Good morning Senator Murphy, Representative Feltman, and members of the Public Health Committee. My name is Carrie Brady and I am Vice President of Patient Care and Regulatory Services at the Connecticut Hospital Association (CHA). CHA appreciates the opportunity to testify in support of three bills before the Committee this morning.

CHA supports SB 167, An Act Concerning The Purchase, Storage And Distribution Of Flu And Pneumococcal Vaccines, which adds flu and pneumococcal vaccines to the vaccines purchased and distributed by the state for Connecticut residents, and applauds the Committee for introducing this important bill. On average there are 22,000 Connecticut patients hospitalized with pneumonia annually and another 300 hospitalized with influenza. Vaccinations can reduce the incidence of flu and pneumonia and reduce the severity of symptoms in patients who contract flu or pneumonia.

Unfortunately, many people who should be vaccinated are not. In order to facilitate widespread vaccinations, CHA respectfully recommends that the Committee add a provision to the bill that will allow hospitals to develop policies approved by the medical staff indicating that all patients meeting certain criteria will receive the vaccines, rather than requiring individual physicians to order the vaccine for each individual patient. This type of policy is often referred to as a “standing order” and changes the presumption from requiring the physician to order the vaccine for a specific patient to requiring the physician to indicate that the vaccine should not be given. Under standing orders, patients are carefully screened for contraindications and patients can decline vaccination.

The federal Centers for Medicare and Medicaid Services (CMS) specifically encourages hospitals to provide flu and pneumonia vaccinations through the use of standing orders, because there is evidence that standing orders increase vaccinations. CMS is using pneumococcal vaccination rates as one of its ten measures to assess the quality of hospital care. Connecticut hospitals, like many hospitals nationwide, have experienced difficulty in getting physicians to order vaccinations while patients are in the hospital and
pneumococcal vaccination rates from reporting Connecticut hospitals for July 2002- June 2003 ranged from 0% to a high of only 68%. Connecticut hospitals are working with CHA and Qualidigm to improve these rates, but Connecticut’s prohibition on the use of standing orders is a significant barrier to improvement, as hospitals must rely on each individual physician to order the vaccine.

Ironically, although a nurse cannot administer a vaccination based on a standing order in a hospital, flu and pneumonia shots are offered in many locations such as grocery stores without a physician reviewing the medical history or health status of the people receiving the shots. In those locations, nurses screen patients based on a questionnaire and verbal interaction and then administer the vaccine if there are no contraindications. The nurses administering the vaccine have no prior interaction with the patient. By contrast, in hospitals, the clinical conditions of the patients are continually monitored and their medical histories are well known. We respectfully request that the Committee facilitate vaccinations in hospitals by allowing standing orders for pneumococcal and flu vaccines.

CHA supports SB 357, An Act Concerning Childhood Obesity, which would require health care providers to calculate a body mass index (BMI) during physicals required for public school enrollment and screen for diabetes when the BMI exceeds a certain level, and require schools to provide healthy food and beverage choices and opportunities for physical activity. Obesity is an increasing problem among children and adolescents, which is alarming given the association between obesity and many serious conditions, including cardiovascular disease (the leading cause of death in Connecticut) and diabetes. According to the Centers for Disease Control, obesity rates since 1980 have doubled among children and tripled among adolescents, with approximately 15% of children and adolescents ages 6-19 considered overweight. SB 357 may help to reverse this trend by reinforcing healthy habits in schools, providing the Department of Public Health with comprehensive statewide information about obesity patterns, and facilitating early identification of obesity, diabetes and other health problems.

CHA supports HB 5407, An Act Concerning Notice Of Organ Donation, which clarifies that individuals who have authorized organ donation during their drivers’ license application process do not need to sign the copy of the organ donation card imprinted on the back of the drivers’ license in order for the donation to be valid. Organ donation saves lives but many people who later become eligible donors have never considered organ donation. For those individuals who have expressed a desire to donate organs, the state should keep the process simple and eliminate any unnecessary technicalities.

Thank you for your consideration of our position.

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