Audrews