

## TESTIMONY OF CONNECTICUT HOSPITAL ASSOCIATION SUBMITTED TO THE PUBLIC HEALTH COMMITTEE Tuesday, March 20, 2018

## HB 5292, An Act Requiring A Study Of The Licensure Of Birthing Centers

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **HB 5292**, **An Act Requiring A Study Of The Licensure Of Birthing Centers**.

Before commenting on the bill, it's important to point out that Connecticut hospitals provide high quality care for everyone, regardless of their ability to pay. Connecticut hospitals are dynamic, complex organizations that are continually working to find innovative ways to better serve patients and communities and build a healthier Connecticut. By investing in the future of Connecticut's hospitals, we will strengthen our healthcare system and our economy, put communities to work, and deliver affordable care that Connecticut families deserve.

HB 5292 requires the Department of Public Health (DPH) to study the feasibility and potential advantages of licensing birthing centers.

CHA is perplexed at why a new classification of birthing center is needed, given that Connecticut already has a licensure category for maternity hospitals, through which birthing centers are licensed and operating in Connecticut. This has been the case for many years. We are not aware of any specific reason that the existing licensure category is insufficient.

We are mindful of the limited resources that DPH has at its disposal to attend to its many core functions. This study would certainly require an additional outlay of expertise, manpower, and time. At the same time, we understand the need to be open to the exploration of new care delivery models that might better serve all of Connecticut's patients.

Any study of a new care model, particularly for this type of high-risk and heavy overhead area of care, should have clear parameters for review. Specifically, at a minimum, the following elements should be made part of the charge to DPH for inclusion in the study: patient safety, quality of care, potential negative impact on existing care options, alignment with the state's healthcare facility planning, and accessibility for patients at all insurance levels, including the Medicaid population.

Additionally, any study should include formal input from necessary stakeholders, including hospitals, physicians, patients, the Department of Social Services, insurers, and other relevant entities.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.