



**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
PUBLIC HEALTH COMMITTEE  
Monday, March 29, 2021**

**SB 1083, An Act Concerning Various Revisions To The Public Health Statutes**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 1083, An Act Concerning Various Revisions To The Public Health Statutes**. CHA requests the following modifications to the bill.

SB 1083 makes various revisions to the public health statutes. CHA requests a modification to Section 7 and inclusion of two amendments to the bill.

CHA understands that there is legislative interest in addressing the notification process for the burial and cremation of a child who is delivered stillborn, as provided for in Section 7 of the bill.

CHA would like to request modifications to the language included in Section 7 so that the final proposed language reads as follows:

*Sec. 7. (NEW) (Effective July 1, 2021) A hospital shall notify the mother of a stillborn child of the burial and cremation arrangement options for such child (1) when practicable, upon admission to the hospital if the mother expects to deliver a stillborn child, or (2) if notification is not practicable upon admission or the mother did not expect to deliver a stillborn child, not less than twenty-four hours after the delivery of the stillborn child if a provider responsible for the mother's care agrees it is appropriate to share the notice with the mother. Nothing herein shall prohibit a provider, or the hospital, from providing such notification to a family member or friend consistent with the privacy provisions of the Health Insurance Portability Accountability Act of 1996. The mother shall inform the hospital, in writing, of her decision regarding the burial or cremation arrangements for her stillborn child at any time during hospitalization and prior to discharge, provided the mother shall have a minimum of twenty-four hours after receipt of the written notification from the hospital to inform the hospital in writing of such decision.*

In addition to the modifications to Section 7, CHA would like to also request the following two amendments be added to the bill.

The first amendment concerns an issue that has been identified by hospital patients regarding marriage licenses.

From time to time, hospital patients are unable, due to medical reasons, to appear in person at a registrar's office to obtain a marriage license. Our amendment seeks to provide some relief to these patients by requiring registrars to make all reasonable efforts to accommodate a patient in this unique circumstance. Current statute is silent on making the accommodation and is sometimes interpreted by registrars as requiring application to be made in person at the registrar's office. The amendment will provide additional clarity to registrars and the public as to what is permitted.

To effectuate this clarification, please add the following new section to the bill:

Section 46b-25 of the general statutes is repealed and the following is substituted in lieu thereof:

*No license may be issued by the registrar until both persons have appeared before the registrar and made application for a license. The registrar shall take all reasonable steps to accommodate a person who is unable to appear at the registrar's office due to medical reasons that render such person confined to a medical facility. Such person who is unable to appear shall provide and attest to the registrar the reasons they are unable to appear. The registrar shall issue a license to any two persons eligible to marry under this chapter. The license shall be completed in its entirety, dated, signed and sworn to by each applicant and shall state each applicant's name, age, race, birthplace, residence, whether single, widowed or divorced and whether under the supervision or control of a conservator or guardian. The Social Security numbers of both persons shall be recorded in the "administrative purposes" section of the license. If the license is signed and sworn to by the applicants on different dates, the later date shall be deemed the date of application.*

The second item addresses an issue concerning discharge planning. As you know, there is an increasing use of electronic health records, and the existing Department of Public Health regulations have not been updated to account for the new processes involved with the movement from paper to electronic records. As a result, CHA would ask the Committee to amend the current statute related to discharge planning.

Specifically, please add the following new section to the bill, as an amendment to section 19a-504c to include a NEW subsection (f) that is:

*(f) Written discharge materials referenced in this section may include electronic-only versions, and acknowledgement of any such written discharge materials may be documented through electronic means.*

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