



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
JUDICIARY COMMITTEE
Monday, March 4, 2024**

SB 214, An Act Consolidating Statutory Provisions Relating To Reproductive Health Care Services And Gender-Affirming Health Care Services

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 214, An Act Consolidating Statutory Provisions Relating To Reproductive Health Care Services And Gender-Affirming Health Care Services**. CHA supports the bill but requests technical changes.

Connecticut hospitals are critical to their communities. They are confronting the challenges posed by a post-pandemic healthcare system with an exemplary healthcare workforce that continues to provide outstanding care. But challenges remain. Hospitals are treating sicker patients, it continues to be challenging to hire and retain staff, and the financial headwinds are grave. Through it all, hospitals are steadfast, providing high-quality 24-hour care for everyone who walks through their doors, focusing on making Connecticut's healthcare system more equitable, and driving world-class innovation right here in Connecticut.

SB 214 seeks to consolidate statutory provisions that protect reproductive healthcare information and gender-affirming care information into fewer statutes. This change will reduce confusion, which in turn is likely to improve understanding and compliance with the laws. At its core, these are technical changes.

CHA supports the bill as part of the state's efforts to protect patient rights.

To further reduce confusion in this rapidly developing area of law, CHA requests that the Committee consider the following revisions to the bill language specific to Section 52-146w of the Connecticut General Statutes (Section 2 of SB 214).

Using LCO number 1074, Section 2 as the framework:

- At line 55, after "covered entity" insert "or business associate"
- At line 57, after "covered entity" insert "or business associate"
- At line 58, after "entity" insert "or business associate"
- At line 74, after "covered entity" insert "or business associate"
- At line 76, after "covered entity" insert "or business associate"

Adding this language at lines 55, 57, 58, 74, and 76 will clarify that both covered entities (currently required in the law) and their business associates (silent in current law, creating a potential gap) must observe the legal protections for reproductive and gender-affirming care when responding to a subpoena. CHA believes that this approach aligns with HIPAA, making this essentially a technical change.

Allowing confusion to persist potentially creates a loophole that subpoenaing lawyers could use, intentionally or accidentally, to obtain private patient records through the subpoena process. Our suggested revisions will close the loophole.

CHA urges the Committee **not to make corresponding changes to lines 67 or 79** (i.e., do not add business associate after “covered entity” at line 67 or 79) for the reasons described below.

- No change should be made to line 67 because that would mandate that business associates have direct communication with patients without regard to their obligations set forth in business associate agreements, which is not appropriate or allowed in many situations
- No change should be made to line 79 because it would make no sense. In line 79, “covered entity” is used to define the type of patient. Business associates do not have patients

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