



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
PUBLIC HEALTH COMMITTEE
Wednesday, February 28, 2018**

SB 166, An Act Adding Amniotic Fluid Embolism To The List Of Adverse Events A Hospital Is Required To Report To The Department Of Public Health

SB 167, An Act Concerning The Reporting Of Adverse Events By Hospitals And Outpatient Surgical Facilities

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 166, An Act Adding Amniotic Fluid Embolism To The List Of Adverse Events A Hospital Is Required To Report To The Department Of Public Health**, and **SB 167, An Act Concerning The Reporting Of Adverse Events By Hospitals And Outpatient Surgical Facilities**. CHA opposes these bills.

Before commenting on the bills, it's important to point out that Connecticut hospitals provide high quality care for everyone, regardless of their ability to pay. Connecticut hospitals are dynamic, complex organizations that are continually working to find innovative ways to better serve patients and communities and build a healthier Connecticut. They are developing integrated delivery networks with physicians, services, and technology to make sure patients receive high quality, coordinated, cost-effective, patient focused, and equitable care. By investing in the future of Connecticut's hospitals, we will strengthen our healthcare system and our economy, put communities to work, and deliver affordable care that Connecticut families deserve.

Connecticut adopted its current adverse event reporting system in 2004, and is the second state in the nation to adopt such a system based on the NQF list of serious reportable events. As described in the Department of Public Health (DPH) report in the year following its adoption, the "NQF list of 27 serious reportable events was developed at the request of the Agency for Healthcare Research and Quality (AHRQ) and the Centers for Medicare and Medicaid Services (CMS) in order to establish agreement about the types and definitions of *usually preventable adverse events*" (emphasis added).

SB 166 and SB 167 propose to make changes to Connecticut's adverse event reporting system. SB 166 seeks to add amniotic fluid embolism to the list of adverse events hospitals and outpatient surgical facilities are required to report to DPH.

SB 167 seeks to allow DPH to impose disciplinary action against a hospital or outpatient surgical facility for failure to report an adverse event.

SB 166 would inappropriately add amniotic fluid embolism to the list of reportable events. As tragic as these events are, they are not thought by medical experts to be preventable. Reporting these events through the adverse event reporting system would give an incorrect picture of the situation, making it seem that hospitals were not providing appropriate medical care by failing to prevent these unpreventable events.

CHA appreciates that public health authorities and medical researchers would like to track these instances for research and public health improvement purposes in hopes that medical experts can better find ways to address them in the future. CHA supports that effort, and looks forward to working with DPH and other stakeholders to establish a process for collecting those data in a way that does not skew the results of adverse event reporting system.

SB 167 seeks to punish providers for failing to report adverse events. CHA is unaware of any concerns by DPH that providers are not reporting properly. In fact, DPH and the reporting facilities are often in close contact about episodes of care to determine if a report is appropriate. The adverse event reporting system is not designed to be punitive; it is designed for quality improvement. Threatening to fine providers for not reporting will result in incorrect over reporting, which does not serve the goal of quality improvement.

We ask that you oppose SB 166 and SB 167.

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