

<b>Act Number</b>	<b>Session</b>	<b>Bill Number</b>	<b>Total Number of Committee Pages</b>	<b>Total Number of House Pages</b>	<b>Total Number of Senate Pages</b>
PA 71-282		6124	9	2	2
<u>Committee Pages:</u>				<u>House Pages:</u>	<u>Senate Pages:</u>
<ul style="list-style-type: none"> <li>• <i>Public Health &amp; Safety</i> 718-724</li> <li>• <i>Public Health &amp; Safety</i> 730</li> <li>• <i>Public Health &amp; Safety</i> 745</li> </ul>				<ul style="list-style-type: none"> <li>• 2254- 2255</li> </ul>	<ul style="list-style-type: none"> <li>• 1780- 1781</li> </ul>

**H-112**

**CONNECTICUT  
GENERAL ASSEMBLY  
HOUSE**

**PROCEEDINGS  
1971**

**VOL. 14  
PART 5  
1968-2502**

Thursday, May 6, 1971

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MBS

Yes, Mr. Speaker. I move acceptance of the joint committee's favorable report and passage of the bill.

MR. SPEAKER:

Question is on acceptance and passage, will you remark?

NICHOLAS M. MOTTO, 3rd District:

Yes, Mr. Speaker. This bill broadens the appointive powers of the Mental Health Commissioner. It is appointing of superintendents for the Connecticut Valley Hospital, the Norwich Hospital and Fairfield Hills Hospital. It allows him to extend and widen the powers of his appointment to a person holding a degree in hospital administration with broad experience in that field. I think this gives us a chance to give some of the people, some of these hospitals a chance to be operable in top, full condition and I think it is a good bill and ought to pass.

MR. SPEAKER:

Will you remark further on the bill? If not, the question is on acceptance of the joint committee's favorable report and passage of the bill, all those in favor will indicate by saying aye, all those opposed? The bill is passed.

THE CLERK:

Calendar No. 680, House Bill No. 6124, An Act Concerning the Powers of the Commissioner of Health, file 633.

DR. MORRIS N. COHEN, 41st District:

Mr. Speaker, I move acceptance of the joint committee's

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favorable report and passage of the bill.

MR. SPEAKER:

Question is on acceptance and passage, will you remark?

DR. MORRIS N. COHEN, 41st District:

Mr. Speaker, this bill sets forth the regulations under which our Commissioner of Health can carry on his duties. It strengthens and spells out his responsibility. It is a good bill and I hope it passes.

MR. SPEAKER:

Will you remark further on the bill? If not, the question is on acceptance and passage of the bill. All those in favor will indicate by saying aye, opposed? The bill is passed.

THE CLERK:

Calendar No. 682, Substitute for House Bill No. 7130.  
An Act Concerning Fees for Copies of Vital Records and Permits.  
File 639.

WILLIAM RYAN, 84th District:

Mr. Speaker, I move acceptance of the joint committee's favorable report and passage of the bill.

MR. SPEAKER:

Question is on acceptance and passage, will you remark?

WILLIAM RYAN, 84th District:

Yes, under this bill burial permit fees are raised from 50¢ to \$1.00. All fees for reporting the birth of a foundling or abandoned child are abolished. Fees for birth certificates

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**CONNECTICUT  
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**SENATE**

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SENATOR ALFANO:

Will you pass that temporarily?

THE CHAIR:

Let us know when you are ready to proceed?

THE CLERK:

Now go down to Cal. 625, File 633. Favorable report joint standing committee on Public Health and Safety on H.B. 6124 An Act Concerning the Powers of the Commissioner of Health.

THE CHAIR:

Senator Pac.

SENATOR PAC:

Mr. President, I move acceptance of the joint committee's favorable report and passage of the bill.

THE CHAIR:

Will you remark?

SENATOR PAC:

This bill would permit the Commissioner of Health in cases where he feels or determines that the local directors of health have not enforced the statutes and the regulations according to the public health code. It would permit him to come in and enforce these statutes. Notify the local health director of the same. I think this is a good bill and deserves passage.

THE CHAIR:

The question is on passage. Will you remark further?  
If not all those in favor of passage of the bill signify by

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saying aye. AYE. Opposed nay? The ayes have it. The bill is passed.

THE CLERK:

Cal. 626, File 632 Favorable report of the Committee on Government Administration and Policy Substitute H.B. 6643 An Act Concerning A Master Plan for Development.

THE CHAIR:

Senator Sullivan.

SENATOR SULLIVAN:

Mr. President, I move acceptance of the joint committee's favorable report and passage of the bill.

THE CHAIR:

Will you remark?

SENATOR SULLIVAN:

Mr. President, this amends an existing statute wherein there is a master plan for development of the district in the Hartford area. Which directs building it leasing or any construction of any buildings or any annexes involving the three branches of government. But the amendment on this to this section of the statute allows the building or leasing of courts outside this district.

THE CHAIR:

The question is on passage. Will you remark further? If not all those in favor of passage signify by saying aye. AYE Opposed nay. The ayes have it. The bill is passed.

**JOINT  
STANDING  
COMMITTEE  
HEARINGS**

**PUBLIC  
HEALTH  
AND  
SAFETY**

**PART 2  
492-901**

**1971**

PUBLIC HEALTH AND SAFETY

TUESDAY

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Rep. Cohen: (not clear) deal with the Superintendent of the hospital, and if they can't convince the Superintendent to give some of the things that should be done, who can? Certainly the patient can't.

Dr. Granoff: You have a Board of Trustees who determine the policies of the hospital, not the doctors.

Rep. Cohen: The medical profession are closer to that Board than anybody else.

Dr. Granoff: They are completely divorced from that Board and have absolutely no influence on that Board.

Rep. Cohen: That I agree. You don't have any influence. They should force an influence (not clear) because without doctors you can't run hospitals. With their power and their force they could control the hospital.

Dr. Granoff: Well, they are trying to. We're going to organize a union and make you a bargaining agent.

Rep. Cohen: Any further questions?

Dr. Granoff: We have not taken a position, we have not taken a position on several other bills, but I would like to offer some comments if you would, if they're brief.

On S.B. 1560. I think the purpose of this, I'm speaking now as an individual, I, I

Rep. Cohen: Transferred to insurance.

Dr. Granoff: It's not with you any more. All right, then. On H.B. 6123, locally in the New Haven area, and New Haven County, the comprehensive health planning is partic- is using the facilities of practicing physicians in their deliberations. These physicians report that their experiences are favorable and I look forward to a more meaningful participation by physicians in comprehensive health planning, and I as a practicing physician in New Haven would support that bill.

On S.B. 68, you heard Dr. Gallo and I think he even quoted me. There's a dire need for primary physicians, both family practitioners, pediatricians, internists, and Section 1 of this bill would encourage that.

On H.B. 6124 (AN ACT CONCERNING THE POWERS OF THE COMMISSIONER OF HEALTH), the Society has no position.

Rep. Cohen: I can't let you leave without saying one more thing. The anesthesiologists in the hospitals have complete control over what they want to do in that hospital. And the hospital can't exist without the anesthesiologists because they got together and said, this is what we want you to do. They do it. Why couldn't the rest of the profession do the same thing?

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Dr. Granoff: They don't seem to be able to.

Rep. Cohen: They don't want to. (not clear)

Dr. Granoff: Oh, I wouldn't say they don't want to. They don't seem to be able to, Doctor Cohen, because you know -

Rep. Cohen: Well, why are the anesthesiologists smarter? They're MDs that just became specialized, that's all.

Dr. Granoff: They are employees - the anesthesiologists have a corner on the market.

Rep. Cohen: Exactly, so-

Dr. Granoff: The doctors don't.

Rep. Cohen: They don't?

Dr. Granoff: Not in the hospital. You know that and you know very well that, that the hospital, that doctors are subject in their privileges to review and you know what happens.

Rep. Cohen: Getting together. That's the answer.

Dr. Granoff: Well, I, I will recommend that we employ you.

Rep. Cohen: I'll be glad to lead you. Thank you.

Rep. Rose: You do not have a corner on the market?

Dr. Granoff: No, not as far as hospital.

Rep. Rose: not clear)

Dr. Granoff: No, I don't think a corner on the market is healthy either. I think we need more doctors. We need more primary physicians. I think our medical schools are failing us in not encouraging doctors to become primary physicians. I think that, I think that you, that perhaps the government as representatives of people, not the establishment, should, should do what they can to encourage medical schools to provide more family physicians. I think that their education is oriented away from it.

Rep. Cohen: When we support that bill for this, for the University of Connecticut, will you people come up and support it? For the University of Connecticut to turn out more general practitioners?

Dr. Granoff: Yes, I'll support you.

Rep. Cohen: O.K. Very good.

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Sen. Gunther: The corner on the market is not only anesthesiologists. The same thing goes for pathologists, radiologists, lab men. We had a year and a half study where some of us were amazed at the salaries. 40% of the gross for a roentgenologist in a hospital. And a need for some control in these things. Now if there isn't a state agency that's going to get into this, and you people can't cope with it, then I'll, I'll join with Dr. Cohen. Who does it?

Dr. Granoff: Actually the cost of the, the salaries of the roentgenologists are not reflected very greatly in patient and in the day rate. You know that. I know it. The things that are, the radiologists, if he's getting 50% of the gross, if no xrays are taken, he's getting nothing. So that the hospital frequently is making a profit even though he gets a percentage of the gross, they're still making a profit on the xrays they take. They're not going to charge less for their xrays if the radiologist gets a lower percentage. And you know it and I know it.

Sen. Gunther: Doctor, did you ever see a patient go out of the hospital and have the roentgenology done in a lab and come back in? You have a locked in group that have no choice -

Dr. Granoff: I don't understand what you mean.

Sen. Gunther: Well, I don't understand your talking about the dollars and cents of the roentgenology department -

Dr. Granoff: Those things operate at a profit.

Sen. Gunther: Pardon?

Dr. Granoff: Those things, those departments operate at a, at a profit.

Sen. Gunther: Your profit.

Dr. Granoff: Yes.

Sen. Gunther: That's right. And it reflects on cost. Maybe not in the room cost but in the total cost. Now let's not -

Dr. Granoff: I'll talk to you about hospital costs some other time. I'm willing to do it now if you want to get into it.

Sen. Gunther: He goes out and set up his own laboratory and amortizes cost of equipment and everything else and still has the same fees that the hospital does. If that man can walk in there with no investment, nothing, and work up to 40-50% of the gross for a salary, and still have a lab on the side. And I wonder if this is fair to the patient (not clear)

Dr. Granoff: If you know that the trend now is to encourage full time chiefs of services, and some of the salaries that are being

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paid these full time chiefs of services are unconscionable. And why hospitals are doing it, I don't know. But they feel they can do it because they can hand it on to the patient.

Sen. Gunther: Who's controlling it?

Dr. Granoff: I don't know why the Boards of Trustees will, will o.k. these fees, these salaries. They're unconscionable. There's one hospital in Connecticut that has hired, that is contemplating hiring a chief of service - medicine - for \$60,000 a year plus private practice privileges, plus four part time assistants at \$20,000 a year apiece. Now if those, those salaries are, if they can defend them, I'd like to see them defend them.

Sen. Gunther: Who are they going to have to defend them?

Dr. Granoff: Pardon?

Sen. Gunther: (not clear) defend them.

Dr. Granoff: Well, why are they doing it?

Sen. Gunther: I didn't say that. We're up here to try to legislate something to control this type of -

Dr. Granoff: I think hospital costs have to be controlled.

Sen. Gunther: Then, how do we do it?

Dr. Granoff: I don't know. But I don't think you can do it by legislative mandate.

Sen. Gunther: If the profession itself can't do it, somebody has to do it.

Dr. Granoff: The profession can't do it.

Rep. Cohen: We have to do it.

Dr. Granoff: The profession cannot do it.

Rep. Cohen: Well have to try.

Dr. Granoff: You read that book I spoke about the last time I was here. Did you buy it?

Rep. Cohen: I ordered one.

Dr. Granoff: Good. Read it.

Rep. Cohen: Why don't you loan me yours?

Dr. Granoff: I don't have it with me or I'd give it to you.

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Rep. Cohen: It's \$8.75.

Dr. Granoff: \$7.95. \$7.95. It's a Random House. It's an education to read that book. It tells you about hospital costs.

Rep. Cohen: (not clear)

Dr. Granoff: Oh, the other book is old stuff. The other book is old stuff. Now, look. The current issue of the American Journal of Public Health has an article by the esteemed George Baer on neighborhood health centers. That's the big thing today, isn't it? And somewhere in find print toward the end of the article he tells you in effect that 128 of the 168 hours a week, the patient is going to get his care from the emergency room of the neighborhood hospital. And they're going to provide transportation where necessary. Now what kind of comprehensive care is this?

Rep. Cohen: Thank you very much, Doctor.

Dr. Granoff: You're welcome, Doctor.

Rep. Rose: Doctor, don't go.

Dr. Granoff: Oh, no. I love to talk to you.

Rep. Rose: You say the doctors don't know what to do about cutting down the costs.

Dr. Granoff: 'Cause they have no control over hospital costs.

Rep. Rose: Well, I know, but you say, when you were asked how are we going to do it, you say I don't know. All right. If you don't know, and you're the trained person in the whole business of health care, wait just a minute, the doctor's profession, you're representing the Connecticut Medical Society as the President of the doctors profession in the State of Connecticut and you're saying for the doctors; we don't know what can be done. We're the doctors. We're trained. We know how to handle things, but we don't know how to cut down the costs. Now who is going to do it if you say you can't do it. Certainly you must expect that there will have to be somebody to try to do it because you've thrown up your hands on it.

Dr. Granoff: It isn't that we've thrown up our hands, but we are powerless to determine hospital, general hospital policy. The administration of the hospital which is subject to review by the Board of Trustees or the people who have the power to do something about it.

Rep. Rose: yes, but we ask you to tell us what to do legislatively. We ask for your advice. And you say, I don't know what to tell you. We're asking for your advice.

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Dr. Granoff: Well, I'll come back to you.

Rep. Cohen: O.K. Thank you very much. While we're on the doctors,  
Dr. Zazzaro.

Dr. Zazzaro: I would like to speak as Secretary of the Dental Commission as relates to H.B. 8826 (AN ACT CONCERNING ILLEGAL PRACTICES OF DENTISTRY). 8826 amends the definitions of what constitutes the practice of dentistry. The Supreme Court of the State of Connecticut recently upheld a decision of the Common Pleas Court which stated that the assembling and packaging and selling of materials with appropriate dental instructions to fashion a duplicate of a denture, their decision was that this did not constitute the practice of dentistry as it was related in the definition in the Dental Practice Act. Now it is a known fact that anyone who, who, it's a known fact that improper or ill fitting dentures are a major cause of mouth cancer.

Rep. Cohen: Dentures are false teeth in case some of you people don't know.

Dr. Zazzaro: In experienced hands, whether by a dentist or even a dental technician, it takes considerable training and knowledge to properly make and fit a denture, or false teeth. So the selling of these do it yourself kits, at least in the opinion of the Assistant Attorney General who represented the Dental Commission in its, when it brought this case to court, in his opinion, he felt that the definition did include the assembling of these do it yourself kits. He felt it constituted the practice of dentistry. The courts did not agree and said, you failed to include in your definition the packaging and selling of these materials. Now the bill as amended today will not prevent the sale of these materials to dental supply houses or dental laboratories or dental technicians. It merely prevents these materials from being sold to individuals that have absolutely no training or ability to make a denture. And this is what the Dental Commission would like to prevent. And this is why we're asking the Public Health and Safety Committee to react favorably to this bill.

Rep. Rose: I think, it seems to me the fundamental problem here is that you're suggesting that an individual may not do anything to his body which he decides he'd like to do without having some professional who charges a fee to do this. In other words, if you could carry this to the extreme, obviously a person wouldn't be able to trim his fingernails or he wouldn't be able to take out a blackhead or he, clean out his own ears or anything else. He'd have to always have the professional do the job for him. And this is the philosophy that I think we cannot allow to happen. If we legislate against people being able to treat their own bodies.

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Dr. Zazzaro: Well, you are correct but not in relation to what I am talking about, for this reason. You cannot give a person material to say make a denture. There must be instructions to go along with this. And I'm sure you would expect a dentist or someone who's trained to do this, to relate these instructions to the individual. And I think that's the crux here. It is the instructions that are given along with this that I feel fall under the definition, or should fall under the definition of what constitutes the practice. In other words, if a, if an individual is going to get instructions on how to do dentistry, whether they do it on themselves or not, they should at least get the proper instructions. And those instructions must fall under the category of the education and the experience of a dentist. And no one else. It shouldn't come from a medical man. It shouldn't come from a lay person. I'm sure that that philosophy would hold in your instance.

Rep. Cohen: Any other questions of the doctor? Dr. Zazzaro, while you're here. At a previous hearing on bill 6128, we had a hearing as you'll recall, and I made the suggestion, we're going to act on this bill one way or the other, whether you would accept as part of that bill that in your bill you asked for the Dental Commission to control the research. And I asked if you would allow others to be on this Commission. For instance, I had the suggestion that three members of the Commission and two lay members, one appointed by the Speaker of the House, one appointed by the President Pro Tem of the Senate. Would that meet with your approval in this bill?

Dr. Zazzaro: Yes, yes, it would. Yes it would.

Rep. Cohen: Thank you very much.

Dr. Zazzaro: Thank you.

Rep. Cohen: Mr. Prosser I think is - go right ahead. Just identify yourself.

Daniel Prosser, Associate Commissioner for the Division of Community Services of the State Department of Mental Health: I would like to speak specifically and make a few comments relative to H.B. 8225, an act concerning state assistance to community mental health facilities.

This bill, I would give a brief history of its origins, originated when the town of Hamden applied under the existing laws governing community psychiatric clinics for children. And one of the provisions in the existing law, I think it's cited down on line 23, the Director of Health of any district Department of Health, or any full time Director of Health may apply. The question was raised by the Attorney General's office that the Director of Health basically is a creature of town government. So we felt, our Attorney General felt

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I have statements from many people who could not be here. And I would just like to tell you who they are so you'd get some idea of the range of people involved. Mr. Joseph Roberts who's President of Edgecomb Steel in Milford. Mr. Ed Workfolk who is comptroller of B. F. Goodrich Company in Shelton. Mr. Macus McCraven who is Treasurer of South Central Connecticut Comprehensive Health Planning and also Director of Environmental Engineering for the United Illuminating Company. Mr. Harry Jefferys who is a supervisor of a small sheet metal work shop in New Haven. Mr. Charles Sabatino who is Executive Director of the Fair Haven Project. Dr. Russell Fuldner who has been a mainstay in cooperating with us through, as a representative of the medical society and involving consumers in the planning process particularly in the New Haven area. Mr. Harold N. Willard, M.D., Director of Continuing Care Program, Yale-New Haven Hospital. A. H. Novack, Director of the Hill Health Center. And Roger W. Everson, who is Executive Director of the Hill Neighborhood Corporation of New Haven. Calvin D. Haseltine, a high school biology teacher in Hamden. Susan Steinberg is, well let's see, a member of the Comprehensive Health Planning, Inc. and President of the Dwight Area Association of New Haven. Mr. Jerold Girard who was formerly with the Connecticut Hospital Planning Commission and now speaking as a citizen and as a tax assessor for the Tri-State Beach Association in Milford. Mr. Ralph Abercrombie who is a consulting engineer in Milford and also Chairman of the Milford-Orange Comprehensive Health Planning Component Area Committee. And Mr. John B. Atwater, Health Director of the City of New Haven. Raymond J. Higgins, Health Administrator, City of Milford. And David A. Pearson, Ph.D., Assistant Professor of Public Health and Coordinator for Regional Medical Program Activities, Department of Epidemiology and Public Health, Yale University. And rather than read all those letters, I'd like to submit them because I know there are people waiting.

Rep. Cohen: Any questions of the speaker? Thank you very much. You're still on 6123?

Rosalyn Fishman, Executive Director of the South Central Comprehensive Health Planning Agency: Briefly on 6123 I would just like to point out that the sum that is dated there, \$300,000, is when it was prepared as a biennium bill. That is not what it would be. Secondly I'd like to point out that there is a precedent in the State of Connecticut for this kind of funding to regional, voluntary, quasi-governmental bodies in Public Act 716, the act which provided funds for regional Mental Health Councils.

I'd like to speak in favor of Bills 6124 regarding the powers of the Commissioner of Health which makes explicit the ability of the Commissioner to enforce public regulations of a public health code and general statutes when they are not being done by a local health department if it is a hazard to the health of the people.

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I just read recently a report from the Comprehensive Health Program Activities in the small state of New Mexico. And I was amazed at the things that state was doing, as compared to some of the things we're doing in our large state where we're supposed to have a great deal of money. They're performing the functions that were envisioned by those who drafted the Federal legislation on Comprehensive Health Planning.

Also I just recently read the Sheaffer Report that indicated that Comprehensive Health Planning in Connecticut had really been dragging its feet. And it has been slow in organization. And I think this is true in some respect because at the moment we only have two B agencies in the entire state - one in Hartford and one in New Haven. And all the other areas, even though many of us have been working toward this, we have not been able to actually become funded B agency. And this bill, 6123, will permit our State to begin to act as perhaps we should for the past two years. Thank you so much.

Sen. Pac: Any questions? Thank you, sir. Anyone else wishing to speak? Please come forward. I didn't know you wanted to speak.

Sally Hirakis: Oh, that's all right. I wanted to wait till the very end. My name is Sally Hirakis and I'm speaking for the Connecticut State Department of Health, on bill, House Bill 6124. We favor this bill which would increase the authority of the Commissioner of Health in the enforcement of any statute or regulation when he determines it is not being enforced effectively by local health departments. At present the enforcement of many statutes and regulations is up to local health departments, and the Commissioner is authorized to assist and advice the local Directors of Health in the performance of their duties. But it is often difficult or cumbersome to require enforcement of the public health statutes and regulations. The Commissioner already has the authority in certain fields, such as air pollution control, municipal refuse disposal, public water supplies and public sewage treatment plants and public swimming pools. But other statutes and regulations giving enforcement authority directly to the local Director of Health.

This modification would still leave the major enforcement with the local officials, but would allow the Commissioner to act if necessary to protect public health.

In addition I would like to speak on H.B. 8617. an act concerning the restaurant inspection for the bill requires inspection at least four times a year. The Advisory Council of the State Comprehensive Health Planning Unit studied the whole problem of hospital inspection and the need of having