



UNIVERSAL HEALTH CARE
FOUNDATION OF CONNECTICUT

Testimony in Support of

House Bill 6035: An Act Concerning the Requirements for Certificates of Need

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Universal Health Care Foundation of Connecticut

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Universal Health Care Foundation of Connecticut supports House Bill 6035: An Act Concerning the Requirements for Certificates of Need. It is worth mentioning that the Foundation also supports two bills that relate to this bill – Senate Bill 248: An Act Concerning Certificate of Need for Reduction of Services at a Hospital (which is being heard today), and the Governor's Bill 795: An Act Establishing the Office of Health Strategy and Improving the Certificate of Need Program (which I assume the Public Health Committee will hear at a later date).

Consolidation in the state's hospital system has been a concern of the Foundation, particularly as it relates to the impact on cost, access to, and quality of care for everyday people. We have been engaged in monitoring a number of hospital-related CON hearings in the past few years. We also issued a report on the topic in December 2014.

We have weighed in on behalf of consumers in the proposed Tenet takeover of Waterbury, Bristol, Manchester and Rockville hospitals; the Prospect Medical Holdings purchase of Waterbury, Manchester and Rockville hospitals; and Yale New Haven Health System's acquisition of Lawrence & Memorial.

This bill was raised as a result of the direct experience Windham area residents had as a result of Hartford HealthCare's unilateral decision to "downgrade" (i.e. reduce) Windham Hospital's critical care unit and the Office of Health Care Access (OHCA) decision to allow the reduction in services without a Certificate of Need (CON) hearing.

As a Willimantic resident, health care advocate, Windham Town Council member and board chair of the local federally qualified health center, Generations Family Health Center, I experienced firsthand the inequity of this situation. I believe that the legislature should take action to beef up the public accountability for hospitals in such situations and allow the communities affected by such decisions to have a voice in the process.

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The Foundation acknowledges that hospitals are operating in a shifting landscape – some of it out of their control and some of it of their own making. The fiscal challenges they face are real, but that should not exempt them from working with the communities that they serve, striving to meet local public health needs and being held accountable.

When a hospital serves a community that has significant economic challenges – and that is already in a medically underserved part of the state – it is crucial that decisions regarding reduction of hospital services be given a full public vetting. In the Windham Hospital case, Hartford HealthCare did an abysmal job of engaging local officials, the community at-large and even the nurses and doctors working at the hospital. In fact, the hospital's doctors registered a vote of no confidence in Hartford HealthCare's decision.

Despite several hundred people showing up at a community forum to raise concerns about this reduction in services, serious concerns raised by the local medical community, and several thousand petition signatures presented to the DPH commissioner, OHCA declined to trigger the CON process. It seems the rationale for such a decision was that this was a reduction in services, rather than a clear elimination of services, which would have triggered a CON review.

The Windham Hospital experience provides a cautionary tale that could be avoided in other situations throughout the state, if the legislature takes action. There should be a trigger for CON hearings for reduction of critical hospital services – and there should be a clear avenue for the community affected by such decisions to formally have their voice heard.

Thank you for your serious consideration of this important public health issue.