



**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
PUBLIC HEALTH COMMITTEE  
Monday, March 13, 2023**

**HB 6733, An Act Concerning The Department Of Public Health's  
Recommendations Regarding Various Revisions To The Public Health Statutes**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **HB 6733, An Act Concerning The Department Of Public Health's Recommendations Regarding Various Revisions To The Public Health Statutes**. CHA supports the bill but has significant opposition to certain sections of the bill as outlined below.

Connecticut hospitals continue to meet the challenges posed by the COVID-19 pandemic and are now facing new challenges of treating sicker patients than they saw before the pandemic, with a dedicated but smaller workforce who are exemplary but exhausted. They are also experiencing significant financial hardships brought on by record inflation. Through it all, hospitals have been steadfast, providing high-quality care for everyone who walks through their doors, regardless of ability to pay.

HB 6733 makes several revisions to the public health statutes. CHA is providing comments on Sections 7, 8, and 14 and also requests that the Committee add a provision to the bill related to aligning Connecticut regulations with Joint Commission standards.

**CHA opposes the provision within Section 7 that permits only the name of the service operating the vehicle on the sides of it.** This new provision would require changes to ambulances already in service and hinders the true public disclosure to patients of all parties involved.

**CHA respectfully requests that the Committee clarify the language within Section 8 so that the definition of "blood collection facility" exempts hospitals licensed by the state, similar to the provision exempting clinical laboratories.** Under the current proposed definition, hospitals would be required to register and become licensed with the department as a blood collection facility or cease these important activities.

**We ask that Section 14 be deleted from the bill.** This proposed language permits the department to make changes to the data and method of data collection from any healthcare facility at any time and at any frequency without any input from the facility and without any consideration of the financial and staff resources necessary to complete the work. CHA and its member hospitals have been an integral part of the data collection and submittal for the state's response to COVID-19, the recent surge in pediatric illness, as well as the overall state's response to behavioral health. While we understand the importance of the role that data plays in response, those efforts were done in partnership with the state with considerable input from both CHA and those within the hospitals responsible for the data collection effort. Further, specific federal privacy rules found in HIPAA that distinguish between "public health activities" and "required by law disclosures" are not supported by the approach in Section 14. CHA would like to continue our work in partnership with the state and urge the rejection of the language within Section 14 that provides the department with unchecked authority to ask for any and all information in any format at any time, in a manner that is not consistent with the specificity required by federal privacy laws.

**CHA respectfully requests the addition of the following language** that would update Public Health Regulations governing "short term hospitals, general and special" (19-13-D3) to align with standards set by The Joint Commission and the CMS Medicare Conditions of Participation for Hospitals regarding the timing of the appointment and reappointment of the medical staff. We understand that DPH is not opposed to this alignment.

Specifically, we request that Public Health regulation section 19-13-D3(b)(1)(B) be updated and replaced through the following statutory language change:

NEW. Appointment of the medical staff or individual medical staff members of a hospital may be biennial or triennial, consistent with both CMS regulations and The Joint Commission standards. The department shall update section 19-13-D3 of regulations of Connecticut state agencies to reflect this change.

For reference, this is the current language used in Public Health Code regulation section 19-13-D3(b)(1)(B): *The hospital shall be managed by a governing board whose duties shall include, as a minimum: [...] (B) annual or biennial appointment of the medical staff.*

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