

ONE HUNDRED THIRTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
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WASHINGTON, DC 20515-6115
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July 1, 2014

The Honorable Monica J. Lindeen
Commissioner
Montana Securities and Insurance
840 Helena Avenue
Helena, MT 59601

Dear Commissioner Lindeen:

Thank you for appearing before the Subcommittee on Health on Thursday, June 12, 2014, to testify at the hearing entitled "The President's Health Care Law Does Not Equal Health Care Access."

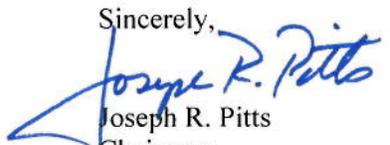
Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

Also attached are Member requests made during the hearing. The format of your responses to these requests should follow the same format as your responses to the additional questions for the record.

To facilitate the printing of the hearing record, please respond to these questions and requests with a transmittal letter by the close of business on Wednesday, July 16, 2014. Your responses should be mailed to Sydne Harwick, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to Sydne.Harwick@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,


Joseph R. Pitts
Chairman
Subcommittee on Health

cc: The Honorable Frank Pallone, Jr., Ranking Member, Subcommittee on Health

Attachments

Attachment 1—Additional Questions for the Record

The Honorable Michael C. Burgess

1. In plan year 2014, Montana had three carriers in your exchange in 2014. As you look at plans that will be offered in 2015, how are you ensuring that plans have an adequate number of physicians in each specialty, or subspecialty? And what do you consider “reasonable access” for non-urgent care?
2. Are you seeing plans narrow their networks further for plan year 2015?
3. One issue that has been raised to me is that it does not appear insurance plans differentiate sub-specialties when evaluating a specialty area. For example, in Dermatology CMS recognizes six sub-specialties, one of which is Mohs surgery, which is used to treat skin cancer. How do you ensure enough subspecialty providers are in a network and how do you certify they are adequately trained to provide the subspecialty service?
4. There is a trend for insurance companies to acquire hospitals and clinics to provide medical services for their enrollees. How would such an arrangement affect MLR calculations?

The Honorable Jim Matheson

1. You come from a large rural state, much like mine. I am concerned about accounts I have read about the narrowing of provider networks that is occurring and how that might impact patients access to care. While this would likely be more acute in states like ours, I know that it is not just limited to rural states. When you think specifically about the unique needs of rare disease patients and the challenges associated with accessing care, particularly specialists, you can understand that this could be a big problem for these patients. What are you doing in your capacity as Insurance Commissioner to ensure that these patients are not left out in the cold when so few treatment options are available to them from the start?

Attachment 2—Member Requests for the Record

During the hearing, Members asked you to provide additional information for the record and you indicated that you would provide that information. For your convenience, descriptions of the requested information are provided below.

The Honorable Michael C. Burgess

1. What happens when an insurance company buys a doctor group? Do those administrative costs then just get automatically transferred to the clinical side because a doctor group has been purchased now by a health plan?

The Honorable Lois Capps

1. Have you done anything that has been working to broaden the networks that you could share?

The Honorable Gene Green

1. Would you provide the committee with some specific changes or reforms you would recommend making to the ACA to improve the law?