

**PA12-165**

HB5271

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**JOINT  
STANDING  
COMMITTEE  
HEARINGS**

**ENERGY AND  
TECHNOLOGY  
PART 1  
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**2012  
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COMMITTEE

February 14, 2012  
1:00 P.M.

CHAIRMEN: Senator Crisco  
Representative Megna

VICE CHAIRMEN: Senator Hartley  
Representative Johnson

MEMBERS PRESENT:  
SENATORS: Kelly

REPRESENTATIVES: Aldarondo, Altobello,  
Aresimowicz, Crawford  
Dargan, Hoydick,  
Nardello, Roldan,  
Sampson, Schofield,  
Yaccarino

REP. MEGNA: In the interest of safety, I would ask that you note the location of and access to the exits in this hearing room. The two doors through which you entered the room are the emergency exits and are marked with exit signs. And in an emergency, the two doors behind the Legislators can also be used.

In the event of an emergency, please walk quickly to the nearest exit. After exiting the room, go to your right and proceed to the main stairs or follow the exit signs to one of the fire stairs. Please quickly exit the building and follow any instructions from the capitol police. Do not delay and do not return unless and until you are advised that it is safe to do so.

In the event of a lock down announcement, please remain in the hearing room and stay away from the exit doors until an "all clear" announcement is heard.

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Before I commence the hearing testimony, I just want to remind people that you have three minutes to testify. We can follow up with questions if we have any questions. We have your written testimony also to help us. And that -- during the public hearing, you'll see Legislators going in and out of the room because of other activity, other legislative activity going on in the LOB today.

First up, we'll have public officials, but I have no public officials signed up to speak, so if there is anybody out there please wave your hand. Otherwise, I'm going to go in order as set forth on the public hearing agenda.

We'll start with House Bill 5013. Jennifer Jaff.

JENNIFER JAFF: Good afternoon, Senator Crisco, Representative Megna, members of the committee. Thank you so much for this opportunity to submit our views before you today.

Advocacy for patients with chronic illness represents consumers with complex health care needs, many of whom do not have and cannot find insurance due to preexisting conditions. The Affordable Care Act is intended, at least in part, to change that. The creation of exchanges, marketplaces where consumers can shop for health care, as well as be screened for Medicaid, CHIP and advanced premium tax credits or subsidies is central to the ACA.

In designing exchanges, though, many decisions have been left to the states. Thus, the membership of the Exchange Board is essential.

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The Board will make many key decisions and recommendations to the General Assembly including, for example, whether to have a basic health program and what to include in the essential health benefits package. These decisions will impact the lives of everybody who uses the Exchange, indeed, ultimately, everybody in Connecticut. But nobody will be more affected, more directly, than the people with disabling chronic illnesses.

It is for that reason that the federal government, in the preamble to the proposed regulation creating exchanges, stated that, quote, exchanges are intended to support consumers, and as such, the majority of the voting members of governing boards should be individuals who represent their interests. Thus, the Obama administration cautioned against allowing the exchanges to be dominated by the insurance industry brokers or health care providers, as our General Assembly wisely legislated against.

However, it is not enough to exclude certain groups from serving on the Exchange. We must also include as board members people who have an intimate knowledge of obstacles people with chronic illness and other disabilities face, not only in finding insurance, but in obtaining coverage for the tests and treatments they need, in communicating with insurance companies, in understanding our insurance benefits and in accessing health care.

Thus, although we have no doubt that the members of the Exchange Board are well intentioned, they simply do not know what I know, see what I see, both as a patient myself and as a lawyer for thousands of patients with

chronic illnesses. Indeed, nobody who has not walked in the shoes of a patient with a complex health condition really understands the obstacles we face.

Without that understanding, the Exchange Board cannot possibly make fully informed decisions. Indeed, the Exchange Board already has received a final report from its consultants that represents -- I'm sorry -- that recommends considering mechanisms such as prescription drug specialty tiers, something that could result in co-insurance making medication prohibitively expensive.

Many crucial decisions makers already have recognized the importance of eliciting the input of people with chronic illness. I personally have been called on repeatedly as an expert in obstacles facing people with chronic illnesses to participate in conversation with the White House, HHS, DOL, Treasury, about health reform implementation. I've met with the President's Disability Policy teams to discuss the special nature of largely invisible albeit disabling chronic illnesses. I have actually consulted with one of the nation's largest insurance companies to help them fully appreciate the problems consumers encounter in attempting to access that care.

All of those decision makers have recognized that I have knowledge, information and experience that is valuable to them because I live this experience every day. The state of Connecticut should recognize that we patients bring something unique and important to the table as well.

I will just close by urging you -- I would

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strongly recommend that the committee consider moving up the effective date of these changes to the Exchange Board. The staff of the Exchange is being hired now. The consultants are finishing their reports now. Decisions will be made soon about critical aspects of the Exchange. It doesn't take from now until July to appoint two new members and give the healthcare advocate a vote. So we would urge you to move up the effective date of this legislation.

Thank you.

REP. MEGNA: Thank you.

Are there any questions? No?

Thank you very much for your testimony.

Ellen Andrews.

ELLEN ANDREWS: Thank you. Representative Megna, Senator Crisco and honored members of the committee.

HB 5013

I'm Ellen Andrews. I'm the executive director of the Connecticut Health Policy Project. We are a consumer advocacy organization in New Haven.

I want to thank you for the opportunity to testify in front of -- in support of this very important concept, adding consumers. Jennifer spoke elegantly about the -- the state role in building health insurance reform exchanges. They are a critical piece of reform and we need to get it right. And we don't have a lot of time.

The Board is dominated right now by powerful

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vested interests and is lacking in voting consumer members. It has one small business member, thankfully. But that's not nearly enough. It should be a majority.

The Exchange is making important permanent decisions right now. I don't think it will come as any shock to this committee that the public trust in the insurance industry and government regulators, in general, is very weak. And that's based on the history of inadequate protections and a sense that the deck is stacked against us as consumers.

For a hundred -- one in ten people will be -- everybody in the state will be required to purchase insurance January 1st, 2014. One in ten will purchase it. It's estimated, through this Exchange, 140,000 Connecticut residents will have no choice if they want to access subsidies to make insurance something approaching affordable -- not really -- no way.

Anyway, 140,000 and a trustworthy Exchange is critical so that people trust it. They believe that they're buying something of value. That has not been the experience of my - my clients in the past. When they've gone to buy something for insurance, too often they find that it doesn't cover anything you'd expect insurance to cover.

The Exchange is currently making decisions. They are hiring a chief executive officer. Consultants hired by the Exchange have recommended handing over the small business exchange to CBIA. That would be a very large mistake.

CBIA is a lobbying organization who has, in

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the past, lobbied against the interests of small businesses and options for their -- for affordable health insurance. They are closely tied to the insurance industry and require membership in their agenda driven lobbying organization to purchase insurance. They oppose national and state health reforms. Turning the Exchange over to opponents of reform guarantees failure.

And we need an alternative, public, transparent alternative to CBIA that is available to small businesses. The competition will include both systems.

So 5013 is a good start. But it needs - it needs more. It needs two consumer representatives. It needs two small business representatives, additional small business representatives, and the effective date needs to be yesterday.

You should prohibit CBIA and other vested interests from taking over any part of the Exchange, ensure the Exchange's chief executive officer is completely independent of the insurance industry, allow the Ethics Commission to enforce the conflict of interest provisions that you so wisely put in the bill last year, and do it now. It's not acceptable. By July, they'll be picking out wall art on the offices. Consumers need a voice now. Thank you.

REP. MEGNA: Thank you.

The situation that you're talking about where they're entertaining - whether CBIA --

ELLEN ANDREWS: Yeah.

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REP. MEGNA: -- create the - the --

ELLEN ANDREWS: That was the suggestion from the --  
the consultants, yes.

REP. MEGNA: Okay.

ELLEN ANDREWS: And it's been reported on in the  
media as well.

REP. MEGNA: Oh, okay. But it's just something  
under consideration or it's been --

ELLEN ANDREWS: Right. No, it hasn't been decided  
yet. No, there is still time to -

REP. MEGNA: Okay.

ELLEN ANDREWS: -- get consumer voices on there.

REP. MEGNA: Oh, okay. All right. Thank you and  
thank you for the work you do.

Are there any questions?

Representative Nardello followed by  
Representative Altobello.

REP. NARDELLO: Hello. I have a couple of  
questions.

In your testimony, you talked about the fact  
there's a lack of consumer representation and  
you referenced that there are federal  
regulations that call for a Board member  
majority that represents consumers. So are  
we, in effect, ignoring those federal  
regulations as it is now? Can we talk about  
that a bit?

ELLEN ANDREWS: Yeah. I'm not an attorney and I

don't know, but a letter has gone to HHS asking that question and specifically others. And it's my understanding they're looking into it. I don't know.

REP. NARDELLO: And the second part of this, could you tell me the implications of, let's just say, theorizing that we were to turn over the small business to -- section to CBIA, what would be the financial implications of doing so?

ELLEN ANDREWS: It's unclear. There is a great deal of money right now for setting up the exchanges. So I'm assuming that a good deal of that would go to CBIA.

In terms of the financing, the Board has not decided how to finance -- that's an extremely important decision, that the Board is going to decide how to finance the functions of the Exchange. They are right now hiring a CEO and I think like eight or ten senior level staff at eye-popping income ranges, frankly, for me, at least from the advocacy world and having worked in the public sector, very large.

So we would love to know where that -- and that's just senior management. We'd love to know who exactly is going to have to finance those costs. If it's going to be financed by the Exchange, then that's going to make those plans more expensive. It's unclear. The financing is completely up in the air. And you need consumers and small businesses around the table when those decisions are made.

REP. NARDELLO: And if -- whatever entity -- if the one entity is chosen to be the small business vendor for -- for that segment, that means they'll exclusively get that business. Is

that correct?

ELLEN ANDREWS: It doesn't -- I mean, that does not mean that building a small business exchange puts CBIA out of business. I think more alternatives is a good thing. Competition is a good thing.

REP. NARDELLO: No, I'm not suggesting that. I'm saying that -- that they would be the sole vendor on the Exchange. There wouldn't be someone else. Whoever is chosen, be it CBIA or whoever else, will become the sole vendor on the Exchange. You're opening another one, is that correct?

ELLEN ANDREWS: I don't know. That's a good question. I don't know if they could pick more than one. I don't -

REP. NARDELLO: If you could get back to us and someone could let us know on whether it would be more than one.

ELLEN ANDREWS: Okay.

REP. NARDELLO: Thank you.

REP. MEGNA: Representative Altobello.

REP. ALTOBELLO: Thank you, Mr. Chairman.

Is your organization a member of CBIA, perhaps?

ELLEN ANDREWS: Oh, no. We can't afford it.

REP. ALTOBELLO: Well, it's a sliding scale, I understand.

ELLEN ANDREWS: It doesn't slide low enough for us.

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REP. ALTOBELLO: I see.

There's a bullet about prohibiting CBIA and other vested interests from taking any part of the Exchange. I mean, we - we'll be sitting here for several hours today and many more public hearings and, quite frankly, I think everybody that comes to the seat you enjoy right now has an interest.

ELLEN ANDREWS: Uh-huh.

REP. ALTOBELLO: What's the difference between an interest and a vested interest, in your mind?

ELLEN ANDREWS: I'll tell you right now, I don't make a  
-- I don't make a dime depending on how you decide this. That is not true for everyone who will be sitting in this chair.

REP. ALTOBELLO: So you would --

ELLEN ANDREWS: I have a very important interest for consumers, but I get paid either way, or not.

REP. ALTOBELLO: So that anybody who works for somebody who may make a profit somewhere along the line would have a vested interest?

ELLEN ANDREWS: I'm just - (inaudible) interest, yes.

REP. ALTOBELLO: Okay. Okay, thank you.

Thank you, Mr. Chairman.

REP. MEGNA: Thank you.

Representative Sampson.

REP. SAMPSON: Thank you, Mr. Chairman.

Ellen, thank you for joining us here today.

ELLEN ANDREWS: Thank you.

REP. SAMPSON: I appreciate your testimony.

Just -- just a very simple layman's kind of understanding of something. I am assuming that the reason why we want to add the advocacy element that you're talking about to the Board is purely because of that. That someone is essentially going to be looking out for the consumer. But is there any additional reason beyond that, some area of expertise that's lacking on the Board, anything like that? I mean, the whole thing is I assume that the -- the makeup of the Board was determined based on the areas of expertise that were required to put together an exchange.

ELLEN ANDREWS: You're making that assumption, are you?

There are areas of expertise that are outlined in the law. It is a question whether it -- many pieces of the law, the conflict of interest provisions as well, and arguably it could be made that they were not followed as well -- as rigorously as we'd hoped.

REP. SAMPSON: Understood. I don't know if that's really an answer to my question, though.

ELLEN ANDREWS: Okay.

REP. SAMPSON: I just was wondering if there is

another reason besides the obvious we want advocates for consumers on the Board.

ELLEN ANDREWS: Well, I think that we bring, as Jennifer said, we bring a lot of experience that doesn't reside in other places.

I was talking to someone the other -- about Navigator. Someone who -- you know, hadn't thought about this. But when we did HUSKY outreach -- this is one experience -- we -- we put out -- this state -- I had no part with -- put out an RFP and chose among, probably, a dozen bidders. They only chose two, and that meant that there were ten groups out there, ten organizations who said, "Fine, this isn't my job anymore."

What Massachusetts did was, in my mind, a lot smarter. They give small amounts of money to pretty much anybody with a good idea. So, essentially, every social worker, every community worker, had a -- their HUSKY brochure in their bag. But it wasn't enough money for people to start fighting over for any particular organization. It was a much smarter way. I don't know that any -- we've actually met with every member of the committee and none of them knew that story.

And I've got -- I've got a Martha Stewart story, I've got a bunch of stories. So I think there is -- and that's just on outreach. Jennifer has different kinds of expertise. I think there's something we add besides political correctness, yes.

REP. SAMPSON: Understood. All right. Thank you.

Thank you, Mr. Chairman.

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REP. MEGNA: Thank you, sir.

Representative Yaccarino.

REP. YACCARINO: Thank you, Mr. Chair.

And thank you for being here, Ellen, to give testimony.

I just have one quick question. You mentioned the consultants. Who -- what company is that and have they done this in the past? Have they done this investigation in the past, as far as their recommendations?

ELLEN ANDREWS: It is Mercer and I don't know. I don't know if they have.

REP. YACCARINO: So you don't know if they've ever -- what their track record is.

ELLEN ANDREWS: I don't, no.

REP. YACCARINO: Will they have a recommendation who should administer the - the dollars or the --

ELLEN ANDREWS: They -- they spoke strongly about the -- their feeling that CBIA is extraordinarily successful in the small business market. I think we'll hear from small businesses who might want a few minutes for rebuttal, and -- and said that it would be expensive to duplicate that. I disagree. You're going to be getting that anyway for individuals. And you'll hear from some brokers and small businesses who talk about the fact that individuals and small businesses want the same thing from coverage. They want value.

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And you're going to have to explain this in 25,000 different ways and in many, many languages, regardless of whether somebody is an employee of a small business or an individual.

You're going to be building it anyway - billing it and including small businesses should not be expensive.

REP. YACCARINO: So that the consulting firms, there's no vested interest except for the best possible dollars and care. Am I correct?

ELLEN ANDREWS: I do not want to speak to Mercer's

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REP. YACCARINO: Excuse me?

ELLEN ANDREWS: -- large vested interests and (inaudible) them. I wouldn't have -- especially since when one of my board members works for Mercer. I wouldn't know.

REP. YACCARINO: What's the name of the company?

ELLEN ANDREWS: Mercer. They're - they're human resources consulting. They do a lot of --

REP. YACCARINO: Thank you very much.

ELLEN ANDREWS: Sure.

REP. MEGNA: Thank you, Representative.

Ellen, is there something in this bill about CBIA?

ELLEN ANDREWS: No.

REP. MEGNA: Oh, okay. Okay.

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ELLEN ANDREWS: No, but I'd like to add it.

REP. MEGNA: I thought I missed it. Okay. Yeah.  
I understand the argument. I just -- I'm just  
looking through the bill and I didn't see  
anything in there about it.

ELLEN ANDREWS: No.

REP. MEGNA: Are there any other questions?

No?

I was just thinking why that bell went off so  
little earlier. It's -- they probably  
subtracted the minutes the other person before  
you went over from your three minutes.

ELLEN ANDREWS: Ah. It's (inaudible). Okay.  
Fine.

REP. MEGNA: Okay.

ELLEN ANDREWS: All right. That's good to know.

REP. MEGNA: Thank you very much.

ELLEN ANDREWS: Thank you.

REP. MEGNA: Sue Nesci, please.

SUSAN NESCI: Good afternoon, Senator Crisco,  
Representative Megna and members of the  
Insurance and Real Estate Committee.

HB 5013

I'm Sue Nesci. I work for the Arthritis  
Foundation and we represent about 654,000  
adults and 3,400 kids with arthritis in the  
state. And that's just to give you an idea  
about a third of the adults, aged 45 to 64,

who have arthritis. Every day, I spend a lot of time on the phone talking to folks with arthritis who can't get insurance, including all the existing options available.

And if you look at the Mercer report - and I'm not an expert on any of this -- I'm a public health educator -- they can't afford what Mercer is projecting for the premiums. And I think that's one of the reasons why we want to make sure that someone with a chronic illness is represented on the Health Insurance Exchange Board, because we do have a different perspective. We do encounter problems that maybe experts don't know about. And I see them every day, people who lose their jobs, especially because chronic diseases tend to disproportionately affect people who have lower socio-economic status. These are folks, especially in this age range, who've lost their job in the economic downturn, and have a very difficult time either paying COBRA or after they finish COBRA, getting any insurance at all. And yet, they need ongoing medical care because if they don't get it, in the end, they cost us all a lot more.

I just would like to encourage you to include the healthcare advocate as a voting member. We do a lot of referrals, both to Jennifer Jaff, Advocacy for Patients with Chronic Illness, and the healthcare advocate. And a lot of times our folks can't be helped because there simply is no option for them.

I'd like to see them have a voice in the decisions that are made by the Health Insurance Exchange Board.

REP. MEGNA: Thank you very much. We also -- as a reminder, we have your written testimony if

you submitted it.

Representative Johnson.

REP. JOHNSON: Thank you, Mr. Chair.

You said that people with chronic illnesses can advise on a better basis than the people who don't about certain issues having to do with their health care. Could you give me an example of - of --

SUSAN NESCI: Oh, sure. I think Jennifer mentioned two. One of the things that you see is a recommendation in the Mercer report. It's for tiering, and especially what are called specialty tiers. In all of our folks with inflammatory arthritis, such as rheumatoid arthritis, psoriatic arthritis, may be names that you don't represent, people with other diseases, like Crohn's disease, use drugs that cost anywhere and -- for arthritis between eighteen and forty-eight thousand dollars a year.

And in addition to a fixed copay and their premiums, what's happened in the last five years, over 50 percent right now of the commercial insurance plans require a coinsurance, which is a percentage of the cost, and that percentage can go anywhere. We've seen from 25 to 40 percent. So people are being asked to pay thousands of dollars a month out of their pocket. I just talked to a gentleman the other day who, in three months, had spent \$4700 out of his pocket.

This is really beyond the range of most of our folks. And what -- I mean, we have great new medications that stop joint destruction and prevent disease and keep people working and

keep them out of the hospital, and yet, they can't get access to them. And this is the kind of voice that we need, because if you -- as Jennifer said, if you don't walk in those shoes, you don't know the issues.

REP. JOHNSON: So -- so just to follow up -- and in the circumstances where -- it sounds to me like some of these folks may qualify -- despite the fact that they're working, they may qualify for Medicaid and they may be part of the medical needy program.

SUSAN NESCI: Yeah, a lot of them, Representative Johnson, are in that hundred -- even with the Affordable Care Act, they're in that 133 to 200 or just over 200 percent. They're really the working poor. They don't qualify for any of the federal assistance programs, at least the ones I've referred. And I've worked with the healthcare advocate's office and with Jennifer and others to try to get access to services. There's really a large hole where they kind of fall through. There is no safety net for them. We are all one paycheck away from losing our health insurance and not being able to afford the premiums because COBRA is not cheap.

REP. JOHNSON: Thank you for your testimony.

Thank you, Mr. Chair.

REP. MEGNA: Thank you. Are there any other questions?

Thank you very much.

Dr. Carolyn Malon.

Claudia Epright.

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CLAUDIA EPRIGHT: Good afternoon, Senator Crisco and thank you to you and the members of the committee for allowing me to testify.

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I'm testifying as a consumer. I want to share a couple of my own experiences with you.

My husband has been a Connecticut electrical contractor for over 25 years. And until 2004, we had insurance through my employers. In 2004, I was laid off from a job, and subsequently my husband and I had to purchase private insurance for our monthly premium then of \$527.59 with a \$5,000 deductible.

When I was laid off again in 2009 from a nonprofit that could no longer fund my position, we had to apply for a reduced premium. So our premium, which had been -- at that time was \$1,044.01 a month with a \$5,000 deductible, was then reduced to \$947.16 with a \$10,000 deductible. That was the lowest premium we could get at the time.

Just this past July of 2011, our premium rose to \$1,575.26 per month, now with a \$10,000 deductible. I did some math. That means that our insurance premium and out of pocket, because it was a deductible, came to an annual amount of \$28,903.12 for two people.

We don't have any of the big five major health concerns. We are relatively healthy, no diabetes or any -- none of the cancer -- none of the big ticket items. In order for me to be able to -- or my husband and I to be able to cover that premium, I would have to get a job, or he would have to be able to make over 30 -- thirty-six to forty thousand a year because, after taxes of 30 percent, you have

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barely enough to cover your whole year's medical expense.

Thank God that with the Affordable Care Act we are now able to get well-care checkups that are paid for by the insurance. Prior to this year, they were not covered under our insurance and we still had to pay for them. In -- these -- this is not sustainable.

And in addition to this, I want to encourage the Board to take a look at the -- the consumer participation on the Board. I think it's critical that people with my experience be a part of the Board and that we give input.

Thank you.

REP. MEGNA: Thank you. And thank you for your testimony today. I think it's important to hear when making a decision on a bill like this, to hear a consumer come up and talk about the -- how expensive it was for you.

Are there any questions? No?

Thank you very much.

CLAUDIA EPRIGHT: Thank you.

REP. MEGNA: Jill Zorn.

JILL ZORN: Thank you, Representative Megna and Senator Crisco and members of the committee.

HB 5013

My name is Jill Zorn. I'm a senior program officer at Universal Health Care Foundation of Connecticut, an independent, nonprofit foundation dedicated to achieving access to high quality affordable health care for everyone in our state.

I'm here to talk about H.B. 5013. This is a good start on trying to make some -- to improve the health insurance exchange. We passed legislation last year that was supposed to insure consumer and small business representation, as well as to avoid conflict of interest. But we find that the intent of the legislation is not necessarily being carried out. So H.B. 5013 is a good start.

We applaud making the healthcare advocate a voting member. But we recommend that any legislation add a total of four new members; two consumers and two small business representatives. And I'm not here to say that it should be necessarily a professional advocate like myself. But you just saw someone testify who's living the reality of trying to buy insurance in Connecticut today, whose husband is a small business person. And I think a little reality check like that on the Board could really be useful.

In addition, the bill talks about adding new members July 1st. By July 1st, as others have testified, many of the very difficult decisions will have already been made. It's really too late.

As far as insuring public trust in the Exchange with regard to conflict of interest, I would have to say that the recent discussions about CBIA being able to, perhaps, run the small business part of the Exchange is a great example of how conflict of interest is not being taken as seriously as it should. And I think that new legislation could address - address that issue as well. I have some details in my written testimony.

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REP. MEGNA: Okay. Thank you. Do we have your testimony -- you're written testimony?

JILL ZORN: I handed it in.

REP. MEGNA: Okay. Well, Representative Altobello asked about it. You don't have it? Yeah? Well, just make sure that the clerk has it so that --

JILL ZORN: I handed it to her. I know she has it.

REP. MEGNA: Okay. Because a few members don't have it. But we'll -- as long as it's handed in --

JILL ZORN: Okay.

REP. MEGNA: -- we have it -

JILL ZORN: Great.

REP. MEGNA: -- and I appreciate it.

Are there any questions?

Representative Johnson.

REP. JOHNSON: Thank you, Mr. Chair. And thank you for your testimony today.

I just have one question. You mentioned in your testimony that you think that July is too late to have somebody -- the new four that you recommend -- appointed. What what -- when do you think should be appointed, if not July?

JILL ZORN: In my written testimony, I said they should be on the Board by the March meeting. The February meeting is in two days so I -- in one day -- this week, so I don't think that's

possible. But there are -- there are lots of suggestions out there already.

For -- for instance, people that were suggested with the Consumer Advisory Board, there's lots of qualified people to pick from and I don't -- if we wait until July 1st it will definitely be too late. And I'm very concerned about -- about the timing.

REP. JOHNSON: And so our session concludes in May. Do you think in May?

JILL ZORN: No. It's really got to be sooner. If anyone here wants to read the minutes of the kinds of things they're considering, or read the 400 page Mercer Report and all the difficult decisions that need to be made, they're going to have to make some of them very, very soon.

And it would be great to have people who -- who are living and breathing and trying to buy insurance as an individual or small business on this Exchange Board to make sure that decisions are being made in the best interest of the people it's supposed to serve.

REP. JOHNSON: Thank you. Thank you, Mr. Chair.

REP. MEGNA: Thank you.

Representative Sampson.

REP. SAMPSON: Is it -- is it Jill?

JILL ZORN: Yes.

REP. SAMPSON: Pardon me. I didn't have your testimony here.

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A VOICE: (Inaudible.)

REP. SAMPSON: It will turn up. I -- I have no doubt.

I want to ask you pretty much the same question that I asked earlier of someone else. I completely understand and respect the desire to respect consumer's interests on the Exchange Board. It makes perfect sense to me.

The thing is that along with that request that we add an advocate for consumers, there seems to be something attached to it, which is an assumption that the people that are already going to be on the Board are not advocating for consumers and lower premiums.

JILL ZORN: Uh-huh.

REP. SAMPSON: And that's what I want to know. If there is some feeling that there is some added benefit, beyond someone saying, "Gee, the prices ought to be lower," to having the makeup of the Board change. And I just -- I haven't heard that yet.

It seems to me that the people were chosen because of their individual areas of expertise. And I would argue that people like CBIA -- you can question their motives all you like -- but I would assume that they want to work to have lower insurance premiums for small businesses. It would make sense to me. So if you could just elaborate on your thoughts on that.

JILL ZORN: I think what we're concerned about -- and the reason the legislation -- the legislation was written very carefully, both to try to insure that there would be some

consumers on the Board as well as to guard against conflict of interest.

And when you look at some of the appointments that have been made to the current Board, and also, the way many decisions are being made behind closed doors, as a member of the public, I just have -- I don't have a lot of confidence in this Board right now.

I'm sure there's some -- I'm sure that the members are well-meaning, but you just don't have that feeling that there is a good balance in favor of protecting consumers on the Board the way it is right now. That's just the feeling that we -- that I have and that many advocates have. And I think to -- to increase the membership of the Board with consumers will help put more trust in this Board, but also to really look at the conflict of interest and the -- are decisions being made in the best interests of consumers and not in the best interests of people who are going to be selling insurance or, you know, doing other types of functions that will be very lucrative.

REP. MEGNA: Representative Yaccarino.

REP. YACCARINO: Thank you, Mr. Chair.

Thank you, Jill, for your testimony. Just two quick questions. On the Board, would you ever consider a retired physician or retired nurses? And how -- the second question is how long is the tenure for a Board member and - go ahead

JILL ZORN: The way the -- the initial legislation have staggered terms for different members, and I think you would definitely want to look

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at any fixes to the Exchange, think about the terms. I mean, there are some people on the Board, maybe, for as long as four years. And some people -- I think the current legislation you're looking at is only two years. You might want to think about having longer terms so people really can get their feet wet and understand the...

As far as providers, I have -- I have -- I actually thought long and hard about that myself. And actually, the legislation was written to keep providers off the Exchange as well. And it was written to keep insurers off the Exchange and we ended up with three people that, five minutes ago, worked for insurance companies. But we didn't end up with anybody that, five minutes ago, was - was a physician -- once a physician, always a physician.

I think, you know, hospitals -- I mean, there's a pretty wide range of provider interests and I think there was definitely concern about - about that kind of conflict of interest, too. So I mean, I guess it could be something that you might want to consider. I don't know.

But by the time you -- I think that those advocates, as -- who are talking about people living with chronic illness, talking about small business people are really in the market, you might run out of spots. And we don't need an Exchange Board with 50 people on it.

REP. YACCARINO: Right. I just think it's good to have the mix of the patient who has the you have the illness you deal with on a daily basis, retired nurse. They've seen everything, really.

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JILL ZORN: I mean -- a retired nurse has a nice ring to it.

REP. YACCARINO: No. They -- they've seen --

JILL ZORN: Yeah, they've seen it all. That is for sure. That is for sure.

REP. YACCARINO: That's just a thought.

JILL ZORN: It's something to think about. I mean, but that person is a consumer. They're an individual, you know. Be -- it really could be --

REP. YACCARINO: Right.

JILL ZORN: -- but, I think, as long as you're not, sort of, benefiting from the health industrial complex as we know it, if they're retired.

REP. YACCARINO: That's why I would say somebody that's been retired, even long retired

JILL ZORN: Yeah, I think that -- that could

REP. YACCARINO: -- it just -- anyway, thank you for your testimony.

JILL ZORN: I think that's something to consider.

REP. YACCARINO: Thank you.

REP. MEGNA: Representative Altobello.

REP. ALTABELLO: All right. Thank you, Mr. Chairman.

Good afternoon. It's nice to see somebody from Meriden.

You expressed a lack of confidence in the way the current Board is made up and the way it appears that it's going forward. Let's say we weren't able to make any changes this year in -- in the composition of the Board. Would you rather have the federal government just -- we should default to the federal government?

JILL ZORN: Well, I --

REP. ALTOBELLO: I mean, is it - is it that bad that -- or is it kind of bad or is it -- you know, one through ten, ten being --

JILL ZORN: Let's just - I mean we're we're here because look, we're Connecticut. We're good at fixing things and we have the ability to fix this. And if you look at the initial legislation, what the intent was and then what happened with appointing this Board, I mean, it really did not live up to the intend of the legislation. I think we have the absolute ability to fix this and to move forward. And I really hope that you'll be able to do it.

REP. ALTOBELLO: What part of the intent do - do you think that the membership doesn't embrace?

JILL ZORN: Well, some of the positions. The legislation says there should be someone who's an expert in small employer insurance. And I think the way I interpreted that would be someone who's living, who's trying to buy, who's out in the market, who is a small employer. The person that was appointed --

REP. ALTOBELLO: But why would that -- why would an employer be an expert in -

JILL ZORN: Because -- well, this is what I'm

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talking about --

REP. ALTOBELLO: Wouldn't we need a broker to be that expert?

JILL ZORN: No, that's someone who would have a vested interest for sure.

REP. ALTOBELLO: Absolutely. Yeah.

JILL ZORN: So someone who -- what we're here today talking about is better consumer representation. That's what we're talking about. And if you look at who is on the Board right now, I don't see -- I don't see it.

REP. ALTOBELLO: And if we're not -- back to my original question then, if we're not able to make these changes?

JILL ZORN: Well, I'm really hoping that you will.

REP. ALTOBELLO: Well said. Thank you.

Thank you, Mr. Chairman.

REP. MEGNA: Thank you, sir.

Any other questions? No?

Thank you very much for your testimony.

Kevin Galvin.

KEVIN GALVIN: Good afternoon. My name is Kevin Galvin. Thank you for hearing us today.

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I'm a small business owner here in Connecticut for 30 years, and I chair Small Businesses for Healthy Connecticut. I'm here today as a civilian. I don't get paid. I hopefully to

try to get paid by my customers now and then.

I had prepared remarks, but I think I'm going to spend a little on the composition of the board because there have been some questions about it.

In my notes, I'll just say, I think we all need to agree that debating the how and why the composition of the board is as it is should be passed, but I don't think it is. In answer to the Representative's question, there already is an MD on the board, Dr. Scalettar. There's also Dr. Grant Ritter, who is a PhD.

Also, I want to mention, in the -- in the federal reg, in the preamble, virtually one of the first things that the fed said was the composition of the board should be a majority of small businesses and consumers. They weren't looking for wonks. They were looking for people who buy insurance.

The Exchange has the ability to bring in consultants, to bring in insurers, to walk down the street to the Aetna and get all the information they want. It is very, very difficult to get small business people and consumers in a room, in a structure, where they -- where they have equal say. And that was the intent of the Exchange.

And from everything I know, the State of Connecticut has drifted as far -- farther than any other state in -- in this composition of the Exchange as it relates to the regs. We need to bring that together. I think that it is reasonable that two consumers come on board.

You know, there are folks like Jennifer Jaff

that have incredible experience, of decades that can -- that can bring that information. There -- there are small business people that bring the small business perspective. And as you all know, small business people make great decisions most of the time.

I will tell you that the State of Rhode Island almost virtually is almost one hundred percent composed of small businesses and operates really, really well.

I've spoken to the person who is an administrator on an exchange in another state that is primarily small businesses. And they said the information they get from this group is reasonable, logical and refreshing. And they're moving very quickly.

So I think that's where we need to go. And I think that we need to get these two consumers, two small businesses and we also have to talk about the healthcare advocate.

The Healthcare Advocate's Office is one of the most successful healthcare advocates in the country. And our healthcare advocate is allowed to walk in the room as a nonvoting member. Okay. As a resident and a -- and a consumer of the healthcare advocate, my family -- as my family -- I'm ashamed of that -- and that need to be changed, and she can't have the only consumer vote.

So I thank you for your time. If you have any questions, I'd be happy to answer.

REP. MEGNA: Thank you very much, Kevin, for your testimony. You worked -- you worked on our Small Business Task Force and we appreciate that.

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KEVIN GALVIN: Thank you.

REP. MEGNA: Representative Altobello.

REP. ALTOBELLO: Thank you, Mr. Chairman.

Good afternoon.

KEVIN GALVIN: Thank you.

REP. ALTOBELLO: You mentioned at one time that the Connecticut was right at the edge of the spirit of the -- and at one time you said "preamble" of the bill and another time you said the "regs" --

KEVIN GALVIN: The preamble in -- of the federal regulations.

REP. ALTOBELLO: Uh-huh. Oh, oh.

KEVIN GALVIN: I'm sorry if I -- if I --

REP. ALTOBELLO: so it's the preamble of the federal regulations

KEVIN GALVIN: The federal regs --

REP. ALTOBELLO: -- not the bill itself.

KEVIN GALVIN: -- it's not the bill itself. It was the federal regs that talked about how we should be building our exchange. And we went off the tracks very, very quickly.

REP. ALTOBELLO: Thank you. Thank you, Mr. Chairman.

REP. MEGNA: Thank you.

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Any other -- Senator Crisco.

SENATOR CRISCO: Thank you, Mr. Chairman. I'm just trying to recall, you know, we do -- we review a lot of issues. Last year we had this bill and we adopted in committee. I don't recall hearing any testimony in regards to the composition. Am I missing something or was it all preset?

KEVIN GALVIN: It was pre -- it's my recollection it was preset. But I am not clear -- I am not firm on that.

SENATOR CRISCO: We'll check it out. Thank you.

KEVIN GALVIN: Thank you.

REP. MEGNA: Thank you.

Any other questions?

Thanks a lot, Kevin.

KEVIN GALVIN: Okay. Thank you. Thank you for your time.

REP. MEGNA: Karen Schuessler.

KAREN SCHUESSLER: Good afternoon. My name is Karen Schuessler. And I'm the director of Citizens for Economic Opportunity, which is a coalition of community and labor groups addressing health care reform and corporate responsibility issues.

And I support the concept of 5013, however, the bill does need to be strengthened as so many people said here today. And some of the language needs to be replaced in order to ensure that the Exchange functions as needed,

as marketplaces for affordable coverage that is user friendly and transparent.

And now is the time for real reform and we must get this right. If we are to have an effective health insurance exchange, insurers cannot be in the driver seat. The consumers need to be in the driver's seat. And a few people on the Exchange board have spent years working in the insurance industry. But what we are not hearing are the voices of the people who struggle every day with a system that works better for health insurance companies than it does for consumers.

And here in Connecticut, according to the U.S. census data, nearly 14 percent of Connecticut residents under age 65 or 413,000 people had no health insurance for the entire year in 2009. And it's only logical that so - since so many residents of Connecticut do not have health insurance and since one in ten residents are expected to use the Exchange, they should have input on the Exchange as well as the small businesses. We should allow more on. It can create jobs. It can help the economy.

And Kevin John, a small business owner from West Hartford, sums up the problem this way. "Until recently my business partner and I didn't have health insurance for five years. If health insurance were more affordable, we would be able to grant our key part-time employees full-time status, which would increase productivity."

So we need to change the language in H.B. 5013 to add two members, both representing consumers, and two small business owners, give the state healthcare advocate a vote, have the

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Office of State Ethics have the jurisdiction to enforce any conflict of interests, and as we've heard, the board is interviewing for the CEO position and -- and senior staff positions. So now is the time to act. We cannot wait.

You know, I think by the March meeting we need to have these people at the table. And the CEO should certainly be independent of the insurance industry. They're going to make decisions on what plans are sold in the Exchange, making sure the right benefits are covered, and insuring that the premiums for Exchange plans are reasonable.

And for years -- here's the problem -- I mean, insurance companies and people with ties to the insurance, like CBIA, who is closely aligned with the insurance companies, put profits before people. And it's because of this bad behavior we're in this mess now. So we just -- I mean, people with ties to the insurance industry can have an advisory role on the Exchange board, but they should not be decision makers and they should not be allowed to vote.

So we need to fix this legislation immediately. The consequences are for generations to come. And we certainly cannot turn it over to the very people who opposed and lobbied against health care reform.

REP. MEGNA: Thank you. Thank you.

Representative Sampson.

REP. SAMPSON: Thank you for coming in, Karen.

KAREN SCHUESSLER: Uh-huh.

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REP. SAMPSON: I'm going to ask you the same question, too --

KAREN SCHUESSLER: I want that question. I have the answer.

REP. SAMPSON: Let me give -- let me give you a scene -- a preamble. I'll give you a preamble to the question.

KAREN SCHUESSLER: Okay.

REP. SAMPSON: I -- I don't have a solid thought one way or another on this concept at this point. And I'm really just trying to learn as much about the reasons why people are so desirous of making the changes that you recommend in your testimony and others have as well.

The thing is that the makeup of the board, seems to me, is determined by the requirement that people that are going to be making decisions about the way the Exchange works are people that have background in insurance and decision making with regard to the best way to put products out for people to choose from, and that sort of thing.

I can understand that we want to look out for consumers in every way, shape and form. The thing that I'm missing is I don't know what they bring to the table other than they want premiums to be less.

I mean, I can go back and argue about whether or not we should have the PPA, CBIA, to begin with, if we want to talk about whether our premiums should be less, but the Exchange is one of the things I actually like about the

Affordable Care Act. And I don't really object to insurance company personnel running it. The idea is to put more products available to more consumers.

And I just don't see how -- you know, me sitting on my couch wanting to have my insurance premiums lower has anything to bring to the table to help that happen other than I want premiums to be lower. And that's what I need to hear from somebody. Tell me why an advocate for consumers is going to help.

KAREN SCHUESSLER: Okay. Well, I know there's one person on the Exchange Board whom I've seen quoted in the paper and, you know, radio interviews, that has spoken against the Affordable Care Act, which, you know, has said the exchanges shouldn't be set up or, you know, the federal government will do it. And the quotes are, you know, that consumers want the kitchen sink, we can't give the kitchen sink, the Affordable Care Act is too big, too many taxes, I hope that Washington waters it down, and so that's concerning to me, because that has not worked.

That -- that mindset that we have to put process before people is -- it's like I said in my testimony, that's why -- that's why we've gotten to this mess. And I think the people who struggle through the system are the experts. They can have, you know, input as to, you know, how the system could be strengthened. And we can put people with, you know, who have the vested interest on advisory committees and -- and have their expertise, because they do have something to offer. They do have advice. They - they certainly could have input in an advisory role.

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KAREN SCHUESSLER: Okay. You're welcome.

REP. MEGNA: Thank you.

Representative Altobello.

REP. ALTOBELLO: Good afternoon.

Since the -- as far as I'm aware, the search for the CEO is still active. What does -- and you're recommending in your written testimony that let me read the whole sentence just so - you were paraphrasing as we (inaudible), but the sentence is, "People with ties to the insurance industry could have an advisory role on the Exchange Board but they should not be decision makers or allowed to vote, and they certainly should not be the CEO."

What - what sort of person should this board be looking for as far as the CEO with --

KAREN SCHUESSLER: Someone who -

REP. ALTOBELLO: -- and -- and what -- what exactly do you mean with any kind of ties to the industry?

KAREN SCHUESSLER: Well, it's probably works in the industry or is going to benefit from -- you know, because the CEO is going to have input as to what -- who gets into the exchange and the price -- the premiums that are charged. So it shouldn't be someone who - you know, if you've just come from the industry, I mean, that's who your loyalty is for. You know, it's like -- they should not come right from the industry. And it should be someone who looks out for consumers.

REP. ALTOBELLO: But industry ties is - is a little

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bit broader than someone who just came from the industry.

KAREN SCHUESSLER: Well, it -- I shouldn't have said industry type. I should have said who came from the industry. Yeah, I just think if you've come right from the insurance industry and you become the CEO, that's - that's where your experience is, like, for the past 30 years, that's where your loyalty is. That's who you're going to be beholden to because you know, you make go back to the insurance industry after you leave this position.

REP. ALTOBELLO: How about someone from the insurance department of the State of Connecticut? Would that be an industry tie --

KAREN SCHUESSLER: You know what, I --

REP. ALTOBELLO: -- in your mind?

KAREN SCHUESSLER: I don't know.

REP. ALTOBELLO: Okay.

KAREN SCHUESSLER: You know -- I -- I'm not sure.

REP. ALTOBELLO: All right. It seemed like pretty strong wording in a strong sentence --

KAREN SCHUESSLER: Yeah.

REP. ALTOBELLO: -- so I thought maybe you had had filled in the blanks, but I guess it's a little bit fluid.

March 1st is a pretty ambitious, kind of --

KAREN SCHUESSLER: Yeah. But like I said, I mean, these decisions that are being made now are

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going to be for generations to come, so we do  
need to do it now.

REP. ALTOBELLO: March 1st?

KAREN SCHUESSLER: March 1st. At least it needs to  
be appended to it.

REP. ALTOBELLO: It's possible. It is. Thank you.

Thank you, Mr. Chairman.

REP. MEGNA: You're welcome.

Are there any other questions?

Senator Kelly.

SENATOR KELLY: Thank you very much, Mr. Chairman.

When we talk about consumer representatives,  
would that include patient advocates?

KAREN SCHUESSLER: Yes, it could.

SENATOR KELLY: It could or it would?

KAREN SCHUESSLER: It could.

SENATOR KELLY: But it doesn't necessarily mean  
that.

KAREN SCHUESSLER: No.

SENATOR KELLY: So where would the patient's  
advocate come in?

KAREN SCHUESSLER: I don't know. I'm not sure. I  
don't know.

SENATOR KELLY: Okay. Thank you.

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REP. MEGNA: Thank you.

Any other questions?

Thank you very much, Karen.

Antonio Pinto.

ANTONIO PINTO: Good afternoon. I'm Tony Pinto.  
I'm an independent insurance consultant. I'm  
going to read off my prepared statement.

Honorable elected officials, thank you for the  
opportunity to address you with regards to  
concerns and desires regarding modifying the  
composition of the Health Insurance Exchange  
Board to greater address the needs of the  
citizens of our great state.

House Bill 5013 requests that the composition  
of the Board be increased. That increase  
would be the addition of the state healthcare  
advocate as a voting member and the addition  
of two small business members and two consumer  
advocates as voting members.

In have attended many meetings in health care  
reform. I've submitted comments both directly  
and in cooperation with small business  
advocacy groups.

In attending the Mercer Planning Grant  
presentation some concerns came to light such  
as some of the data not being specific to  
Connecticut and not taking the size of our  
state into consideration. As well as the  
occasional misstatement of data -- they stated  
that we had an individual market maternity  
mandate, which does not exist. So this issue  
is currently passing along the maternity

coverage through our Medicaid system since the only plan that still covers maternity in the individual market has a \$10,000 up front deductible.

The reason for making these points is to emphasize the need for individuals with voting rights on this Exchange. It is very important that those who are most affected by the decisions of the Board be able to participate in the decision making process in order for making appropriate and insightful choices in the Exchange's operations and health plan offerings. The Exchange is not required to be the sole provider of health insurance options. But it should be the entity that provides checks and balances to the health plans that are offered to individuals and small groups within our state.

I cannot emphasize enough how important it is to have individuals from the very small micro enterprises and independent sole proprietors participate on this Board. These are the people creating jobs in our state and risking their own personal assets and reputations to build tomorrow's great companies.

In choosing a CEO for these Exchanges, it's vitally important that the individual be a passionate visionary and understand both the industry and the inner workings in Hartford. And that that person is not afraid to work the many extra hours it will take to get the Exchange operational in time.

In relation to CBIA, the Board should be concerned that they are a fee-based membership organization that spends approximately one-third of its huge revenues lobbying. And it is questionable if lobbyists can actively

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-- actually receive federal funds that are an inherent part of the Exchange.

If individuals and small business owners that are mostly affected by health care reform in the operation of the Exchange have no true voice, we could fail to assist them. This will negatively impact our greatest home grown job creators within our state economy.

Although our current state law states that only consumers be members of the Exchange Board, the intent of the federal law was that consumers have a voice and help in designing these exchanges for the public good.

Finally, in taking the lead from our Governor, it is time for Connecticut to be a leader again and the state that sets the standards that are to be followed by others. Therefore, let us be the leaders in creating the most robust and meaningful exchange in our great country, alongside a competitive, private health insurance marketplace. Let us not be known as the state that sets standards for true incompetence.

REP. MEGNA: Thank you very much for your testimony.

Are there any questions?

No. Thank you very much.

Tom Swan.

Laurie Johnson.

Okay.

LANCE JOHNSON: I don't have my glasses on. My

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name's Johnson but -- sorry.

Good afternoon, Chairman Crisco, Megna,  
ranking members Kelly and Sampson and members  
of the Insurance and Real Estate committee.

My name is Lance Q. Johnson and I'm an AARP  
volunteer from East Hampden, and AARP's lead  
advocate on health care.

On behalf of our nearly 600,000 Connecticut  
members, AARP supports the concept outlined in  
Raised Bill 5013, to expand consumer  
representation on the state Health Insurance  
Exchange Board. The proposal expands  
membership to include a small employer and a  
consumer of specialized health care services  
for disability, chronic illness or special  
needs or of health care services. The  
proposal will also elevate the healthcare  
advocate to a voting board member.

AARP believes the expansion should add more  
than two consumers. An example of an  
additional consumer voice could be someone  
between the ages of 50 and 65 as this age  
group is more likely to have preexisting  
chronic conditions, and will be most affected  
by age based premiums.

We also support adding the consumer  
representatives as soon as possible to ensure  
that consumers have meaningful input into the  
Exchange policies that are decided before  
July 1.

Raised Bill 5013 with our suggested additions  
would provide a logical extension of  
Connecticut's commitment to develop a consumer  
friendly and effective Exchange.

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The last session with your leadership, Connecticut adopted an authorizing legislation for a state health insurance Exchange that included a revolving door provision. That provision is considered one of the strongest ethics requirements in the nation. With our suggested changes to Raised Bill 5013, Connecticut would also have a solid consumer representation on the governing board also.

Additionally, Raised Bill 5013 with our suggestions would remove the potential speed bump in implementation of Connecticut's health insurance exchange by satisfying proposed federal regulations that require a majority of board members who represent consumers' interests.

Recently, questions have been raised as to whether we meet this standard under current law. However, Connecticut could easily achieve the standard by making these changes in Raised Bill 5013 and incorporating our suggestions.

AARP Connecticut strongly supports expanding consumer representation on the Board by expressly designating additional consumer voices and elevating the role of the healthcare advocate.

Thank you for your consideration.

REP. MEGNA: Thank you very much for your testimony.

Are there any questions?

Thank you very much, Lance, not Laurie.

LANCE JOHNSON: Thank you.

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REP. MEGNA: Cheryl Forbes.

CHERYL FORBES: Good afternoon, members of the  
committee.

My name is Cheryl Forbes. I'm the owner and  
managing principle of Harris Forbes Associates  
in West Hartford and I serve as a business  
outreach consultant for small businesses for  
health in Connecticut.

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I'm here today to testify for myself and  
thousands of business -- small business owners  
like me who face the reality and challenge of  
finding affordable, quality health insurance  
for themselves, their families and/or their  
employees. And more specifically, up here  
today to request that you use your power to  
empower the hundreds of thousands of small  
business owners and self-employed persons and  
individual consumers by giving them true  
representation through persons belonging to  
each of those constituent groups with seats on  
Connecticut's Health Insurance Exchange Board.

In the eyes of small business owners and  
consumers the Health Insurance Exchange Board  
is the last best hope for getting access to  
affordable health insurance options that  
provide real benefits and peace of mind. For  
far too long and far too many, this goal has  
been a distant dream.

And in my work in communities all across the  
state, I find the stories are the same. Small  
business owners, the self-employed and  
individual consumers want decent health care  
coverage that they can afford. We've grown  
tired of choosing between outrageous costs,  
dwindling benefits and an ever decreasing pool

of options from which to choose.

As it stands, private insurance for most is unattainable. The offerings through groups such as CBIA are neither easily accessible due to membership fees on top of the health plan costs. Often these plans are not sufficiently comprehensive nor cost-effective for small and micro employers.

You have the power to change this through the insurance -- the Health Insurance Exchange Board. Adding two consumers and two small business representatives to the Board will go a long way towards helping to create coverage options that meet the needs of Connecticut residents.

As members of the Health Exchange Board, small business, consumers, and the Office of the Healthcare Advocate must fully participate in all processes and have immediate voting rights. That's because right now, as has been mentioned before, critical decisions are being made that not only affect the viability of the Exchange but the economic growth and competitiveness of the state.

Now Connecticut is looking to small business to drive the economic recovery and create jobs. Yet small business and consumers expected to fuel this growth has virtually no say in helping to solve one of the biggest barriers to economic success. And this is especially peculiar, as has been mentioned before, because the creation of the Exchange was meant to represent consumers.

Small business, self-employed individuals and consumers, as I said, must be voting members of the Exchange board and fully involved.

As members of the Connecticut General Assembly Insurance and Real Estate committee, you have the power to act. You have the power to empower small business, self-employed individuals and consumers by providing membership on the Exchange Board and allowing them to help create health insurance solutions that will support the physical and economic health of our state. Thank you.

REP. MEGNA: Thank you very much for your testimony.

Senatory Kelly.

SENATOR KELLY: Thank you, Mr. Chairman.

How do we define "consumer"?

CHERYL FORBES: In my mind a consumer is the end user of a product. And that would be anyone who would be looking to purchase and/or use health insurance.

SENATOR KELLY: So under that definition it's somebody who purchases services, the consumer and small business could be the same individual.

CHERYL FORBES: Not necessarily. A small business -- and I'm going to speak from my personal experience as a small business owner.

As a small business you are looking to secure health coverage for yourself as well as for your employees, whereas an individual consumer would only be looking for their needs and their families.

SENATOR KELLY: But the small business is a

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mb/gbr INSURANCE AND REAL ESTATE  
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consumer.

CHERYL FORBES: The small business is a consumer of the product, yes.

SENATOR KELLY: Thank you.

REP. MEGNA: Thank you.

Are there any other questions?

I should point out that there are separate marketplaces, too, between the individual market and the small business market.

CHERYL FORBES: Absolutely.

REP. MEGNA: Yeah. Okay. Thank you very much. Thank you for your testimony.

CHERYL FORBES: Thank you.

REP. MEGNA: James Stirling.

JAMES STIRLING: Thank you, Senators, Representatives. Thank you for serving and representing your districts.

HB 5013

My name is James Stirling. I'm a CEO of Stirling Benefits, Inc. I'm a small business owner. I'm a licensed insurance agent and a member of the Small Business for Healthy Connecticut, and I served on Sustinet, on the Sustinet committee.

You'll hear objections that the Legislature was very specific when setting up the Exchange Board. Yes, and you did a good job setting it up, too. But no legislation is perfect the first time around.

Who is the Exchange Board supposed to serve? The insurance industry? The lobbying groups? No. The Exchange is supposed to serve consumers and small businesses. Strengthening their voice will help make sure that the Exchange is relevant in the market.

You'll hear the objection that it is too late to add new members. The Exchange Board is making decisions and they will be making decisions for years to come, including the role of advocates, navigators, brokers, the types of plans offered, the connectedness to small businesses, the size of businesses in the Exchange and how the Exchange is funded. These difficult choices will require compromises and we need consumers at the table.

You'll hear that a lot of small businesses are not asking for this change. They're not here today. That's because small businesses are in your communities right now trying to make the payroll, trying to create jobs. We have a very open system of government, but it's hard to make time to come up and testify. That's why you'll see the same people around all the time.

You'll hear that adding more people will cost more and slow things down. Quite to the contrary, if consumer needs are met they will be more likely to use the Exchange. Every citizen that uses the Exchange with a federal subsidy may be one less on the DSS support. We all hope the Exchange works for consumers because it has the potential to tap federal money to pay for private insurance. That will reduce the number of people supported by the state of Connecticut. And with secure private insurance, consumers may start a business,

change jobs and stimulate Connecticut's economy and pay more in taxes. The consumer friendly exchange will speed up our recovery and save money.

When a business is designing a product it asks its potential buyers what they want. Business interests are already well represented. The rest of us in the state of Connecticut will benefit from more consumer representation on the Exchange Board.

Thank you very much.

REP. MEGNA: Thank you.

Just listening to the points that are being raised on the committee, and I'm not sure if we actually define who that consumer is. But actually it would be important, I think. I don't know. I want to get your feedback on this, whether these individuals, these two individuals literally are people that, out of their pocket, purchase from the individual market. Should we do that? Should we assure that?

JAMES STIRLING: I think the -- the crafting actual language on who picks those persons or what qualifications they have is less important to me than recognizing the need to represent those who would be actually going to the Exchange, either online or trying to figure out how to purchase insurance and how this will benefit them. The example I'd like to just share is if I want to sell a product to the Latino community and I don't speak Spanish and I don't have any connectedness there, how do I do that?

I need to understand that community in order

to have the successful product launched there. I think it's the same way with the Exchange. If we don't have people who are actually out there going online, ready to purchase, and get their input, the Exchange may not be relevant. And it may not meet the goals of Connecticut. I think of --

REP. MEGNA: But the consumer, shouldn't that be -- I mean we have small business covered in theory, right, on the Exchange. Shouldn't it be an individual purchaser?

JAMES STIRLING: Well, I think if you went to your districts and asked the people at your dry cleaners and at the liquor store, at the gas station, who may not have coverage now and ask them what kind of representation they'd like on the Exchange they'll be able to tell you.

REP. MEGNA: Okay. Okay. Thank you very much.

Representative Sampson.

REP. SAMPSON: Mr. Stirling, thank you for coming in today. And also, thank you for giving me the best answer to my questions thus far, which is that in some way the mechanism of delivery is something that a consumer might have some insight in that might be useful to the Exchange board.

That being said, my original question still remains unanswered. Which is assuming we have consumers, whether they be small business owners or individuals, are suddenly on the Exchange Board, is there any expertise that they can lend to the Board that's going to help craft the way the exchange works and how insurance is delivered? And is there anything else that they can possibly add to the

Speak?

JAMES STIRLING: No, sir. I don't.

REP. SAMPSON: I mean, really, I guess that that's the thing that I'm driving at is I understand that people want to advocate for consumers. So do I. I want to make sure that we have the best possible Exchange. It's not the road I would have taken originally but it's the -- as I said before, it's one of the aspects of the Affordable Care Act that I actually think is good. It's going to be a way to get more insurance products in front of more consumers.

I just don't see how the average guy on the street is going to be able to step into that room and be an engaged member of determining how that is done. The only thing I see is their ability to add a political twist to the thing to advocate for more single payer type products. And that's been my fear from the very beginning.

JAMES STIRLING: You mentioned that you want to make sure that this advocate would not be just there to advocate for a lower price.

REP. SAMPSON: Right.

JAMES STIRLING: And I -- I --

REP. SAMPSON: That adds nothing to the discussion, is my point.

JAMES STIRLING: I completely agree. And the price is the price of the insurance, the Exchange is the nexus to purchase insurance. If you were to have a board when we were going from travel agents to Travelocity and the governance of that was designed by travel agents and people

from the tourist industry, I think you may end up with a different product than if you have one that's market driven.

I want to make sure that the consumer advocates will help so that the people like your dry cleaners and gas stations and the people who are working three jobs have a mechanism where they can go online and find a way to purchase coverage; that the person with three jobs can find a way to get a tax-preferred deduction from each of those employers that are all combined.

I'm concerned that if we don't have that kind of representation on there that people will not be able to use the Exchange effectively and it won't be relevant.

REP. SAMPSON: Okay. Thank you very much. I mean, I respect your answer very much. I would like to believe that that is exactly what would happen, although I suspect it'll be far more political in nature. And that's the point behind this. Thank you very much.

REP. MEGNA: Thank you.

Representative Johnson.

REP. JOHNSON: Thank you, Mr. Chair.

Thank you for your testimony today. Just to follow up on Representative Sampson's point. I'm wondering if we shouldn't give some consideration to people who may be have positions as professors in public health policy. They might be able to shed a different perspective on how to create the Exchange and how to make it so that people really understand what's there.

For example, right now we have -- you may be aware -- we have a Medigap policy that there are 10 or 12 different types of policies. And they're very easy to determine, how much you're going to pay, and exactly what you're going to get when you opt-in to those policies.

My vision is is that we have a similar kind of exchange, a representation in our Exchange, rather, and that people would be able to go online and would be able to discover exactly what it is they want and what the price of that is and have a good, fair representation of those things. What would you recommend in that circumstance? Do you think someone from academia, for example, would be helpful to consider? They are consumers, but they would not quite be in the same way.

JAMES STIRLING: Representative Johnson, I think the question of public health is a separate question from the question of purchasing insurance. The Exchange is -- from my understanding is a marketplace, an efficient, transparent marketplace for purchasing insurance. I think the reason why Medigap policy the A through J policies work so well is that it's same benefits in each of the policies and you can compare on network or price but not -- the benefits are not changed.

In envision an Exchange that's simple like that. And I think the Exchange legislation envisions a tiered policies of platinum, gold, silver and bronze. That those policies could be consistent across all carriers. I think that's the model that we'd like to see built upon. But the actual mechanism, how that's purchased, is one that I think requires a

consumer to say, Yes, this makes sense or these are the languages, we need that website translated in, or these are the nuances that will help us purchase that for those who are very literate with insurance or those who are less so.

So any question of a public policy person potentially. But in terms of public health, I think that's a separate issue than purchasing insurance products.

REP. JOHNSON: Okay. So going back to your Medigap example and mine, how do you think that they arrived at the -- at the Medigap, 10 different types of policies? How did they arrive at that?

JAMES STIRLING: I don't know. But I know it's worked to help consumers purchase and compare across companies and price.

REP. JOHNSON: Thank you. Thank you for your testimony.

REP. MEGNA: Thank you.

Representative Crawford.

REP. CRAWFORD: Thank you, Mr. Chairman.

Mr. Stirling, thank you for your testimony. I'm a little puzzled by one of your comments, though.

You obviously have been very attentive to this entire process as it's come forward. And I'm curious, you said that you didn't think that the language needed to be very specific about who these consumers would be, yet, I think one of the reasons we're here is because the

question?

REP. SCHOFIELD: Thank you, Mr. Chairman.

Pardon me. I'm sorry.

I have not attended any of these meetings and I was listening to your point about there being people with tape over their mouths. Are there no opportunities for input, public audience at these meetings to hear from consumers?

JAMES STIRLING: Representative Schofield, not at the meetings that I've attended. There's a lot of opportunity to sit and listen and there's opportunities for those who are very involved in the process to make sure that they're in the hall to meet the board members and talk about them, what they see, and to help influence their decisions. But I don't see that there's opportunities for the public to come forward. Maybe I've just missed it, but that's my impression.

REP. SCHOFIELD: And is it your sense that the people who are -- and again, I don't know who they are specifically are, but who are on the Board are not sensitive to what consumers would want, that they would not be interested in making sure the product was market driven?

JAMES STIRLING: I don't feel as I'm in a position to answer for people on the Board. I have been to two or three meetings, so I can't speak for members of the Board. But I can speak to the sense that there's many people in the state who need to purchase insurance, want this product to be relevant, want it to be focused on their needs, not just for lower cost, but so that it's accessible, so that

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Interstate 84 between Brookfield and Waterbury, call Representative Scribner. He's got some pull with the DOT.

We'll return to the call of the Calendar.

Mr. Clerk, please call Calendar 76.

THE CLERK:

On Page 38, Calendar 76, substitute for House Bill Number 5271, AN ACT CONCERNING THE SITING COUNCIL. Favorable report by the Committee on Planning and Development.

DEPUTY SPEAKER GODFREY:

Gentleman from the 102nd, Representative Reed.

REP. REED (102nd):

Good afternoon, Mr. Speaker.

DEPUTY SPEAKER GODFREY:

Good afternoon.

REP. REED (102nd):

I move that this oligus body accept the joint committee's favorable report and for passage of the Bill.

DEPUTY SPEAKER GODFREY:

Question is on acceptance and passage. Will you explain the Bill, please madam?

REP. REED (102nd):

Mr. Speaker, this Bill requires that the telecommunications companies provide municipalities many more opportunities for interaction when it comes time to site a cell tower. The Bill extends the pre-application process from 60 days to 90 days; it requires the telecom companies to provide much more substantial and substantive proof as to why a cell tower is needed in such a location and it is a Bill that really brought all the stakeholders to the table and supporters from both sides of the aisle. It impacts all of the state and I thank them for that and I move for passage.

DEPUTY SPEAKER GODFREY:

I thank the distinguished Vice Chairman of the Energy Committee. The distinguished Ranking Member of the Energy Committee, Representative Hoydick.

REP. HOYDICK (120th):

Thank you, Mr. Speaker. A few questions to the proponent of the Bill please, through you?

DEPUTY SPEAKER GODFREY:

Please proceed.

REP. HOYDICK (120th):

Through you, Mr. Speaker, I would appreciate if the kind gentle woman would explain the municipal

participation the count changes, if she would? Thank you, Madam Speaker. Through you.

DEPUTY SPEAKER ORANGE:

Thank you, Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker. I'm very eager to do so. The changes in addition to lengthening the amount of time, also allows municipalities a lot more serious consideration for the sites that they recommend during the whole process. The changes also make it necessary for the telecom companies to provide real data on why these towers are needed in the place where they're proposed and it just in general creates a much more responsive environment and much more interaction between the municipalities and members of the municipalities and the telecom companies. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hoydick.

REP. HOYDICK (120th):

I thank Representative Reed, Madam Speaker and through you, additional questions on this topic. As I understand, the municipal participation account reimburses communities for any costs that they incur

by being involved with the proceedings. And, I know that there were changes that the treasurer spoke of in her testimony, but I'm not exactly sure how that relates with this Bill and would love if Representative Reed would explain it to us all. Thank you.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, the treasurer has been able to monitor and oversee this municipal account and to pay back municipalities for the expenses that they incur. One of the issues had been and had not been really put into statute that often the municipalities were sending in bills while the process was still on-going and sometimes without receipts. So, this codifies the system so that the treasurer will deal with it once the process is over and has all receipts in her hands to be able really add it up and make sure that all of the expenses were incurred and are legitimate. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hoydick.

REP. HOYDICK (120th):

Thank you, Madam Speaker. And, on another topic in the Bill, if the kind gentlewoman would explain, some of the things in this Bill that are similar to last year's Bill with the siting of cell towers near schools and daycares. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. DARGAN (115th):

Through you, Madame Speaker, yes indeed. So, we have included in this Bill as we did last year, essentially a heads up which is to say that the siting council is encouraged to keep cell towers at least 250 feet away from schools or day care centers, child day care centers, unless the municipal leadership determines that they want it there. Again, to be complete about this, the citing council has the final say in this, but again, it's an effort to be much more responsive to communities that would prefer the towers to be at least 250 feet away from these institutions. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hoydick.

REP. HOYDICK (120th):

Thank you, Madam Speaker. And, continuing the questions, there were some real issues with the municipalities with the siting of the cell towers because not only of their possible, but yet, not qualified radiation effects but their aesthetics as well. Is there anything in this Bill that addresses that? Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yes indeed. So, as you know, as the fine Ranking Member on the Energy Committee knows, federal law, the FCC, federal law in the Telecommunications Act of 1996, precludes us from making medical determinations essentially, and anything that is non-proven. However, public safety determinations are something that we have the power to address. So, that's essentially what this does. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hoydick.

REP. HOYDICK (120th):

Thank you, Madam Speaker and I thank the kind gentle woman for all of her answers and stand in

support of this Bill. This application -- the applications through this Bill allow municipality's greater interaction and consultation with the applicants. The municipalities now would have up to 90 days to participate. The applicant is required to use the latest technology as far as aesthetically pleasing and placement and in addition, the municipality has the opportunity if there is another location that they prefer this tower to be on, to propose it to the applicant and they can work collaboratively together. The 250 feet from schools and commercial day care centers is also included and the municipal participation program which allows the treasurer office to expedite payment back to the municipalities after the expense has been incurred and that process will happen within 60 days are all positive things in this Bill and I would like to thank Representative Reed for her efforts on this for the past two years and I encourage my colleagues to support it. Thank you.

DEPUTY SPEAKER ORANGE:

Thank you, madam.

Will you care to remark further on the Bill before us?

Representative Shaban of the 135th, you have the floor, sir.

REP. SHABAN (135th)

Thank you, Madam Speaker. I rise in support of this Bill for many of the same reasons you've just stated.

In my district, as and I'm sure many of yours, the siting of cell towers has become a hot topic for the obvious reasons and there's been a lot of discussion the last couple of years about how much local control should be restored or whether it should be restored or what the siting council should do.

So with the fine work of Representative Reed and Representative Hoydick and others I think this bill is a good first step, a good compromise and all around a good bill. So I rise in support and wish the chamber to support it as well. Thank you.

DEPUTY SPEAKER ORANGE:

Thank you, Sir. Will you care to remark?  
Representative Larry Miller of the 122nd. Good afternoon, Sir. You have the floor.

LARRY MILLER (122nd):

Good afternoon, Madam Speaker. I just have one question to the proponent.

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DEPUTY SPEAKER ORANGE:

Please proceed.

REP. MILLER (122nd):

Thank you, Madam. State land parks and other areas that the State owns, those things are still off limit. Am I correct?

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, they are-- right they're-- through you, Madam Speaker, no, they're off limits.

REP. MILLER (122nd):

Thank you.

DEPUTY SPEAKER ORANGE:

Thank you for that answer. I just wanted to be sure and I wanted it on the record. Thank you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Thank you, Sir. Will you care to remark? Representative Leonard Green, Jr. of the 125<sup>th</sup>. You have the floor, Sir.

REP. GREENE (105th):

Thank you, Madam Speaker. Madam Speaker, through you I have a quick question for the proponent of the bill.

DEPUTY SPEAKER ORANGE:

Please proceed.

REP. GREENE (105th):

Thank you, Madam. Just to get some clarification with the procedure for the siting of a cell tower, I understand that the intent of the bill is to allow for some level of municipal participation. And I know you explained a little bit to Representative Hoydick but I guess my question is, ultimately who has the final authority over the siting of a cell tower? Through you.

SPEAKER DONOVAN:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, the siting council but as we've said from the outset this is an effort to really make the whole process a lot more interactive and, you know, in the final analysis there are always going to be people who are unhappy with the final choices that are made but the siting council did come to the table on this and express their desire to be a

lot more responsive in the whole process. Through you, Madam Speaker.

SPEAKER DONOVAN:

Representative Greene.

REP. GREENE (105th):

Thank you, Madam Speaker. And one last question. I guess just to be clear, does this bill affect anything other than cell towers, power plants for example, et cetera?

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, no.

DEPUTY SPEAKER ORANGE:

Thank you, Madam Speaker. Thank you very much for your responses to the proponent of the bill. I do stand in support of this bill. I know last year there were some concerns with some provisions which is why we're doing it again this year. But this is a great compromise and it's-- reflects some great work by Representative Reed, Representative Nardello, and the rest of the Energy Committee and those involved. So thank you very much. I urge my colleagues to support the bill.

DEPUTY SPEAKER ORANGE:

Thank you, Sir. Will you care to remark further?  
Representative Hetherington of the 125th. Good  
afternoon. You have the floor, Sir.

REP. HETHERINGTON (125th):

Good afternoon, Madam Speaker. Thank you. I'd  
like to direct a question or two to the proponent  
please.

DEPUTY SPEAKER ORANGE:

Please proceed.

REP. HETHERINGTON (125th):

Thank you. If the-- is there an opportunity for  
a municipality to conclude and demonstrate that this  
important from a safety perspective from-- for having  
a cell tower in a particular location? Through you,  
Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yes indeed. This is  
one of the areas where we have a considerable amount  
of say if we can prove that there are public safety  
issues that's something that has to be taken very,  
very seriously. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hetherington.

REP. HETHERINGTON (125th):

And so the siting council would then balance the - the arguments that safety requires a particular cell tower to be located in a particular location, balance that against other considerations, esthetic considerations and so forth? Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yes.

DEPUTY SPEAKER ORANGE:

Representative Hetherington.

REP. HETHERINGTON (125th):

Well, thank you. Through you, Madam Speaker. Wouldn't a determination that safety required cell phone service, wouldn't that trump scenic considerations? Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker. What we've really found in the-- recently, and as I say not everyone is always going to be happy but the siting council has really made an effort to negotiate a little bit more energetically in terms of doing both. So for instance in my district where cell tower is going in on a farm, it's now going in a stealth water tower in an effort to protect the environment and to-- it's along a scenic roadway, so to prevent that from in anyway being defaced.

But again, in that area there was absolute fall out when it came to cell service and as we all witnessed in Irene and Alfred since so many people have transitioned over to mobile phones and mobile devices it becomes even more imperative that that-- that those signals get out. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hetherington.

REP. HETHERINGTON (125th):

So-- thank you. And so safety concerns as evidenced by the lack of cell phone communication in an area would be recognized as a-- as a safety concern? Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yes indeed. And in fact another part of this bill is encouraging the siting council to look at regional choices, regional selections for the positioning of siting towers and-- and so when they add all of those elements together-- in another part of my district, since we had eight towers proposed about two years ago all at once they have determined that perhaps a better regional location is on the border between my town and a fellow town, our next door neighbor. And so it accomplishes both. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hetherington.

REP. HETHERINGTON (125th):

Okay. Thank you. Just one particular-- how did 250 feet come to be concluded as the distance from a school or daycare center? Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker. That was an interesting negotiation and it actually had to do with creating enough room for a-- what you call the fault line and also public safety issues regarding any concerns that might have to do with trucks coming to maintain the towers and that kind of thing. And so 250 feet was determined to be a good distance and a distance that all-- all the components who came to the table could live with quite frankly and make part of the bill. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hetherington.

REP. HETHERINGTON (125th):

Thank you. Thank you, Madam Speaker. I thank the Gentlelady for her answers and thank you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Thank you, Sir. Will you care to remark further on the bill before us? Representative Shaban of the 135th. No? Light's on.

REP. SHABAN (135th):

It is?

DEPUTY SPEAKER ORANGE:

Okay. Representative Camillo of the 151st. You have the floor, Sir.

REP. CAMILLO (151st):

Thank you, Madam Speaker. A question to the Chairwoman of the Energy and--

DEPUTY SPEAKER ORANGE:

Please proceed.

REP. CAMILLO (151st):

Thank you. Representative Reed correctly pointed out that the 1996 Telecommunications Act as well as the Connecticut Siting Council does rarely preclude local control of this issue.

I do believe that this has really gone a long way in doing as much as we can in each of the municipalities in terms of having some say in these matters of the siting of the towers. Through you, Madam Speaker, am I correct that this is really not much more to go as far as local-- exerting some type of local influence on this without being in violation of the siting council and the 1996 laws? Through you.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yes indeed. And it was actually something that we took into great consideration and did not want to get into a federal preemption problem that invites, you know, very pricy lawsuits. And so this was something we really worked out and all of the lawyers are in agreement that we're in good shape here. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Camillo.

REP. CAMILLO (151st):

Thank you, Madam Speaker. I want to thank Representative Reed and Representative Hoydick and the rest of the committee for doing a great job on this. It has passed this House a few time already and last year we-- we got it through to the Governor's Office. Hopefully everything has been taken care of. Again I salute their work on this and urge passage of it. Thank you.

DEPUTY SPEAKER ORANGE:

Thank you, Sir. Will you care to remark further Representative Tony Wong, you have the floor, Sir. Good afternoon.

REP. HWANG (134th):

Thank you, Madam Speaker. Through you a couple questions on this issue to the proponent.

DEPUTY SPEAKER ORANGE:

Please proceed.

TONY HWANG (134th):

Thank you. Through you, one of the questions you had was in regards to the interaction in the public hearing. Are there provisos to allow the-- the neighbors and the people to interact on the manufacturing technology changes? Through you, Madam.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yes.

DEPUTY SPEAKER ORANGE:

Representative.

REP. HWANG (134th):

To what extent would a-- a plaintive in question of an application, how could they interact? Would they be able to submit new technology, new questions, new testimonial in against the supporting organizations? Through you, Ma'am.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yes they can and I should also say in the bill it feels as if this is in the neighborhood that you're speaking of, we also have a proviso that as the technology improves and miniaturizes that that be given priority status when deciding council takes these issues under consideration. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hwang.

REP. HWANG (134th):

Through you, Madam Speaker. I think one of the questions of consideration is the esthetics but would the esthetics account for height restrictions?

Through you, Ma'am.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker, yés. I mean once, as you know, the fine Representative, once one opens the proceedings there is lots of interesting testimony coming from a lot of different directions and if you are bordering the location of the cell towers you certainly probably have a lot to say and-- and all of

these are in consideration as those of us who've experienced this know they fly balloons at the height level to see how much it's going to intrude into the community and a lot of people come out to speak about that and where they saw the balloon and whether it impacted their scenic view and that becomes a conversation. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hwang.

REP. HWANG (134th):

Through you, Madam Speaker. If and when this bill gets approved and is signed into law would the actions that are currently under evaluation right now be applicable to it? Through you, Ma'am.

DEPUTY SPEAKER ORANGE:

Representative Reed.

REP. REED (102nd):

Through you, Madam Speaker. Well I don't think any decisions can be made retroactively once it's implemented but a lot of these things that we've been discussing and the sense that it was on its way are already really being heard by the siting council. They're-- they're very mindful of this. They've obviously participated in it as have the telecom

companies and everybody is very sensitive to what these new rules will be. Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Hwang.

REP. HWANG (134th):

Thank you. Through you, Madam Speaker. I am in support of this legislation and I want to take an extra time to acknowledge the good work of Representative Reed and Representative Hoydick and recognizing the balance that needs to be obtained in regards to this day and age of our utilization of technology that we recognize the importance of being able to have those cell towers but you need to blend that and accommodate and balance with the esthetic needs of communities and of quality of life. So I want to thank you for your time, Ma'am.

DEPUTY SPEAKER ORANGE:

Thank you, Sir. Will you care to remark further on the bill before us? Will you care to remark further on the bill before us? Will you care to remark? If not, staff and guests please come to the well of the House, members take your seats. The machine will be open.

THE CLERK:

The House of Representatives is voting by roll call. Members to the Chamber. The House is taking a roll call vote. Members to the Chamber please.

DEPUTY SPEAKER ORANGE:

Have all-- have all members voted? Have all members voted? Have all members voted? Have all members voted? Please check the board to determine if your vote has been properly cast. If so, the machine will be locked and the Clerk will take a tally. Will the Clerk please announce the tally.

THE CLERK:

House Bill 5271.

Total Number voting	147
Necessary for adoption	74
Those voting Yea	147
Those voting Nay	0
Those absent and not voting	4

DEPUTY SPEAKER ORANGE:

Thank you, Mr. Clerk. The bill passes. Will the Clerk please call calendar number 175.

THE CLERK:

On page six, calendar 175, substitute for House Bill number 5108, AN ACT CONCERNING MODIFICATIONS TO

**S - 649**

**CONNECTICUT  
GENERAL ASSEMBLY  
SENATE**

**PROCEEDINGS  
2012**

**VOL. 55  
PART 14  
4223 - 4505**

rgd/tmj/gdm/gbr  
SENATE

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THE CLERK:

House Bill 5173 as amended by Senate "A."

Total Number Voting	36
Necessary for Adoption	19
<u>Those Voting Yea</u>	<u>36</u>
Those Voting Nay	0
Those Absent and Not Voting	0

THE CHAIR:

Senator Looney.

SENATOR LOONEY:

Yes. Thank you, Madam President.

Would move for immediate transmittal to the House of House  
Bill 5173 as amended in the Senate.

THE CHAIR:

Seeing no objection, so ordered, sir.

SENATOR LOONEY:

Thank you, Madam President.

Madam President, we have some additional items to place  
on the consent calendar at this time.

Madam President, first, is calendar page 14, Calendar 453,  
House Bill 5543; calendar page 14, Calendar 459, House  
Bill 5271.

THE CHAIR:

So ordered, sir -- sorry.

SENATOR LOONEY:

Also, Madam President, calendar page 25, Calendar 530,  
House Bill 5462 and --

THE CHAIR:

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SENATE

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May 9, 2012

(HB 5283)

On page 3, Calendar 240, House Bill 3283; page 3, Calendar 299, House Bill 5437; page 5, Calendar 349, Senate Bill 374; page 6, Calendar 375, House Bill 5440; page 6, 362, House Bill 5011.

On page 7, Calendar 376, House Bill 5279; on page 7, 387, House Bill 5290; on page 8, 394, House Bill 5032; on page 8, 396, House Bill 5230.

Also on page 8, Calendar 398, House Bill 5241; on page 8, Calendar 393, House Bill 5307; on page 9, Calendar 403, House Bill 5087; on page 9, Calendar 406, House Bill 5276; on page 9, 407, House Bill 5484; on page 11, Calendar 424, House Bill 5495; on page 12, Calendar 435, House Bill 5232; on page 13, Calendar 5 -- excuse me Calendar 450, House Bill 5447; on page 14, Calendar 455, House Bill 3 -- I'm sorry -- House Bill 5353.

On page 14, Calendar 453, House Bill 5543; on page 14, Calendar 459, House Bill 5271; on page 15, Calendar 464, House Bill 5344; on page 15, Calendar 465, House Bill 5034; on page 16, Calendar 469, House Bill 5038; on page 17, Calendar 475, House Bill 5550; on page 17, Calendar 474, House Bill 5233; on page 17, Calendar 477, House Bill 5421.

Page 18, 480, House Bill 5258; on page 18, Calendar 479, House Bill 5500; page 18, Calendar 482, House Bill 5106; on page 18, Calendar 483, House Bill 5355; on page 19, Calendar 489, House Bill 5248; on page 19, Calendar 488, House Bill 5321; on page 20, Calendar 496, House Bill 5412.

On page 21, Calendar 504, House Bill 5319; page 21, Calendar 505, House Bill 5328; on page 22, Calendar 508, House Bill 5365; on page 22, Calendar 510, House Bill 5170; on page 23, Calendar 514, House Bill 5540; on page 23, Calendar 517, House Bill 5521.

Page 24, Calendar 521, House Bill 5343; page 24, Calendar 518, House Bill 5298; page 24, Calendar 523, House Bill 5504; page 29, Calendar 355, Senate Bill 418; on page 13, Calendar 444, 5037; and Calendar 507, House Bill 5467.

THE CHAIR:

Senator -- Senator Suzio.

SENATOR SUZIO:



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ERNEST J. COTNOIR  
ASSISTANT SENATE CLERK

TIMOTHY B. KEHOE  
PERMANENT ASSISTANT  
CLERK OF THE SENATE

Bills placed on the Consent Calendar on May 9, 2012

5358  
5148  
5394  
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- 5233
- 5550
- 5258
- 5106
- 5355
- 5521
- 5248
- 5412
- 5319
- 5328
- 5365
- 5170
- 55440
- 5521
- 5298
- 5343
- 5504
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- 5467
- 5022
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- 5360



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Bills from Senate Agenda Number 3 from the May 9th Senate Session that were placed on the Consent Calendar

HB5304  
HB 5342

rgd/tmj/gdm/gbr  
SENATE

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Good evening, Madam President.

I just want to clarify. I thought I heard the Clerk call House Bill 5034? Is that on the consent calendar?

THE CHAIR:

Do you know what page that is, sir?

SENATOR SUZIO:

No I -- he was reading so fast, Madam, I couldn't get it.

THE CHAIR:

It's -- yes it's 53 -- I don't know.

SENATOR SUZIO:

5034.

THE CHAIR:

5034, yes sir.

SENATOR SUZIO:

I object to that being put on the consent calendar, Madam President.

THE CHAIR:

Okay, that will be removed.

Senator Looney.

SENATOR LOONEY:

Thank you, Madam President.

Yes, just seeing that -- ask to remove that item from the consent calendar.

THE CHAIR:

So ordered.

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At this time we'll call a roll call vote on the consent calendar.

Mr. Clerk.

THE CLERK:

Immediate roll call has been ordered in the Senate.  
Senators please return to the Chamber. Immediate roll call has been ordered in the Senate.

THE CHAIR:

Senator Coleman, we need your vote, sir.

Senator Kissel, Senator Kissel. Senator Kissel, will you vote on the consent calendar please?

All members have voted?

If all members have voted, the machine will be closed.

Mr. Clerk, will you call the amendment -- I meant the tally.

THE CLERK:

On today's consent calendar.

Total Number Voting	36
Necessary for Adoption	19
Those Voting Yea	36
Those Voting Nay	0
Those Absent and Not Voting	0

THE CHAIR:

The consent calendar has passed.

Senator Looney.

SENATOR LOONEY:

Thank you, Madam President.

Madam President, I believe the Clerk is in possession of Senate Agenda Number 6 for today's session.