Legislative Session Ends; Budget Adjustments and Infection Reporting Bill Passed

The 2006 Legislative Session came to a close on Wednesday. This week the House and Senate passed HB 5845, An Act Requiring A Study Of Budgeted State Agencies With Respect To The Expenditures And Revenues Of Such Agencies, which modifies the 2005-2007 biennial budget and tax package. These modifications contain new funding for all hospitals, as well as money from the budget surplus for “hardship” hospitals.

The budget package includes provisions that:

- Increase hospital Medicaid rates by $6 million and State-Administered General Assistance (SAGA) by $1 million;
- Add non-emergency medical transportation and vision care to the services and care provided SAGA recipients at a cost of $3.6 million;
- Restore self-declaration in the HUSKY program at a cost of $2 million;
- Establish a Hospital Hardship fund from FY 06 surplus funds in the amount of $11 million;
- Appropriate $2 million from FY 06 surplus funds to the Community Mental Health Strategy Board;
- Restore $510,000 funding for the partial hospital program under the general assistance behavioral health program;
- Provide additional appropriations to the Connecticut Children’s Medical Center of $4 million and appropriation from FY 06 surplus funds of $2 million;
- Eliminate the proposed modification to the medical necessity and appropriateness definition, worth $3 million to Connecticut providers; and
- Maintain the funding appropriated last year in the Uncompensated Care Pool and Urban DSH Pool (which does not reverse last year’s $10 million reduction to the Uncompensated Care Pool).

CHA is pleased to report that the House and Senate also passed a significantly modified and improved version of SB 160, An Act Concerning Hospital Acquired Infections, reflecting CHA’s efforts to ensure that hospitals have a role in shaping a statewide infection reporting system and that the system will be based on standardized, scientifically proven measures.

The bill creates a Committee on Healthcare Associated Infections, which is required to include hospitals and two members representing CHA. This Committee will be charged with recommending to the Department of Public Health (DPH) by April 1, 2007, a mandatory reporting system for healthcare associated infections, including appropriate aggregate and facility-specific standardized measures that are based on nationally recommended standards and reliable scientific evidence. The Committee is also required to recommend to DPH methods for increasing public awareness about ways to reduce the
spread of infections both within and outside healthcare settings.

DPH is required to implement the recommendations of the Committee by October 1, 2007 and to submit a report to the legislature regarding implementation. DPH is to begin publicly reporting healthcare associated infection information on an annual basis beginning October 1, 2008.

**Connecticut Hospital Contingent Attends AHA Annual Meeting, Meets With Congressional Delegation**

Leaders from Connecticut hospitals joined CHA staff in Washington, D.C. this week to attend the American Hospital Association (AHA) Annual Meeting, and to meet with members of Connecticut’s Congressional Delegation and their staffs regarding issues of importance to the state’s not-for-profit acute care hospitals.

President George Bush addressed meeting attendees on Monday, outlining his five-point plan to improve the quality of healthcare and control costs, which includes health savings accounts, electronic health records, pricing transparency, association health plans, and medical liability reform.

Following the Annual Meeting, the Connecticut hospital contingent delivered a message on Medicaid/Medicare funding to members of Connecticut’s Congressional Delegation in several meetings on Wednesday. Participating in the visits were Robert Trefry, President/CEO, Bridgeport Hospital; Gerard D. Robilotti, Executive Vice President, Danbury Hospital; Kevin Kinsella, Vice President, Hartford Hospital; Laurence A. Tanner, President/CEO, New Britain General Hospital; Christopher Hartley, Senior Vice President, Saint Francis Hospital and Medical Center; Pamela Koprowski, Corporate Director of Public Affairs, The Stamford Hospital; John H. Tobin, D.Man., President/Chief Executive Officer, Waterbury Hospital; and CHA staff Stephen Frayne, Senior Vice President, Health Policy, and Kim Hostetler, Vice President, Administration and Communications.

While addressing a number of issues, the meetings were centered on three priorities: establishing a minimum rate of increase for Connecticut hospitals under the Medicare program; working with the Centers for Medicare and Medicaid Services (CMS) to include State-Administered General Assistance (SAGA) days in Connecticut hospitals’ Medicare calculations to increase federal Medicare Disproportionate Share Hospital (DSH) funding to hospitals; and protecting Connecticut hospitals from cuts to Medicare or Medicaid funding.

**CHA Presents at Forum on RHIOs**

AHA convened a State Issues Forum on Regional Health Information Organizations (RHIOs) in Washington, D.C. on Saturday, April 29. John Brady, CHA Chief Financial Officer and Vice President, Business Planning, presented at the Forum, describing how ChimeNet, CHA’s information technology (IT) affiliate, is helping to shape the increasingly important role of IT in Connecticut’s healthcare system. ChimeNet provides data networking services to twenty-eight of Connecticut’s thirty not-for-profit acute care hospitals.

**Nightingale Awards Celebrate Connecticut Nurses**

On Thursday, more than 300 Connecticut nurses were honored by the Nightingale Awards Program at four regional galas across the state. Now in its sixth year, the annual nursing awards program - which was developed by the Visiting Nurse Association of South Central Connecticut in 2001 to promote nursing as a career - has grown into a statewide event that recognizes the achievements of nurses and celebrates the contributions they make to healthcare.