The Connecticut Hospital Association (CHA) appreciates the opportunity to submit testimony concerning HB 5977, An Act Requiring Prompt Disclosure Of Children's Medical Test Results To Parents. CHA opposes the bill as written.

HB 5977 has a laudable goal – to speed information to parents when children have had lab tests. Unfortunately, HB 5977 would unintentionally interfere with federal rules for reporting lab test results, including safety-based lab result reporting priorities. HB 5977 would also conflict with various federal and state privacy and access protections for minors.

Although Section 20-7c of the General Statutes includes some rules about lab reporting processes, there are numerous other laws and accreditation requirements for labs that are carefully designed to ensure patient safety, including federal oversight through the Clinical Laboratory Improvement Amendments (CLIA), which are elaborate federal rules that the labs must follow.

CLIA, a complex set of quality-based rules for non-research labs, is enforced by the federal Department of Health and Human Services (HHS) through its sub-agencies: the Centers for Medicare & Medicaid Services and the Food and Drug Administration. HHS has proposed a rule change that will effectively mandate direct patient access to lab tests. When this rule becomes federal law, any state law that requires a physician be present before test results can be given, including as set forth in HB 5977, will be void and will no longer apply. Thus, CHA is concerned that HB 5977 would only confuse providers because it will soon contradict (and will be rendered void by) this anticipated federal rule change.

Additionally, HB 5977 would have the effect of forcing labs to prioritize certain lab results ahead of others. Such an approach is unwise, and conflicts with federal lab standards. CLIA and other laboratory rules dictate specific processes that mandate labs to report “critical” medical test results ahead of other results to allow patients and practitioners time to act immediately if necessary when lab results indicate an urgent problem. Existing processes also allow ordering practitioners to put a rush on lab tests that are most critical. The priority system is designed for maximum patient safety; importantly, it is focused on critical values and does not give priority merely because the patient is a child.
HB 5977 also does not appear to incorporate various privacy rights specifically granted to minors by federal and state laws that encourage younger patients to seek treatment by promising them a degree of personal privacy. For example, federal law extends more rights to minors, allowing them to control whether parents are involved in their care for family planning issues and substance abuse referral and treatment, among other conditions. As it is written, HB 5977 would conflict with these well-established rights, and would confuse providers about the legally correct course of action to take when reporting test results. For these reasons, we oppose HB 5977.

We appreciate your consideration of our position.

For additional information, contact CHA Government Relations at (203) 294-7310.