



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
PUBLIC HEALTH COMMITTEE
WEDNESDAY, FEBRUARY 24, 2016**

HB 5264, An Act Concerning Accessibility Of Medical Diagnostic Equipment

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **HB 5264, An Act Concerning Accessibility Of Medical Diagnostic Equipment**. CHA opposes the bill as written.

Before commenting on the bill, it's important to point out that Connecticut hospitals provide core healthcare services to all of the people in Connecticut, 24 hours a day, regardless of ability to pay. Connecticut hospitals offer safe, accessible, equitable, affordable, patient-centered care that protects and improves peoples' lives.

HB 5264 attempts to address an important issue: access to diagnostic care for persons with disabilities. CHA strongly supports the concept of improving care for this vulnerable population, who are often unable to access certain care modalities as easily as those without disabilities.

But the bill's approach is premature and overly broad. Generally, the bill seeks to convert federal guidance and a federal Board's committee report to mandatory law in Connecticut, even though the report is considered guidance and is not currently mandated under federal law, for a variety of reasons.

Specifically, the bill seeks to have the findings of the Architectural and Transportation Barriers Compliance Board (today more commonly known as the U.S. Access Board) adopted as regulation in Connecticut. The report by the U.S. Access Board's committee is primarily technical assistance. It includes specifications for design of medical devices and facility structures to better accommodate the use of a variety of diagnostic equipment by adults with disabilities. The report and the technical guidance are excellent resources that have a very real and immediate place in planning and design of more accessible approaches to diagnostic equipment generally. But they are not recommendations required to be implemented directly at a regulatory level. *We expect any later-made requirements adopted by the federal government will likely be different than the report recommendations.*

Mandating compliance at the state level before federal rules have been fully vetted and promulgated would be a potentially costly misstep, and would risk the unintended consequence of setting Connecticut off on the wrong path.

In addition, DPH would need to hire an individual with the specialized expertise in this area to develop these standards.

It would be far more useful to patients and providers in Connecticut to establish a working group to share solutions, ideas, and implementation strategies, and to be able to gather peers together to review literature, planning, resources, and legal access requirements that will help establish best practice solutions to meet the challenges at hand. If we take a cooperative approach, Connecticut can lead in this area through smart change and, if federal mandates are eventually imposed, Connecticut will be well positioned to move forward.

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