The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning HB 6298, An Act Concerning Accessibility Of Medical Diagnostic Equipment. CHA opposes this bill as drafted.

Before commenting on this bill, it is important to acknowledge that, since early 2020, Connecticut's hospitals and health systems have been at the center of the global public health emergency, acting as the critical partner in the state’s response to COVID-19. Hospitals expanded critical care capacity, stood up countless community COVID-19 testing locations, and are a critical component of the vaccine distribution plan. Through it all, hospitals and health systems have continued to provide high-quality care for everyone, regardless of ability to pay.

HB 6298 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.

The bill seeks to convert federal guidance, a federal board’s committee report, and related voluntary federal rules designed to assist with technical specifications into mandatory law in Connecticut. This despite the guidance and rules not being mandated under federal law.

Specifically, the bill seeks to have the findings of the Architectural and Transportation Barriers Compliance Board (today more commonly known as the Access Board) adopted as regulation in Connecticut. The Access Board’s purpose is primarily to provide technical assistance, not mandates. 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, technical guidance, and technical rules 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 mandates required to be implemented by providers. The Access Board’s own guidance materials make this clear: “As issued by the Board, the standards are not mandatory on health care providers and equipment manufacturers.¹"

Mandating compliance with technical guidance is a costly misstep, and would set Connecticut on the wrong path. The better course is to remain aligned with federal law.

In addition, the Department of Public Health 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 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.

¹ https://www.access-board.gov/mde/