



State of Connecticut

GENERAL ASSEMBLY

STATE CAPITOL

HARTFORD, CONNECTICUT 06106-1591

May 12, 2016

Lt. Governor Nancy Wyman
Certificate of Need Task Force
300 Capitol Avenue
Hartford, Connecticut 06106

RE: Certificate of Need Hearing Process

Dear Lt. Governor Wyman,

This is a request for the Certificate of Need Taskforce to address how the Office of Health Care Access (OHCA) deals with reductions in access to health care services. Representatives Johnson, Haddad and Orange and Senators Flexer and Osten have been working on this issue since June of 2015.

Our regional delegation represents House and Senate Districts in the Windham Community Memorial Hospital (WCMH) area. WCMH is a private nonprofit hospital affiliated with Hartford Health Care (HHC). Last summer the Chief Executive Officer (CEO) of WCMH proposed reducing, changing and eliminating several of the services it provides. The proposal to eliminate or change the Critical Care Unit (CCU) also described as the Intensive Care Unit (ICU) to a Progressive Care Unit (PCU) would change how emergency and surgical services would be provided at WCMH.

The WCMH doctors voted unanimously against making the change from a CCU to a PCU in their monthly "Division of Medicine" meeting precisely for safety reasons. Medical doctors and nurses at WCMH stated on several occasions that a change in this type of specialty core service would cause doctors to have to resort to the services of other hospitals that have fully operational CCUs. When a fully operational CCU isn't available emergency services and some surgical procedures may be more safely provided in a hospital that has those services according to the doctors and nurses who contacted us at the informal public forums that were held during the summer of 2015.

Late in the summer of 2015, WCMH wrote to the OHCA advising them of the changes the hospital was planning to make. OHCA wrote back stating that a CON Hearing was not necessary because the WCMH changes were reductions in services not an elimination of a specialty service. Once that determination was announced in a WCMH press release many professional providers among others in the Windham area wrote to OHCA asking for a review of the determination. All of the arguments for a CON hearing can be read on the Department of Public Health website. There were numerous communications from community members including a petition with approximately 3,000 signatures and approximately 2,500 notes of support all delivered to OHCA. Despite all of the requests made by medical providers and community members OHCA refused to conduct a CON hearing. The existing statute was interpreted very narrowly. The analysis done by OHCA did not consider whether the new PCU would cause any safety issues for those being treated at WCMH.

Based on the unfair and negative experience of the Windham region we were very pleased with Raised Bill 5211 which was introduced in the Public Health committee this year. This legislation addressed the situation the Windham area was faced with when the WCMH CEO made dramatic changes to services at our hospital.

We would like to suggest the following to ensure a better, fairer and more open process in any such situation:

1. We propose that the trigger for a CON be whenever the provider has a 25% or greater projected decrease in services that are considered to be "core services." These core services should include critical care services or progressive care services in the list of core or specialty services. The time period should be between 24 months and 5 years before an additional 25% decrease in the same service is allowed.
2. Public notice to the community in the hospital catchment area of the proposed decrease in services should be provided. Three community organizations or individuals in the catchment area should have a right to request a CON hearing on the proposed reduction of core specialty services.
3. Require public notice of proposed changes in a substantially circulated newspaper.
4. An OHCA determination that indicates a CON is not needed should be subject to superior court appeal pursuant to 19a-641 as amended.
5. Finally, many of the doctors in the Windham area were concerned about patient safety because of the hospital administration's proposed reductions in the CCU. California requires hospitals that plan reductions in the level of emergency services to provide notice and also an impact evaluation report from the county where the hospital is located. In the Windham instance, Emergency Medical Service transportation availability was not given consideration. The language in this session's House Bill 5211 requires such consideration.

There may be other considerations an impact statement might address like language barriers, patient mix, cost shifting and patient safety, none of which were considered by OHCA when they allowed WCMH to make these changes. Our proposed substitute language to the Public Health Committee's legislation this session would include a review by the licensing division of the Department of Public Health. This review would assure the public including area clinical providers that the proposed reductions in services will not pose a threat to public health and safety.

Please see attached copies of the proposed legislation from this session and some of the testimony.

Thank you so much for your help with this very important issue affecting the people of eastern Connecticut.

Respectfully Submitted,



Representative Susan Johnson



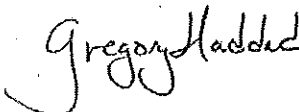
Senator Mae Flexer



Representative Linda Orange



Senator Cathy Osten



Representative Gregory Haddad