



**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
PUBLIC HEALTH COMMITTEE  
Monday, March 9, 2020**

**SB 78, An Act Concerning The Department Of Public Health's Recommendations  
Regarding The Clean Indoor Air Act**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 78, An Act Concerning The Department Of Public Health's Recommendations Regarding The Clean Indoor Air Act**. CHA supports strong tobacco-control measures, whether it be through municipal ordinances, workplace policies, or state and federal laws. As such, CHA supports SB 78 and respectfully requests that the bill be amended to clarify the definition of "*electronic nicotine delivery system*."

Before commenting on this bill, it is important to point out that Connecticut hospitals and health systems provide high quality care for everyone, regardless of their ability to pay, and work to improve the health of those who live in our communities. Supporting Connecticut's hospitals strengthens our healthcare system and our economy.

In 2019, under the leadership of this Committee, the state of Connecticut passed a law that raised the legal age to buy tobacco products from 18 to 21. CHA and its member hospitals were supportive of that proposal and commend the General Assembly and the Governor for their leadership on that issue. Similarly, CHA looks forward to working with state policymakers to ensure that any proposed tobacco-control bill achieves the goals of improving the health and well-being of Connecticut residents, while ensuring that there are no unintended consequences to healthcare providers or patients.

SB 78 would make several changes to the state's clean indoor air act. Among other provisions, the bill would prohibit smoking in previously exempt areas, including: in psychiatric facilities, in all areas of a school or its grounds; in hotels/motels; and in correction facilities. The bill would also create a 'no-smoke zone' within twenty five feet of any door, window or air intake vent and would eliminate the exemption to the clean indoor air act for those employers with fewer than five employees.

CHA respectfully requests that you consider amending the definitions of *electronic nicotine delivery system* (lines 113 and 259) to avoid interference with the use of nebulizers and other medicines and therapies.

Section 21a-415 of the General Statutes contains a carve-out for medical devices and therapeutic products. We request that language be included in any proposed legislation that defines banned devices or substances. The suggested language is below:

*"Electronic nicotine delivery system" does not include a medicinal or therapeutic product that is (A) used by a licensed healthcare provider to treat a patient in a healthcare setting, (B) used by a patient, as prescribed or directed by a licensed healthcare provider in any setting, or (C) any drug or device, as defined in the federal Food, Drug and Cosmetic Act, 21 USC 321, as amended from time to time, any combination product, as described in said Act, 21 USC 353(g), as amended from time to time, or any biological product, as described in 42 USC 262, as amended from time to time, and 21 CFR 600.3, as amended from time to time, authorized for sale by the United States Food and Drug Administration;"*

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