



**TESTIMONY  
OF  
CAROLYN BRADY  
VICE PRESIDENT, PATIENT CARE AND REGULATORY SERVICES  
CONNECTICUT HOSPITAL ASSOCIATION  
PUBLIC HEALTH COMMITTEE  
Tuesday, March 25, 2003**

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

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 of the Connecticut Hospital Association (CHA). CHA appreciates the opportunity to come before the Committee today to testify in support of **SB 1148, An Act Concerning Outpatient Surgical Facilities**.

CHA supports SB 1148, which 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). If passed, SB 1148 would resolve a critical situation affecting Connecticut patients. Consumers have a right to expect that the state exercises the same oversight over all entities providing ambulatory surgery services, but current oversight is not consistent. Although all hospitals in Connecticut are licensed by DPH and regulated by OHCA, some ambulatory surgical facilities providing the same services are not regulated by either agency.

Entities that are not hospitals, but provide the same surgical services as hospitals, should be subject to the same level of quality and regulatory oversight as hospitals. DPH and OHCA each play a critical part in healthcare access, health system planning, and quality oversight in Connecticut. In order for DPH and OHCA to make appropriate health planning decisions, it is important for the agencies to have complete and consistent information about all entities providing the same services. Before offering a new service, hospitals must demonstrate (through the CON process) a community need for the service and non-hospital entities providing similar services should also demonstrate community need for expanded services. DPH licensure also is necessary to ensure that all surgical facilities are subject to the same regulatory standards and oversight.

Patients who undergo surgery in an outpatient setting with use of moderate or deep sedation or anesthesia have the right to know 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.

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

Thank you for your consideration of our position.