

Legislative History for Connecticut Act

<u>HB 5219</u>	PA 109	<u>1978</u>
<u>Senate: P. 1127-1129</u>		(3p)
<u>House: P. 690-691, 2156-2159</u>		(6p)
<u>Public Health: P. 47-48, 57</u>		(3p)
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CONNECTICUT  
GEN. ASSEMBLY  
SENATE

PROCEEDINGS  
1978

VOL. 21  
PART 3  
848-1262

Monday, April 10, 1978

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THE CLERK:

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Continuing on page eight of the Calendar,

THE PRESIDENT:

Senator Lieberman.

SENATOR LIEBERMAN:

I'm sorry, was the Clerk about to call Cal. 377?

Thank you.

THE C\_LERK:

Cal. 377, File 51. Favorable report of the joint standing Committee on Public Health and Safety. Substitute for House Bill 5219. AN ACT CONCERNING REDEFINITION OF STATE HEALTH CARE FACILITIES AND INSTITUTIONS.

THE PRESIDENT:

Senator Ciarlone.

SENATOR CIARLONE: (11th)

Thank you, Mr. President. I move acceptance and passage of the bill and I believe the Clerk has two amendments.

THE CLERK:

The Clerk has Senate Amendment Schedule A, File 51, Substitute House Bill 5219. LCO 3022 offered by Senator Ciarlone. Copies are on the desks. That's LCO 3022.

THE PRESIDENT:

Will you explain the amendment, Senator?

SENATOR CIARLONE:

Yes. Mr. President, I will waive the reading. Thank you, very much. This amendment merely provides that the

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Commission on Hospital and Health Care will be able to waive hearings on rate increases if, in fact, the Commission approves that increase and there is no objection by any public member. So what we are doing here is trying to facilitate the Commission's hearing procedure where there is no objection. And if there is no objection here, I would move the amendment, Mr. President.

THE PRESIDENT:

All in favor of Senate A, please say Aye. Opposed Nay. The Ayes have it. SENATE A IS ADOPTED.

THE CLERK:

The Clerk has Senate Amendment Schedule B, Substitute House Bill 5219 offered by Senator Ciarlone. LCO 2188. Copies are on the desks.

THE PRESIDENT:

Senator Ciarlone.

SENATOR CIARLONE:

Thank you, Mr. President. I waive the reading of the amendment and I will explain it.

THE PRESIDENT:

Please.

SENATOR CIARLONE:

Thank you. This amendment does basically three things. It exempts Christian Science institutions who wish to provide nonmedical care from liability. Two, it changes the composition of the statewide health coordinating council

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to conform with federal requirements. And thirdly, it permits the statewide health coordinating council to promulgate procedural regulations. I might add, Mr. President, that these amendments all conform federal and health planning regulations. I would move adoption of the amendment.

THE PRESIDENT:

The question is on the adoption of Senate B. All in favor please say Aye. Those who are opposed say Nay. The ayes have it. AMENDMENT B IS ADOPTED.

SENATOR CIARLONE:

I would not move the bill for approval as amended with amendments A and B. The bill itself clarifies the type of state facilities which must obtain approval for requiring reimbursement to buy, ah, for state service for medicaid and medicare. This answers a problem we had last year for some state facilities where the commission had some authority. I hope this clears it up and if there is no objection, I would move the bill, as amended, to the Consent Calendar.

THE PRESIDENT:

Without objection, the bill is ordered to Consent.

THE CLERK:

Moving to page eleven of the Calendar, top item on the page, Cal. 416, File 319. Favorable report of the joint standing Committee on Government Administration and Policy. Substitute for Senate Bill 19. AN ACT CONCERNING COMMUNITY WATER SYSTEMS.

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CONNECTICUT  
GEN. ASSEMBLY  
HOUSE

PROCEEDINGS  
1978

VOL. 21  
PART 2  
403-787

Thursday, March 23, 1978 121.

on Public Health and Safety.

efr

PAUL A. LAROSA:

Mr. Speaker, I move that H.B. 5218 be recommitted to the Committee on Public Health and Safety.

MR. SPEAKER:

Is there objection? Is there objection? Hearing none, it is so ordered.

THE CLERK:

Calendar 232, Substitute for H.B. 5219, File 51, an Act concerning redefinition of State health care facilities and institutions. Favorable report of the Committee on Public Health and Safety.

PAUL A. LAROSA:

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

MR. SPEAKER:

The question is on acceptance of the Joint Committee's favorable report and passage of the bill. Will you remark, sir?

PAUL A. LAROSA:

Mr. Speaker.

MR. SPEAKER:

The gentleman of the 3rd has the floor.

PAUL A. LAROSA:

This bill clarifies existing language so our providers of Medicare or Medicaid services would have to pass a Certificate of Need review for expansion of health services. Under Public Law 93-641, the Department of Health, Education and Welfare has

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indicated that after 1980 mental retardation facilities eligible efr  
for Medicare reimbursements must be subject to review and approval  
of the Commission. I move its passage, Mr. Speaker.

MR. SPEAKER:

Will you remark further on the bill? Will you remark?  
If not, the machine will be opened. Have all the members voted,  
and is your vote properly recorded? If so, if all the members  
have voted and your vote is properly recorded, the machine will  
be locked...the machine will be locked. The machine is still  
open. The machine will now be locked, and the Clerk will take a  
tally. The Clerk please announce the tally.

The following is the result of the vote:

Total number voting . . . . .	142
Necessary for passage . . . . .	72
Those voting Yea. . . . .	142
Those voting Nay. . . . .	0
Those absent and not voting . . . . .	9

The bill is passed.

THE CLERK:

Page 3 of the Calendar, Calendar 234, Substitute for  
H.B. 5215, File 54, an Act concerning the appointment of designees  
to the Commission on Hospitals and Health Care. Favorable report  
of the Committee on Public Health and Safety.

PAUL A. LAROSA:

Mr. Speaker, I move that H.B. 5215 be recommitted to

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CONNECTICUT  
GEN. ASSEMBLY  
HOUSE

PROCEEDINGS  
1978

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1714-2170

Monday, April 17, 1978

145.

everyone else. Put them on notice, too. This is/an attempt to  
kill a bill. This is an election year, and if you can't add in-  
surance company to this bill and get it through this year, you  
ain't never getting it through. This is the year to do it.  
Thank you, Mr. Speaker.

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TAPE  
#23

Are you prepared to vote? Will all the members please  
take their seats. Will the staff and guests please come to the  
well of the House. The machine will be opened. Have all the  
members voted? Is your vote properly recorded? If so, the  
machine will be locked. The Clerk please take a tally. The  
Clerk please announce the tally.

The following is the result of the vote:

Total number voting . . . . .	140
Necessary for adoption. . . . .	71
Those voting Yea. . . . .	91
Those voting Nay. . . . .	49
Those absent and not voting . . . . .	11

House Amendment Schedule "B" is adopted. Pursuant to Joint Rule  
18, this bill will be returned to the Legislative Commissioners  
Office. The bill is ruled substantive by the Chair.

THE CLERK:

Page 22 of the Calendar, Calendar 232, Substitute for  
H.B. 5219, Files 51 and 502, an Act concerning redefinition of  
State health care facilities and institutions. As amended by  
Senate Amendment Schedules "A" and "B". Favorable report of

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the Committee on Public Health and Safety. efr

PAUL A. LAROSA:

Mr. Speaker, I move acceptance of the Joint Committee's favorable report and passage of the bill as amended by Senate Amendment "A", L.C.O. 3022. With the permission of the Chair I would like to summarize.

MR. SPEAKER:

The Clerk has L.C.O. 3022, which is designated as House...Senate Amendment Schedule "A". Will the Clerk please call the amendment.

THE CLERK:

Senate Amendment Schedule "A", L.C.O. 3022.

MR. SPEAKER:

Is there any objection to Representative LaRosa's summary of this amendment? Please proceed, sir.

PAUL A. LAROSA:

Mr. Speaker, this amendment would permit the Hospital Cost Commission to render a decision on rate increases without first holding a public hearing, but the applicant or a member of the public would have 30 days from the time a decision was made to request a hearing which the Commission would then have to hold. I move its adoption.

MR. SPEAKER:

The question is on adoption of Senate Amendment Schedule "A". All those in favor of Senate "A" will please indicate by saying "aye". Those opposed. The Chair is in doubt. Try your minds again. All those in favor of Senate Amendment

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Schedule "A" please indicate by saying "aye". Opposed. Senate efr  
"A" is adopted and ruled technical. Would you remark further on  
the bill?

PAUL A. LAROSA:

Mr. Speaker, the Clerk would have Senate Amendment "B",  
L.C.O. 2188.

MR. SPEAKER:

The Clerk has L.C.O. 2188, which is Senate Amendment  
Schedule "B". The Clerk please call the amendment.

THE CLERK:

Senate Amendment Schedule "B", L.C.O. 2188.

PAUL A. LAROSA:

I would like permission to summarize, Mr. Speaker.

MR. SPEAKER:

Is there any objection to Representative LaRosa's sum-  
mary of this amendment, Senate Amendment Schedule "B"?

PAUL A. LAROSA:

Mr. Speaker, Senate Amendment Schedule "B" would exempt  
from the Commission...from the Hospital Costs Commission review  
of any Christian Science sanitorium operated or certified by the  
First Church of Christ. I move its adoption.

MR. SPEAKER:

The question is on adoption of Senate Amendment Schedule  
"B". Would you remark? All those in favor of Senate Amendment  
Schedule "B" will indicate by saying "aye". Those opposed.  
Senate "A" is adopted. Senate "B" is adopted. The Chair stands  
corrected. Senate "B" is adopted and ruled technical. Remark

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further on the bill as amended by Senate "A" and "B"?

efr

PAUL A. LAROSA:

Mr. Speaker, the original bill we had passed before in the House, I move its adoption as amended by Senate Amendment "A" and Senate Amendment "B".

MR. SPEAKER:

Remark further on the bill as amended? If not, will the members please take their seats; the staff and guests please come to the well of the House. The machine will be opened. Have all the members voted? Have all the members voted? If so, the machine will be locked, and the Clerk please take a tally. The Clerk please announce the tally.

The following is the result of the vote:

Total number voting . . . . .	137
Necessary for passage . . . . .	69
Those voting Yea. . . . .	106
Those voting Nay. . . . .	31
Those absent and not voting . . . . .	14

The bill as amended is passed.

TAPE #21

THE CLERK:

Page 22 of the Calendar, Potential Disagreeing Actions, Calendar 323, H.B. 5048, Files 146 and 503, an Act concerning trunkline or transmission type utility facilities. As amended by Senate Amendment Schedule "A". Favorable report of the Committee on Transportation.

**JOINT  
STANDING  
COMMITTEE  
HEARINGS**

**PUBLIC HEALTH  
& SAFETY  
PART 1  
1-388**

**1978  
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COMMISSIONER BERNARD FORAND (Continued): Bill 5215 which is an act concerning the appointment of designees to the Commission on Hospitals And Health Care. As you can recall there was an earlier discussion of whether the Committee should permit either designees or deputies of Commissioners and it seems to be based on what I heard at a previous Committee Meeting, that there was a much greater sentiment in favor of limiting the discretion of the Commissioner to who he could send instead and we have supported that and therefore we would recommend that the bill be changed, Lines 37 through 39 and where it says, "his designee", we say the Commissioner of Health or a Deputy Commissioner. The Commissioner of Mental Health or a Deputy Commissioner and the Insurance Commissioner or a Deputy Commissioner. I think quite frankly the Hospital Association would find the bill much more powerable with this change and we believe that it would give the Commission and the Commissioners who are heads of state agencies, sufficient flexibility to meet their own very busy schedules and yet put people who represent them, at a very high level within each of the, each of the departments. Are there any specific questions on that bill?

VOICE FROM AUDIENCE: (INAUDIBLE)

SENATOR CIARLONE: Any members of the Committee have any questions? Proceed Mr. Forand.

COMMISSIONER BERNARD FORAND: On House Bill 5219, an act concerning redefinition of State Health Care Facilities and Institutions, as indicated previously this was necessary to obtain compliance with Public Law 93641. We find that the proposed legislation meets the need and suggest no changes to this proposed bill. If there are no questions on this issue, I'll proceed to the next bill which is....

SENATOR CIARLONE: Commissioner Forand you say you're in favor of that bill and that concerns redefinition of State Health Care Facilities and Institutions?

COMMISSIONER BERNARD FORAND: Yes, because as you remember when we discussed earlier, there was a legal opinion from the Attorney General's Office which said that the Department of Mental Retardation was excluded from the coverage. This was later challenged by the Department of Health Education & Welfare so we have language which says that if they're providing services which are eligible for reimbursement under Titles 18 and 19, then they would be covered. If they're providing other services that are not covered by Titles 18 or 19, they would not be covered, so this I think provides an adequate

COMMISSIONER BERNARD FORAND (Continued): differentiation of what parts of Mental Retardation and other state services will be covered and what parts would not be covered.

SENATOR CIARLONE: Okay thank you Commissioner. Any questions. Proceed.

COMMISSIONER BERNARD FORAND: The next Bill 5216...

SENATOR CIARLONE: Representative Parker. Representative Wilber.

REPRESENTATIVE WILBER: Other than the Department of Mental Retardation, have you any others that you, specifically any other areas you specifically see will be swept under this umbrella? I mean...

COMMISSIONER BERNARD FORAND: This would apply to all departments of state government as it pertains to their coming under our authority relative to Certificate of Need applications.

REPRESENTATIVE WILBER: Yeah I know, but any major areas that you, you know. I mean, they're not jumping into my mind.

COMMISSIONER BERNARD FORAND: No, we are not, if anything it would limit authority that we already have under the present state statute. It would not add any additional authority.

REPRESENTATIVE WILBER: That's what I wanted.

COMMISSIONER BERNARD FORAND: The next bill, House Bill 5216 is the bill about which Mr. Ronai spoke at great length. We believe that this bill would be in the public interest because it would stream line the administrative process by enabling the Commission to approve rate increases or deny rate increases without a hearing and then if the facility objected, then to hold a Public Hearing. We've had cases where Commissioner --- told me about one here he had where a facility only had one private patient and the amount of revenue that they were talking about was a couple of thousand dollars. And we feel that we don't really need to have a Public Hearing to do this but that if the applicant objects to the decision that we make without a Public Hearing, then he will be entitled to a Public Hearing if he so requests. So I think it protects his right to process.

REPRESENTATIVE LAROSA: That's streamlining the procedure?

COMMISSIONER BERNARD FORAND: Yes. Now the next one I'd just like

JOHN TILSON (Continued): that have been referred to by Mr. Forand. And like Miss Swallow, I'd like for once to be on the same side as Mr. Forand and I hasten to say that I support his position on the three bills that he was dealing with. These are on your agenda, Item #2 which is Bill 5219, LCO 435 which is an act redefining State Health Care Facility and Institutions. As Mr. Forand explained this deals with basically the mental retarded institutions and is necessitated by the feds acting under 93641. We are a little hesitant at the Commission's increasing its jurisdiction but in this particular case we see no possible alternative to it, and we would agree that this bill would be necessary. The next bill is Item 4 on your agenda. It's Bill 5216, LCO 436. This is the bill that Mr. Ronai delt with at some length. It makes hearings on rate applications optional. I might point out that the general hospitals do not as a rule file for rate increases under Section 19-735. They file for budget review under 19730 so, except in very unusual circumstances, the general hospitals would not be affected by this bill. But it would affect the long term hospitals, the Masonic Homes, the psychiatric institutions and institutions of that kind and for the reasons that have been expressed, both by Mr. Ronai and Mr. Forand, we feel that the option to, not to have a hearing unless it's demanded by somebody is a very good one. I might point out that as far as the general hospitals are concerned, there is no mandatory hearing. If the Commission in the first instance, approves the budget, there is no mandatory provision for a hearing there and we think that it would be an improvement to do the same thing with respect to the rate applications as indicated in 5216. We think this bill is definitely a step in the right direction and as I've indicated we do have concerns with what appears to be a movement on the part of the Commission to expand its jurisdiction, then to come back and tell your Committee that it hasn't time to do some of the things that perhaps are more important and here's an opportunity to save time on the part of the Commission and we think it's a good thing. The last of the bills is Item 5 on your agenda, which is 5220, LCO 451. This is the bill Mr. Forand wants to sit down with me and redraft and I'm glad to hear of this suggestion on his part. Briefly what this bill is part of is a change in traditional reimbursement of hospitals whereby in theory all classes of payors would pay charges as determined by the budgets which are approved by the Commission. At the present time the only people that pay charges are the occasional paying patient who pays his own bills and the patient who is covered by commercial insurance. The Blue Cross patient, the Medicare patient, and the Medicaid patient who pay on a cost base system which in some cases works out the