

**TESTIMONY  
OF  
R. CHRISTOPHER HARTLEY  
SENIOR VICE PRESIDENT  
SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
PUBLIC HEALTH COMMITTEE  
Tuesday, March 25, 2003**

**SB 1148, An Act Concerning Outpatient Surgical Facilities**

My name is Robert C. Hartley and I am Senior Vice President of Saint Francis Hospital and Medical Center in Hartford, Connecticut.

I appreciate the opportunity to testify on **SB 1148, An Act Concerning Outpatient Surgical Facilities**, which I support. SB 1148 would require outpatient surgical facilities using specified levels of sedation or anesthesia to obtain a license from the Department of Public Health (DPH) and a Certificate of Need (CON) from the Office of Health Care Access (OHCA).

As you know, all acute care hospitals in Connecticut are licensed by DPH. In addition to oversight by DPH, hospitals are regulated by OHCA and must obtain a CON for any new functions or services or for major capital expenditures, including those related to outpatient surgery performed in the hospital or in any affiliated outpatient surgical facility.

Entities that are not hospitals, but which provide the same surgical services as hospitals, should be subject to the same level of quality and regulatory oversight as hospitals. DPH and OHCA, in their respective regulatory roles, each play a critical part in healthcare access, health system planning, and quality oversight in Connecticut. Patients who undergo surgery in an outpatient setting that includes the use of moderate or deep sedation or anesthesia have the right to expect that their surgery will take place in a properly equipped surgical facility that has been licensed by DPH and approved by OHCA, regardless of where it is, who owns it, or how it is structured. SB 1148 would accomplish this by correcting the present situation that allows certain outpatient surgical facilities to escape the rigorous level of quality and regulatory oversight that applies to hospital-owned surgical facilities. Such oversight is even more critical given the passage of the new patient privacy regulations at the federal level and the heightened emphasis on patient safety and the avoidance of medical errors demonstrated last session by the Connecticut General Assembly.

This bill also would assist in addressing the unfair economic environment that the current differing levels of regulation produce. The outpatient surgical facilities that presently avoid DPH licensure and OHCA approval are able to avoid the costs and resource commitments associated with the increased level of regulation of surgical services that

hospitals face. In addition, while hospitals serve patients regardless of their payor source or ability to pay, many non-hospital surgical facilities do not.

As a major tertiary teaching hospital that serves as a safety net for a large Medicaid population, Saint Francis Hospital and Medical Center does all it can to provide high quality healthcare to all of its patients regardless of their ability to pay. Consequently, Saint Francis Hospital and Medical Center experiences significant losses in providing services to its Medicaid patients and the uninsured. Any diversion of patients who have the ability to pay for their services away from Saint Francis Hospital and Medical Center would threaten to severely inhibit our ability to continue to provide access to many of the poorest citizens of our service area.

As the State of Connecticut is the primary payor source for most of these poor citizens, the state should do everything possible to ensure that all parties providing outpatient surgical services meet their obligations to this population.

For the good of all surgical patients in Connecticut, all outpatient surgical facilities that perform similar services should be subject to equal regulatory oversight. Please support SB 1148.

Thank you for your consideration of my comments.