



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
PUBLIC HEALTH COMMITTEE
Monday, March 6, 2023**

SB 1074, An Act Requiring Long-Term Care Facility Residents To Undergo A Criminal History And Sexual Offender Registry Search

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 1074, An Act Requiring Long-Term Care Facility Residents To Undergo A Criminal History And Sexual Offender Registry Search**. CHA offers comments on the bill.

Connecticut hospitals continue to meet the challenges posed by the COVID-19 pandemic and are now facing new challenges of treating sicker patients than they saw before the pandemic, with a dedicated but smaller workforce who are exemplary but exhausted. They are also experiencing significant financial hardships brought on by record inflation. Through it all, hospitals have been steadfast, providing high-quality care for everyone who walks through their doors, regardless of ability to pay.

One of the many lessons learned during the COVID-19 pandemic was that each provider within the healthcare continuum is interconnected in a much more significant way than we may have ever believed. While we understand the intent of SB 1074 is to provide a safer environment for the employees working within our state's long-term care facilities, we have concerns that the approach contained within the bill may significantly delay the discharge of patients from hospitals. We understand that the background checks outlined in the bill can take weeks to process, which would leave a patient stuck in a hospital bed, while no longer needing hospital level care.

Today, hospitals face delays in the timely discharge of patients to long-term care facilities due to significant prior authorization processes from insurance companies and limited available staffed beds in nursing homes (due to the staffing challenges impacting the entire healthcare continuum). In addition, we have been working diligently with the long-term care provider associations and the Department of Social Services to try to address the very significant concern of zero available or limited, adequate post-acute care placements for patients with complicated healthcare needs who no longer belong in the hospital. Given these existing challenges, requiring the completion of a background check for all admissions would create significant discharge delays for all those needing post-acute placement.

We urge the Committee to look at alternative approaches to achieve the same goal, perhaps requiring a self-disclosure from the patient or family, which would not unduly delay routine discharges from hospitals. We would be happy to work with the Committee and our partners in the long-term care associations on this important issue.

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