



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
PUBLIC HEALTH COMMITTEE
Friday, February 28, 2014**

**SB 36, An Act Concerning The Governor's Recommendations To Improve
Access To Health Care**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 36, An Act Concerning The Governor's Recommendations To Improve Access To Health Care**. CHA supports the bill as written.

Before commenting on the bill, it's important to detail the critical role hospitals play in the health and quality of life of our communities. All of our lives have, in some way, been touched by a hospital: through the birth of a child, a life saved by prompt action in an emergency room, or the compassionate end-of-life care for someone we love. Or perhaps our son, daughter, husband, wife, or friend works for, or is a volunteer at, a Connecticut hospital.

Hospitals treat everyone who comes through their doors 24 hours a day, regardless of ability to pay. In 2012, Connecticut hospitals provided nearly \$225 million in free services for those who could not afford to pay.

Connecticut hospitals are committed to initiatives that improve access to safe, equitable, high-quality care. They are ensuring that safety is reinforced as the most important focus—the foundation on which all hospital work is done. Connecticut hospitals launched the first statewide initiative in the country to become high reliability organizations, creating cultures with a relentless focus on safety and a goal to eliminate all preventable harm. This program is saving lives.

Providing culturally competent care, eliminating disparities, and achieving health equity are also priorities of Connecticut hospitals. The CHA Diversity Collaborative, a first-in-the-nation program to achieve these goals, has been recognized as a national model.

Generations of Connecticut families have trusted Connecticut hospitals to provide care we can count on.

As the Committee may know, the scope of practice for APRNs was reviewed during the recently completed Department of Public Health scope of practice review process. CHA was pleased to participate in the Review Committee and encourages the Public Health Committee to use the findings and conclusions identified within the Department's report, *An Act Concerning the Department of Public Health's Oversight Responsibilities Relating to the Scope of Practice Determinations: Scope of Practice Review Committee Report on Advanced Practice Registered Nurses*.

SB 36 seeks to eliminate the requirement of a collaborative agreement for Advanced Practice Registered Nurses (APRNs) with three or more years of licensure. APRNs with less than three years of licensure would still be required to maintain a collaborative agreement with a licensed physician. During the Scope of Practice Review Committee process, numerous studies demonstrating that APRNs provide safe, high-quality care were reviewed. More importantly, evidence provided by other states indicates that the removal of the required collaborative agreement creates an environment in which APRNs are able to expand current practice and explore other options for delivering primary care services.

CHA supports the bill, as it facilitates flexibility in the access to and provision of care across the continuum. However, unless corresponding changes are made to the way in which the Medicaid program reimburses providers for the types of primary care services delivered by APRNs, the effect of the bill will be nullified. Currently, DSS refuses to reimburse hospital-based services provided by APRNs, including services provided in clinics, affiliated practices, and within the hospital itself, unless a collaborative agreement is in place and a physician specifically approves the services. Those limitations mean that without altering DSS policy, SB 36 will not change how APRNs are able to function in hospital-based settings.

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