November 12, 2020

By now, you are likely familiar with the article in Tuesday’s New York Times. We are disappointed in the article, and it is regrettable that it is full of inaccuracies and innuendo. Among other things, the article suggests that Murphy Medical Associates has billed patients for Covid testing and follow up services. This is false. Murphy Medical Associates has not billed a single patient for any of the testing services provided since the beginning of this pandemic. It is Murphy Medical Associates’ expectation that the patients’ health plans are responsible for paying for these medically necessary services and care.

We are confident that the tests we run to identify the novel coronavirus are appropriate and, indeed, best meet the appropriate standard of care. From time to time, we run patient samples on the BioFire Respiratory 2.1 panel (https://www.biofiredx.com/covid-19/), a comprehensive panel that tests for 21 respiratory pathogens, including SARS-COV-2. Because this panel tests for 21 separate pathogens, it is indeed more expensive to insurers than a "Covid only" test. It is unfortunate and extremely upsetting that the article fails to discuss our medical reasoning for this comprehensive testing strategy and the myriad benefits that patients derive from the BioFire panel. Our rationale for using the BioFire is set forth in detail in the lawsuit we commenced against Cigna (which is only briefly referred to in the article). The same testing criteria, equipment and methodologies are used for all patients -- including those without insurance.

Most significantly, there is no fraud or malfeasance here, and we are fully committed to being transparent with you and the tens of thousands of patients that we have tested and cared for during this pandemic. We are in the process of reviewing and updating our website and registration materials to better communicate our testing services and process to patients. Specifically, we have added pricing information and optionality for the type of test patients may elect to receive. Unfortunately, this article detracts from the important work and vital healthcare services our incredibly hard-working clinicians and staff have provided to our partner communities in Connecticut and New York, particularly those underserved areas that need access to reliable testing services the most.

Respectfully,

Dr. Steven A.R. Murphy