



Thursday, March 24, 2016

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#### Reader Note: Combined Update and Government Relations Update

Due to the Easter holiday and the legislative schedule at the Capitol, this week we are combining the *CHA Update* newsletter and the *Government Relations Update* newsletter.

#### Session Called to Address Budget Deficit; CHA Launches New Ads



The Senate and House will meet in session on Tuesday, March 29, 2016, to debate and vote on a deficit mitigation plan that will close an estimated shortfall of \$220 million this fiscal year.

At time of publication, the three deficit mitigation plans offered by the Governor and Republican and Democratic Caucuses did not include any additional cuts to hospitals. The Republican plan also calls for the release of Medicaid reimbursement funds restored during the Special Session in December and currently owed to hospitals. Both Democrats and Republicans in the Human Services Committee unanimously supported **HB 5588, An Act Concerning The Timing Of Payments From Supplemental Inpatient Payment Pools For Short-Term General Hospitals**. HB 5588 would make it clear that payments from DSS are due to hospitals quarterly and are to include the federal share estimated as part of the budget. The measure would also allow hospitals to offset tax payments due to the state if DSS does not make payments to hospitals as outlined in HB 5588.

Lawmakers have committed to closing the \$220 million deficit by March 31; meanwhile Gov. Dannel Malloy has ordered \$79 million in emergency cuts aimed mainly at social service agencies and education.

Lawmakers face another hurdle after they close this year's budget hole, however. The state is estimating a \$900 million deficit in the 2016-17 budget.

CHA continues its advocacy to protect hospitals from cuts and taxes, and this week launches two new TV ads. You can view them by clicking [here](#) and [here](#).

#### CHA Provides Testimony on Hospital-Related Bill

On Monday, March 21 CHA provided testimony to the Judiciary Committee in [opposition](#) to **SB 457, An Act Concerning A Cause Of Action For Injury To Person Or Property Based On Negligent Infliction Of Emotional Distress**.

SB 457 would create a statutory cause of action for negligent infliction of emotional distress. CHA testified that SB 457 would conflict with, and confuse, existing common law and case-made legal rights.

#### Public Health Committee Releases Bills



On Monday, March 21, the Public Health Committee met and released a number of bills of interest to hospitals. Specifically, the Committee voted to release with a Joint Favorable (JF) report the following bill:

**HB 5451, An Act Concerning The Department Of Public Health's Recommendations For Various Revisions To The Office Of Health Care Access Statutes**. HB 5451 makes several changes to the Office of Health Care Access (OHCA) statutes. CHA opposes Section 12, which significantly lowers the standard by which OHCA may impose a civil penalty for failure to file seek Certificate of Need approval, as required by section 19a-638.

The Committee voted to release with a Joint Favorable Substitute (JFS) the following bills:

**SB 289, An Act Concerning Health Care Services**, a bill that makes minor substantive changes to PA 15-146 and clarifies a provision related to oxygen-related patient care activities in hospitals. CHA supports SB 289 and will work with the Chairs of the Public Health Committee to add other CHA-supported changes to PA 15-146.

**SB 351, An Act Concerning Matters Affecting Physicians And Hospitals**, a bill that makes several changes to the laws impacting hospitals, healthcare, and physicians. CHA will work with the Chairs of the Public Health Committee to address several concerns CHA has with the bill as currently drafted.

**SB 352, An Act Concerning Prescriptions For And The Dispensing Of Opioid Antagonists**, a bill that would permit prescribing practitioners to issue a standing order to pharmacists to permit them to dispense an opioid antagonist in a nasal form to a person without a patient-specific prescription.

**SB 353, An Act Concerning Opioid Abuse**, a bill that includes an array of measures intended to achieve a multi-sector collaboration of care delivery, which will positively impact access to care by adding another referral route, in addition to the existing substance abuse program and provider resources and tools, to help patients in this at-risk population.

**HB 5264, An Act Concerning Accessibility Of Medical Diagnostic Equipment**, a bill that would require medical diagnostic equipment purchased by healthcare facilities to meet technical standards for accessibility. CHA will work with the Chairs of the Public Health Committee to address several concerns CHA has with the bill as currently drafted.

**HB 5454, An Act Concerning The Connecticut Health And Educational Facilities Authority**, a bill that would expand the eligibility for financing of certain projects for community hospitals, and would require the establishment of a self-sufficiency standard for determining eligibility for financing of community hospital projects.

**HB 5537, An Act Concerning Various Revisions To The Public Health Statutes**. HB 5537 is DPH's annual bill that makes various changes to public health statutes.

Also on Monday, the Judiciary Committee met and released with a JFS report **SB 247, An Act Concerning A Cause Of Action For Loss Of Consortium By A Minor Child With Respect To The Death Of A Parent**, a bill opposed by CHA that seeks to codify an opinion of the Connecticut Supreme Court related to the establishment of a cause of action for loss of consortium by a minor child.

Summaries of the redrafted/amended bills released with a JFS report will be reported on once the language for these bills is made available.

### Reporting Deadlines Met

Several Committees met their Joint Favorable (JF) Deadlines this week.

On Monday, March 21, the Planning and Development and Education Committees met their JF Deadlines. On Tuesday, March 22, the Commerce and Human Services Committees met their JF Deadlines. On Wednesday, March 23, the Government Administration and Elections and Public Health Committees met their JF Deadlines, and today, March 24, the Energy and Technology Committee met its JF Deadline.

The JF Deadline is the day by which each committee must take action on bills or resolutions for further consideration by other committees or the full General Assembly. The Judiciary, Appropriations and Finance, and Revenue and Bonding Committees will meet their JF Deadlines next week.

### American Cancer Society Includes Hospitals in Lobby Day



On March 30, 2016, the American Cancer Society: Cancer Action Network (ACSCAN) will hold its annual Lobby Day at the Capitol. As it has in the past, ACSCAN's advocacy will focus on opposing the proposal to transfer \$12 million from the state's Tobacco & Health Trust Fund – the primary source of funding for all tobacco control programs in Connecticut, including Medicaid coverage of tobacco cessation services – into the state's general fund.

In addition, ACSCAN continues to express concern about the hospital tax and the state's decision to cut and withhold Medicaid reimbursement. As part of its lobbying efforts, ACSCAN will voice its support for hospitals.

ACSCAN, the not-for-profit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. ACSCAN works to encourage elected officials and candidates to make cancer a top national priority. For questions about ACSCAN lobby day, please contact [Natalie Shurtleff](#).

### First Connecticut Case of Zika Confirmed at DPH Lab



The State Department of Public Health (DPH) announced on March 18 that the first case of Zika virus in Connecticut has been detected by its state laboratory.

According to DPH, the patient was 60-69 years of age, had traveled to a Zika-affected area, and began feeling ill the day he/she returned to Connecticut in early March. The patient's symptoms included a skin rash, conjunctivitis, fatigue, chills, headache, and muscle aches. The patient has been seen by a physician and is recovering.

The state began testing for the Zika virus on February 29th at the DPH laboratory.

To date, 258 cases of Zika have been reported in 34 states and the District of Columbia. None of the Zika cases diagnosed so far in the U.S. originated from mosquitos here; all originated either from travel or from sexual activity with exposed travelers. In Connecticut, 198 samples have been received for testing, and 67 results have been received. This case is the first positive test in Connecticut.

"I would urge all pregnant women, women who plan to become pregnant and their sexual partners to avoid travel to affected countries, and if they must, to be vigilant. As we have previously said, a confirmed case was never a question of 'if,' but 'when.' Because of the preparatory steps we've taken previously, we are able to test more quickly and in-state," DPH Commissioner Raul Pino, MD, MPH, said. "With hundreds of positive cases nationwide, across 34 states, I encourage residents to be vigilant. We at the state level are monitoring this case – and preparing for any future cases – with the utmost diligence."

[Information on the Zika virus](#), including affected countries, is available from the U.S. Centers for Disease Control and Prevention.

### CHA Annual Meeting Awards - Deadline Extended



The CHA Annual Meeting awards deadline has been extended to 5:00 p.m. on Wednesday, March 30, 2016.

The presentation of the awards is an important part of the CHA Annual Meeting and a valuable opportunity to showcase Connecticut hospital and staff achievements. Award applications/nominations are linked below.



The 2016 John D. Thompson Award for Excellence in the Delivery of Healthcare Through the Use of Data recognizes outstanding achievement in patient care quality initiatives. It is sponsored by CHA's education and research affiliate, the Connecticut Healthcare Research and Education Foundation (CHREF). All CHA acute care and other hospital members are encouraged to apply. Note: There is a two-year period of ineligibility for previous

John D. Thompson Award winners. Click [here](#) for an application.

The 2016 Connecticut's Hospital Community Service Award is an excellent opportunity for recognition of outstanding achievements in community service. The award is sponsored jointly by CHA and the Connecticut Department of Public Health (DPH). Note: There is a three-year period of ineligibility for previous Community Service Award winners. Click [here](#) for an application.

CHA's Healthcare Heroes Awards celebrate the invaluable contributions of healthcare workers, both to their field and to the community at large. CHA is seeking nominations from both direct patient care and nonclinical areas of CHA member facilities. Ten healthcare heroes, selected by a panel of judges, will be awarded a \$100 cash prize. Click [here](#) for an application.

All entries must be received by Wednesday, March 30, 2016. Winners will be honored at the CHA Annual Meeting on Tuesday, June 28, 2016.

## Education Updates

### 2016 CHA Regulatory Compliance Conference

Wednesday, April 6, 2016

9:00 a.m. - 3:45 p.m.

[View Brochure](#) | [Event Registration](#)

Join us for CHA's Regulatory Compliance Conference, which will feature the keynote presentation "Lessons Learned: Hospitals. Hacktivists. Hindsight." This presentation by Daniel Nigrin, MD, Senior Vice President and Chief Information Officer, Division of Endocrinology, Boston Children's Hospital, and Assistant Professor of Pediatrics, Harvard Medical School, will describe the recent experience of Boston Children's following a hacktivist attack. Following Dr. Nigrin's keynote address and continuing the theme of privacy and security, attorney Jennifer Cox, Cox & Osowiecki, will present a session on "Patient Access in the Electronic World." Additionally, attorneys from Wiggin and Dana and Yale-New Haven Hospital will share information on the use of personal recording devices by patients, providers, and visitors, as well as cover the new rulings on employees and social media rights. The Conference will conclude with a presentation on e-discovery by Kristen Connors, Carmody Torrance Sandak & Hennessey, on the type of information potentially available to jurors regarding Facebook posts made by plaintiffs or defendants.

This Conference is specifically designed for compliance officers, risk managers, in-house legal counsel, and others interested in privacy, security, and the impact of social media. Continuing education credits will be awarded.

### Basics of Budgeting for Healthcare Managers

Friday, April 8, 2016

9:00 a.m. - 3:00 p.m.

[View Brochure](#) | [Event Registration](#)

Many healthcare department managers have traditionally risen from the professional ranks as successful clinicians or technicians but with little or no formal business financial training. As a result, many are thrust into a chaotic environment without the necessary tools in financial management. Skills in planning and budgeting are essential if they are to achieve the institution's mission and contribute to "bottom line" results, particularly in an environment of chronic federal and state underfunding. In a very real sense, these represent survival skills for both managers and organizations. This member-requested management development program provides managers with the skills and tools they need to prepare better budgets, identify problems and solutions, achieve the mission, and succeed in today's volatile healthcare environment. Participants will gain a working knowledge of operating and capital budgets, as part of developing performance planning skills.

Continuing education credits will be awarded. Please see the brochure for details.

### HRO Worker Safety and Worker Engagement

Wednesday, April 13, 2016

9:00 a.m. - 12:00 p.m.

[Event Registration](#)

Steve Kreiser, HPI, will teach this course and share some of the practices that high reliability organizations can use to incorporate worker safety into their curriculum. There are a number of HPI customers who have taken this next step, and we will hear how some of them have done it.

### HRO Leadership Method Training

Thursday, April 14, 2016

9:00 a.m.- 4:15 p.m.

[Event Registration](#)

Leadership Method Training is for organizations that are new to high reliability or for new management employees in organizations that are already on the high reliability journey. Both hospital and ambulatory organization leadership practices will be addressed. The leadership session is designed to teach your hospital or ambulatory leaders the concepts of high reliability science and behaviors. The sessions are structured for leaders at the manager level and above. Medicine, Nursing, Quality, and Radiology continuing education credits are being offered for these sessions.

### Creating Sustainability for High Reliability Organizations

Friday, April 15, 2016

9:00 a.m. - 12:15 p.m.

[Event Registration](#)

This session is designed for drivers of change in your organization and covers techniques to ensure the changes resulting from high reliability approaches are ongoing. Medicine, Nursing, and Quality continuing education credits are offered for this session.

**HRO Safety Coach Training**

Friday, April 15, 2016  
1:00 p.m. - 4:15 p.m.

[Event Registration](#)

Safety Coaches are peer mentors, designed to recognize and acknowledge good high reliability behavior and to remind people about opportunities to improve behavior that does not stay true to high reliability concepts. Medicine, Nursing, and Quality continuing education credits are offered for this session.

**Cross Cultural Diversity and Inclusiveness Training - Four-Hour Session for Clinical Providers**

Monday, April 18, 2016  
8:30 a.m. - 12:30 p.m.

This program is being held at the Connecticut Institute for Primary Care Innovation (CIPCI) in Hartford.

[View Brochure](#) | [Event Registration](#)

In partnership with the Hispanic Health Council, the Saint Francis Center for Health Equity, and the Connecticut Association of Healthcare Executives, CHA is pleased to offer Cross Cultural Diversity and Inclusiveness Training—Four-Hour Session for Clinical Providers—a unique, comprehensive, and interactive program to achieve the goal of improving cultural competence in the delivery of care and addressing healthcare disparities.

The program provides an opportunity for hospitals who have taken the AHA #123 Equity Pledge to Act to Eliminate Healthcare Disparities to meet the requirement for training staff in cultural competence.

**Failure to Rescue and Change Management**

Monday, April 25, 2016  
9:00 a.m. - 4:00 p.m.

[View Brochure](#) | [Event Registration](#)

The morning portion of this workshop will focus on failure to rescue—the definition, an overview of the topic, early warning systems and rapid response teams, and how to use data analytics to identify patients at highest risk. The afternoon portion will cover information on change management, including a discussion on engagement at all levels—hospital leadership, physicians, clinicians, frontline staff, and middle management.

The program is being presented as part of the Partnership for Patients HEN 2.0 educational series.

**HRO Safety Event Classification**

Wednesday, April 27, 2016  
9:00 a.m. - 4:15 p.m.

[Event Registration](#)

When events occur in the hospital or ambulatory practice, they must be evaluated to assess whether the event is a Serious Safety Event, a Precursor Safety Event, or a Near Miss Safety Event. This session will review how the classification scheme works and how to utilize and standardize event classification in your facility. Medicine, Nursing, and Quality continuing education credits are offered for this session.

**Reducing Readmissions Through the CARE Act**

Thursday, April 28, 2016  
9:00 a.m. - 4:00 p.m.

[View Brochure](#) | [Event Registration](#)

What do Medicare Shared Savings/ACO regulations, Patient Centered Medical Home standards, and Meaningful Use thresholds have in common? They all require the engagement of patients in their own healthcare, and have thus catapulted patient and family engagement (PFE) to the top of many healthcare providers' priority lists. Despite this, for most healthcare organizations, patient and family engagement continues to be more of an aspiration than an executable strategy. What is needed are practical approaches that facilitate the shift from the patient and their family being passive recipients of care, to engaged members of their own care team.

Family members play an integral role in this changing dynamic, often serving as the keeper of medical information and history, and the informal care coordinator and care provider. Recognizing this, Connecticut along with several other states, via the Caregiver Advise, Record, and Enable Act (CARE) Act, now mandate hospitals to provide support for patients to designate an informal caregiver in their medical record, and to provide instruction and demonstration to help the caregiver better support the patient after discharge in order to decrease readmissions and control costs.

The program is being presented as part of the Partnership for Patients HEN 2.0 educational series.

