Legislative History for Connecticut Act

HB 5908 PA 413 1983

House 4067-4072, 7136-7140 (11)

Senate 3076-3081 (6)

Public Health 153-155, 161-162, 169-170, 198-199, 226-228 (12)

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CONNECTICUT
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HOUSE

PROCEEDINGS
1983

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PART 11
3847-4115

CLERK:

Calendar Page 7, Calendar No. 444, Substitute for House Bill 5908, AN ACT CONCERNING PATIENTS' MEDICAL RECORDS, Favorable Report of the Committee on Public Health.

REP. BROOKS: (95th)

Mr. Speaker.

DEPUTY SPEAKER FRANKEL:

Rep. Walter Brooks.

REP. BROOKS: (95th)

Yes, Mr. Speaker, I move for acceptance of the Joint Committee's Favorable Report and passage of the bill.

DEPUTY SPEAKER FRANKEL:

The question is on acceptance and passage. Will you remark, sir?

REP. BROOKS: (95th)

Yes, Mr. Speaker. For the purpose of an amendment, may I yield to Rep. John Woodcock?

DEPUTY SPEAKER FRANKEL:

Rep. Woodcock, do you accept the yield, sir?

REP. WOODCOCK: (14th)

Yes, I do, Mr. Speaker. Yes, I do.

DEPUTY SPEAKER FRANKEL:

You have the floor, sir.

REP. WOODCOCK: (14th)

Thank you, Mr. Speaker. Thank you, Rep. Brooks. The Clerk has an amendment, LCO No. 6144. I ask that he call the amendment and that I be permitted to summarize it.

DEPUTY SPEAKER FRANKEL:

The Clerk has LCO No. 6144, designated House "A". Would the Clerk please call the amendment only.

CLERK:

LCO No. 6144, designated House Amendment Schedule "A", offered by Rep. Frankel of the 121st District.

DEPUTY SPEAKER FRANKEL:

The gentleman seeks permission to summarize this amendment in lieu of a reading by the Clerk. Is there objection? Hearing none, you may proceed, Rep. Woodcock.

REP. WOODCOCK: (95th)

Thank you, Mr. Speaker. The amendment strikes lines 16 and 17 in the file copy, the language that has to do with turning over records that the patient can be reasonably expected to understand. Secondly, it provides that the physician will turn over copies of certain records and not the original records. And thirdly, the

most significant change in the file copy, is that in the event that the doctor refuses to turn over the records, the an agreed person that a patient name within 30 days after refusal, petition a superior court judge and ask that judge for an order requesting that the doctor disclose the requested information.

The proceeding would be held in chamber and the court, after a hearing, would have the discretion as to whether or not the issue, the order, upon the determination that the disclosure would be detrimental to the physical or mental health of the patient. If the court found such a situation to exist, then they could deny the request for disclosure. I move adoption.

DEPUTY SPEAKER FRANKEL:

The question is on adoption of House "A". Will you remark on its adoption? Will you remark on the adoption of House Amendment Schedule "A"? If not, all those in favor, please signify by saying aye.

REPRESENTATIVES:

Aye.

DEPUTY SPEAKER FRANKEL:

Those opposed, nay.

REPRESENTATIVES:

No.

DEPUTY SPEAKER FRANKEL:

The ayes have it. House "A" is adopted and it is ruled technical.

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House Amendment Schedule "A".

In line 16, place a period after the first word "patient" and stike the words "in terms and language the patient"

Strike line 17 in its entirety.

In line 21, strike the words "copies of"

In line 22, strike the comma after the word "including"

In line 23, strike the words "laboratory report," and strike the comma after the word "x-rays"

In line 24, before the word "prescriptions" insert the following: "and copies of laboratory reports,"

In line 34, after the period insert the following: "If disclosure of information is refused by a provider under this subsection, any person aggrieved thereby may, within thirty days of such refusal, petition the superior court for the judicial district in which he resides for an order requiring the provider to disclose the information. Such a proceeding shall be privileged with respect to assignment for trial. The court, after hearing and an in camera review of the information in question, shall issue the order requested unless it determines that such disclosure would be detrimental to the physical or mental health of the person or is likely to cause the person to harm himself or another."

In line 40, strike "laboratory reports,"

In line 41, strike the comma after "x-rays" and before "prescriptions" insert the following: "and copies of laboratory reports,"

In line 48, strike the word "the" and after the word "of" insert the words "any original"

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DEPUTY SPEAKER FRANKEL:

Will you remark further on this bill as amended by House "A"?

REP. BROOKS: (95th)

Mr. Speaker.

DEPUTY SPEAKER FRANKEL:

Rep. Brooks.

REP. BROOKS: (95th)

With the adoption of the amendment, I would just simply urge adoption of the bill.

DEPUTY SPEAKER FRANKEL:

Thank you, sir. Will you remark further on this bill as amended by House "A"? If not, would the staff and guests please come to the well. Members please take their seats. The Clerk will please open the machine.

The House of Representatives is now voting by roll. Would the members please return to the Chamber immediately. The House of Representatives is now voting by roll. Would the members please return to the Chamber immediately.

Have all the members voted? Have all the members voted? If so, the machine will be locked. The Clerk will

please take a tally. Would the Clerk please announce the tally?

CLERK:

House Bill No. 5908, as amended by House "A".

Total number Voting	144
Necessary for Passage	73
Those voting Yea	143
Those voting Nay	1
Those absent and not Voting	7

DEPUTY SPEAKER FRANKEL:

The bill as amended is passed.

CLERK:

Calendar Page 8, Calendar No. 465, Senate Bill No. 131, AN ACT CONCERNING REAL ESTATE LISTING AGREEMENTS, as amended by Senate Amendment Schedule "A", Favorable Report of the Committee on Insurance and Real Estate.

REP. KARSKY: (4th)

Mr. Speaker.

DEPUTY SPEAKER FRANKEL:

Rep. Felix Karsky.

REP. KARSKY: (4th)

Yes, Mr. Speaker, I move acceptance of the Joint Committee's Favorable Report and passage of the bill in concurrence with the Senate.

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guests please come to the well of the House? Would the members please take their seats? The machine will be opened.

The House of Representatives is now voting by roll. Would the members please return to the Chamber immediately. The House of Representatives is now voting by roll. Would the members please return to the Chamber immediately.

Have all the members voted? Have all the members voted? If so, the machine will be locked. The Clerk will please take a tally. Would the Clerk please announce the tally?

CLERK:

House Bill No. 7042, as amended by House "A" and Senate "A".

Total number Voting	144
Necessary for Passage	73
Those voting Yea	144
Those voting Nay	0
Those absent and not Voting	7

DEPUTY SPEAKER FRANKEL:

The bill as amended is passed.

CLERK:

Calendar No. 444, Substitute for House Bill No. 5908, AN ACT CONCERNING PATIENTS' MEDICAL RECORDS, as

amended by Senate Amendment Schedule "A" and House Amendment Schedule "A", Favorable Report of the Committee on Public Health.

REP. BROOKS: (95th)

Mr. Speaker.

DEPUTY SPEAKER FRANKEL:

Rep. Walter Brooks.

REP. BROOKS: (95th)

Yes, Mr. Speaker. I move for acceptance of the Joint Committee's Favorable Report and passage of the bill in concurrence with the Senate.

DEPUTY SPEAKER FRANKEL:

The question is on acceptance and passage of this bill in concurrence with the Senate. Will you remark, sir?

REP. BROOKS: (95th)

Yes, Mr. Speaker. The Clerk has an amendment, LCO No. 6562. May he please call and read?

DEPUTY SPEAKER FRANKEL:

The Clerk has LCO No. 6562, previously designated Senate Amendment Schedule "A". Would the Clerk please call and read the amendment?

CLERK:

LCO No. 6562, previously designated Senate Amendment Schedule "A", offered by Sen. Smith of the 12th District.

In line 20, insert "a copy of" after the word "patient"

In line 51, insert "a copy of the" after the word "a"

In line 59, strike "the provider who furnishes the health"

Strike line 60 in its entirety

In line 61, strike "furnish"

DEPUTY SPEAKER FRANKEL:

The amendment is in your possession. What is your pleasure, sir?

REP. BROOKS: (95th)

I move its passage, Mr. Speaker.

DEPUTY SPEAKER FRANKEL:

The question is on adoption of Senate Amendment Schedule "A". Will you remark on the adoption of Senate "A"?

REP. BROOKS: (95th)

Mr. Speaker.

DEPUTY SPEAKER FRANKEL:

Rep. Brooks.

REP. BROOKS: (95th)

Yes, Mr. Speaker. Simply, the amendment, as coming down from the Senate, is basically technical in nature and

provides a cleaning up of the language. I move its adoption.

DEPUTY SPEAKER FRANKEL:

Will you remark further on Senate "A"? Will you remark further on the motion? If not, all those in favor of the adoption of Senate "A", please signify by saying aye.

REPRESENTATIVES:

Aye.

DEPUTY SPEAKER FRANKEL:

Those opposed, nay. The ayes have it. Senate "A" is adopted and it is ruled technical. Will you remark further on this bill as amended by House "A" and Senate "A"?

If not, would the staff and guests please come to the well. Members please take your seats. The machine will be opened.

The House of Representatives is now voting by roll. Would the members please return to the Chamber immediately. The House of Representatives is now voting by roll. Would the members please return to the Chamber immediately.

Have all the members voted? Have all the members voted? The machine is still opened.

If all the members have voted, the machine will

be locked. The Clerk will please take a tally.

Would the Clerk please announce the tally?

CLERK:

House Bill No. 5908, as amended by House Amendment Schedule "A" and Senate Amendment Schedule "A".

Total number voting	144
Necessary for Passage	73
Those voting Yea	143
Those voting Nay	1
Those absent and not Voting	7

DEPUTY SPEAKER FRANKEL:

The bill as amended is passed.

CLERK:

Calendar No. 581, Substitute for House Bill No. 5852, AN ACT CONCERNING CONDITIONS OF EMPLOYMENT FOR UNCLASSIFIED EMPLOYEES IN HIGHER EDUCATION, as amended by Senate Amendment Schedule "A", Favorable Report of the Committee on Education.

REP. GOODWIN: (54th)

Mr. Speaker.

DEPUTY SPEAKER FRANKEL:

Rep. Dorothy Goodwin.

REP. GOODWIN: (54th)

Thank you, Mr. Speaker. I move acceptance of the

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all Senators please take their seats. An immediate roll call has been called for in the Senate. Will all Senators please be seated.

THE CHAIR:

Question before the Chamber is a motion to adopt Calendar No. 619, Substitute for House Bill No. 7227. File No. 623. The machine is open. Please record your vote. Has everyone voted? Machine is closed. Clerk please tally the vote. Result of the vote, 34 yea, 2 nay. The bill is adopted.

THE CLERK:

On page 8, Calendar 622, File Nos. 561 and 850, Substitute for House Bill No. 5908. An Act Concerning Patient's Medical Records. (As amended by House Amendment Schedule "A"). Favorable Report of the Committee on Public Health. The Clerk has an amendment.

THE CHAIR:

Senator Regina Smith.

SENATOR SMITH:

I move for acceptance of the Senate Amendment and ask that the ..

THE CHAIR:

Move acceptance of the committee's favorable report first, Senator.

SENATOR SMITH:

I'm sorry, Mr. President. I move acceptance of the committee's favorable report and also move for acceptance of the amendment and ask that the reading be waived.

THE CHAIR:

Let us act first on House Amendment "A". Do you wish to explain House Amendment "A"?

SENATOR SMITH:

House Amendment "A" simply adds a provision that will allow persons to petition superior court for disclosure of information that has been withheld by a provider that's if the physician or provider refuses or for some reason has not turned over the medical records which the bill calls for.

THE CHAIR:

Do you wish to remark further on House Amendment "A"? If not, all those in favor signify by saying aye. Those opposed, nay. The ayes have it. House Amendment "A" is adopted. Clerk please call the next amendment.

THE CLERK:

Senate Amendment Schedule "A", LCO No. 6562.

THE CHAIR:

Senator Regina Smith.

SENATOR SMITH:

I move for acceptance of the amendment and ask that the reading be waived.

THE CHAIR:

Without objection, you may proceed.

SENATOR SMITH:

This amendment simply indicates that a copy of the medical records would be turned over to the patient. In the original language, it doesn't refer to copy. It simply refers to records and the physicians felt that because of possible malpractice suits, that they should be allowed to keep the original file and that they could turn over a copy to the patient.

THE CHAIR:

Do you wish to remark further on Senate "A"? If not, all those in favor signify by saying aye. Those opposed, nay. The ayes have it. The amendment's adopted. Any other amendments?

THE CLERK:

No, Mr. President.

THE CHAIR:

No further amendments? We're now on the bill as amended by House "A" and Senate "A".

SENATOR SMITH:

To briefly explain the bill, Mr. President, it would require that certain health care providers upon a patient's written request and at a reasonable cost, furnish to a patient a copy of his health records including xrays and copies of laboratory reports, prescriptions and other information used in assessing his health condition. It would also require such providers to supply to a patient upon request complete and current information that he possesses regarding the patient's diagnosis

treatment and prognosis. Information relating to a psychiatric or psychological problem or condition would not have to be released and if there is no objection, Mr. President, I move that it be placed on the consent calendar.

THE CHAIR:

Senator Gunther.

SENATOR GUNTHER:

Mr. President, I have some reservations about this bill and one of them I think that this bill should go to the Judiciary Committee now since the House has put the provision on it that allows for a petitioning to the State or court. I believe this bill more rightly should go to the Judiciary Committee for an overview by that committee. I'll move that it should be referred to the Committee on Judiciary.

THE CHAIR:

The issue before the Chamber is a motion to adopt. Do you wish to remark further on the bill?

SENATOR GUNTHER:

Mr. President, I believe that it's improperly before us inasmuch this should have been referred by the House to the Judiciary.

THE CHAIR:

What is your motion, Senator Gunther?

SENATOR GUNTHER:

Well, I take it that I cannot take and counter the motion at this point and would ask for a withdrawal of the adoption from Senator

Smith and then referred to Judiciary for a proper overview.

THE CHAIR:

Senator Regina Smith.

SENATOR SMITH:

Mr. President, I would question whether this has to be referred to Judiciary because it simply just offers a provision that an individual can appeal to the superior court to have the situation reviewed which I don't think is an uncommon procedure in many respects. There are no penalties attached to the bill. If there were penalties attached I could see where it would have to be referred to Judiciary, but seeing there are no penalties and the fact that it just points to the ability of an individual to go and have the situation reviewed by the superior court, I really don't see why it has to go to the Judiciary Committee.

THE CHAIR:

Senator Gunther.

SENATOR GUNTHER:

If I may, Mr. President, I believe, according to our rules, that when we do have these provisions, it does require they go back to that committee for an overview.

THE CHAIR:

Senator, the only motion I have before me is a motion to adopt. Do you wish to remark further? If not, it will go on the consent calendar.

SENATOR GUNTHER:

I want a roll call then, Mr. President.

THE CHAIR:

Roll call has been requested. Clerk please make an announcement for a roll call.

THE CLERK:

Immediate roll call has been called for in the Senate. Will all Senators please take their seats. Immediate roll call has been called for in the Senate. Will all Senators please be seated.

THE CHAIR:

Question before the Chamber is a motion to adopt Calendar No. 622, Substitute for House Bill No. 5908, File No. 561 and 850. Machine is open. Please record your vote. Senator Baker. Has everyone voted? Machine is closed. Clerk please tally the vote. Result of the vote, 22 yea, 14 nay. The bill is adopted.

THE CLERK:

Calendar 626, File No. 858, Senate Bill No. 401. An Act Concerning Group Life Insurance For State Employees. Favorable Report of the Committee on Appropriations.

SENATOR O'LEARY:

Mr. President.

THE CHAIR:

Senator O'Leary.

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REP. GIONFRIDDO: (continued)
to speak and it will be through no fault of their own that the of other members of the public were not prompt (inaudible). The first speaker will be Dr. I. H. Friedberg, it looks like, and Dr. Charles Soderstrom will be following him.

DR. ISADORE H. FRIEDBERG: I am Dr. Isadore Friedberg, physician, speaking for the Connecticut State Medical Society, speaking first on Bill 5511 concerning surgical procedures relative to informing the individual about the choices in breast surgery. I really think that this is an area that probably does not require legislation.

I can't imagine that there are many surgeons in this state who are not sufficiently aware of the issues who are doing this work not to be in a position and want to discuss this matter in detail with their patients and I really feel that if you do pass this bill, you are going to have to pass a multiple, a number of bills because you will have to take care of every individual surgical procedure and then medical procedure and the problem is going to get horrendous. Speaking now of 5908, release of patient's medical records.

At the present time any records can be secured by subpoena in any case. So that if there is a need for records available, the subpoena process is there and can be used. To have medical records available to the individual, we'd have to break down medical records into two forms, the statistical data, which is no problem, everybody is perfectly willing to let anybody know what their lab work is, x-ray reports and the like. The issue is, I think, whether or not the physcian's records are to be considered separate and distinct. If this were to go through it would cause a tremendous burden because physician's records are often usually ways in which he reminds himself of this thinking, alternate possibilities, choices and the like and for example, if a person has a possible vaneral disease, or is possibly psychotic or possibly has a maligancy or the like, if this information is graphically exposed to the purview of the individual, I think it would make it very difficult for the physician properly to function and I feel that primary service would be accomplished.

DR. FRIEDBERG: (continued)

To speak on Bill 673 licensing boards and commissions, I think this issue is going to be simple. I think it basically is whether or not the Department of Health Services shall have total responsibility for the total
Cass. 3 regulation of all individuals under their control, totally and absolutely with the Boards acting purely in an advisory capacity or whether the Boards themselves have some jurisdictional and operational function and responsibility. As it stands, were the situation such that an individual in the Department of Health had for example a witch hunt complex or was or shall we say disposed not to be a kind gracious thoughtful, this would constitute grave problems because the powers now vested in the Department of Health Services are vast.

The individual responsible for receipt of complaint is prosecutor, judge and jury, the possibilities inherent in him are limitless and we feel this is too great a due position of power in one person's hands. The boards, if they fail to work properly appointed by the Governor are at the priviledge of the governor to be replaced and I think that this could satisfy these problems.

REP. GIONFRIDDO: You are at your three minutes. Rep. Lerner.

REP. LERNER: Doctor, I have a few questions on 5909 rape, since I'm the person that introduced the bill. It is my understanding that hospitals as a matter of course will release some patient's records. In addition, it's also my understanding that statutes in many states provide direct access to patients for release of these records and although some do make exceptions for psychiatric records and they also make exceptions for information that would detrimental to the patient, but from what I understands in these states this has worked very well and I really see no reason why the medical profession should object to this.

DR. FRIEDBERG: May I chose to make a distinction between information and though processes, conjectors, suspicions and non factual conclusions. I think that a doctor's records are typically his work papers. I don't feel that

DR. FRIEDBERG: (continued)
anybody has any objection whatsoever to sharing any statistical or confimed impression. If a person has a gall bladder problem, I have no problem in deseminating that to anyone who had a reasonable use of that information. What I object to is having my records exposed so that if I perhaps think that a person might psychotic or might have a venereal disease that at some later time I would not be forced to divulge that specific information to the patient when there has been at that time no specificity.

If a person has gonorrhea, I'm obligated to tell him. If a person is psychotic, I'm obligated to secure help, but until I validate my point of view, I think it would be unfair and would be distructive of our relationship. That's my only personal objection. Not of information, but of process and thought.

REP. LERNER: Doctor, I guess in conclusion, this is only a proposed bill. It is not fully drafted, but it does seem to have worked well in at least one dozen other states and I think there is a need for it, and I think testimony later on today will show that. Thank you.

REP. GIONFRIDDO: Thank you. Thank you very much. We have here that we will be able to move the site of the hearing. This is what we're going to do to insure that we stay on schedule as much as we can. We will call the next three speakers to speak up here. Everyone else can retire to the Hall of the House, but before you do that, let me tell you who the fourth and the fifth speakers are because they're the people who will be up first in the Hall of the House. Dr. Charles Soderstrom will be here. Dr. T. J. Dombrowski will be here and Austin Brimley will be here.

Starting with Leonard Tomat and Clara Williams, those will be the first two speakers in the Hall of the House. So, they will go down there and the rest of you can move down there and prepare yourselves for that, we will be down within nine minutes. Dr. Soderstrom.

DR. CHARLES SODERSTROM: Mr. Chairman, and Chairpeople, I'm Dr. Charles Soderstrom. I'm a practicing naturopathic physician and I'm representing the State Board of Examiners of which I am secretary. HB 5900

REP. GIONFRIDDO: (continued)
Tomat will be our next speaker, followed by Clara Williams.

MR. LEONARD TOMAT: I'm Leonard Tomat, the Executive Director of the Fairfield County Medical Association and I'm here to make comment on Bill 5908. I have a question as to the exact necessity for this Bill because there is already a process available to patients who wish to have information that is contained in a physician's medical record. Also, I think there should be clarified, the fact that we are talking about the physician's records and as Dr. Friedberg said earlier, these records are the physician's working papers and thus are the physician's actual property.

When you're thinking in terms of hospital records, those records are already available to the physician--to the patient, and the process is relatively easy. The various County Medical Associations have a process to assist the patient in obtaining the necessary information if the data is not readily available to the physician. I think the enactment of the Bill, and this Bill is very vague and has really no guidelines, would be doing a great disservice to the patient provision relationships. At this point, physicians are willing to provide summaries of information and are usually able to determine how much information the patient can actually comprehend and what type of information would be readily helpful in the particular needs of the patient and the illness that the patient is trying to cope with.

Since the Bill does not deal with specifics, there's nothing to mention of what happens or the consequences for not transferring the records. There is no provision for the medical judgment that the physician should be able to utilize in determining how much information should be given to a patient. Also, there's no mention as to the cost for preparing the records or the information that is going to be given to the patient. As you can well imagine, some of the medical records can be quite voluminous. Nor does the Bill, nor do our statutes here in Connecticut make any reference to how long the medical records maintained by physicians--how long those records have to be maintained. I certainly will be pleased to provide your Committee with examples or situations that

MR. TOMAT: (continued)
deal with the mechanism in which the County Associations can assist patients in obtaining information.

REP. GIONFRIDDO: Thank you. Our next speaker is Cara Williams, followed by --it looks like Eugene Hickey maybe.

MS. CLARA WILLIAMS: Mr. Chairman, members of the Committee, I'm Clara Williams, presently nursing at the University of Connecticut and a member of the Connecticut Nurses Association. The Connecticut Nurses Association supports the premise of proposed Bill 673 to restore the powers and duties of the professional health licensing boards. This would, we feel, increase the efficiency of the regulatory function since the individual licensing boards best know their own professionals.

For example, the State Board of Examiners of Nursing is in the best position to ensure high educational and practice standards and to promote professional responsibility within nursing. Obviously, the Department of Health service interest as so aptly described by Mr. Harriman earlier today, runs parallel with that of the professional boards. Relationships between the boards and the Department of Health Service should be, we feel, be collegially and with mutual input but that the control of practice clearly rests with the professionals. Thank you.

REP. GIONFRIDDO: Thank you. Eugene Hickey, followed by Sister Maria Joan O'Neill.

MR. EUGENE HICKEY: Members of the Committee, I come before you today as the co-chairperson of the Coalition of Social Work Organizations of Connecticut to speak on behalf of House Bill 5901 which proposes legal regulation of social workers. Our Coalition--

REP. GIONFRIDDO: Please, would you please pick up the microphone and speak right into it?

MR. HICKEY: Our Coalition was founded 18 months ago and consists of the following statewide social work organizations; the Association of Mental Health Clinics for Children, the Association of School Social Workers, the National

MS. PETERS: (continued)
We suggest language compatible to the Connecticut General Statute 20-250.

I wish to point out that we carefully avoided any type of request for license but rather equest certification under existing statutes which would be at no cost to the state. It is our understanding that the Department of Health Services does not object to this certification.

Please note that certification does not prohibit the practice of esthetics by others who are not certified. Certification of persons who choose the study the art of esthetics would, all else being equal, provide an added incentive in today's competitive job market.

The skin industry in the United States today is a multi-billion dollar industry and that is according to the American Association of Esthetics and Makeup. Skin Care Salons have been prevalent in Europe and now there are over 800 in the United States. Certifying the esthetician in Connecticut may create new opportunities for young persons seeking a career in sales and service of cosmetics make up art and beauty products. We thank you for your attention to this and hope that you will favorably act on this matter.

REP. GIONFRIDDO: Thank you. Jackie Coleman, followed by Joe Paoletta.

MS. JACKIE COLEMAN: Thank you Mr. Chairman. My name is Jackie Coleman. I am the Assistant Executive Director of the Connecticut Psychiatric Society. I'm appearing here today to testify on proposed Bill 5908. An ACt Concerning Release of a Patient's Medical Records. Some of the points which we were going to express in our testimony have been covered by other speakers so let me just summarize what else we have to offer in that regard.

The Connecticut Psychiatric Society is an organization composed of over 700 psychiatrists who practice in the State of Connecticut. Over the years, we have had several opportunities to comment on and participate in decisions made in the State of Connecticut regarding the confidentiality of records, particularly psychiatric records.

MS. COLEMAN: (continued)
Members of the General Assembly, the Judiciary Committee in particular, worked hard over the course of several sessions to strike the proper balance between freedom of information and the confidentiality of certain records. We are very concerned that proposed Bill 5908 could be used as a means to subvert those statutes. As we understand it, the proposed legislation is designed to promote the release of records to an attorney before a suit is initiated. As you know, these records cannot be subpoenaed until after a suit has been brought. It is a patient's privilege to have medical records of a case released upon his or her proper authorization. A psychiatrist who ignores a patient's proper authorization does so at his or her own peril.

There are items, particularly any psychiatric record, which if revealed to the patient, could be detrimental to his or her mental health. The need to obtain this information must be weighed carefully against possible harm to the patient. We feel that the current statutes are working properly in this regard. Thank you.

REP. GIONFRIDDO: Thank you. Joseph Paolella followed by John Archer.

MR. GARETTE CASEY: Mr. Chairman, members of the Committee, Mr. Paolello, the President of the Connecticut Commercial Ambulance Association was called back to New Haven immediately. My name is Garette Casey and I am the Vice President of the Connecticut Commercial Ambulance Association.

We appear here in support of Bill 5556, An Act Concerning the Transportation of Patients Who Require Medical Stretchers. In an effort to be brief, the problem is a current one and it ranges beyond the scope of the Office of Emergency Medical Services. The Office of Emergency Medical Services has proposed regulations prohibiting the use of stretchers in any other vehicle other than an ambulance but other agencies who offer medical transportation and have no real experience with the scope of this problem. What must be understood is that use of a stretcher by other vehicles, no attendant rides with the patient; no supplies are available to support the

MR. TILSON: (continued)
General's office says exists under the present bill. Litigation is in a formative state with respect to this matter. If it can be settled by a satisfactory legislation so much the better. But it's our position that at least as of the present, the limit is the 400-600, which is set forth in Representative DeZinno's bill. We will obviously be back to you at a later time when a substitute has been prepared. Thank you.

SEN. SMITH: Thank you, Mr. Tilson. Brett Flamm to be followed by Ralph Carter?

BRETT FLAMM: Thank you. My name is Brett Flamm and I'm an attorney in the Town of Seymour and member of the Connecticut and Florida bars and the American and Connecticut Trial Lawyers Association. I'm speaking in favor of Proposed Bill No. 5908.

The main problem involved is that as other speakers have mentioned, the private physician's records are acquirable. They can be obtained, but only in the present situation, after litigation has been initiated. At that point, a subpoena can be issued and the rules and statutes regarding discovery can be utilized.

However, the idea would seem to be in this day and age, to cut down or to reduce and eliminate as much as possible unnecessary litigation. And it is only by acquiring physician's records, prior to initiating litigation, that attorneys with the help of other doctors, and the attorneys' clients, can make the decision whether to pursue litigation or not.

Otherwise what has to be done, the case has to be put in suit, and the records subsequently acquired. I would just like to respond to the issue of the psychiatric privilege. The privilege does belong to the patient. It is one which the patient can waive, and the privilege again does not belong to the doctor. It is the one of the patient's, and a number of other states have apparently dealt with some problems in this area by requiring the physician to send the records to the patient's attorney if the physician feels that relinquishing the records to the patient would be detrimental to the patient's health.

ATT. FLAMM: (continued)
I would just like to say that I think that the cost of the reproduction of the records should cost be born by the patient, and instead of just saying licensed physicians, perhaps the term health care providers would be better, would just cover the full spectrum.

But I think this is an important means of eliminating unnecessary litigation, particularly where medical legal issues are involved. Thank you.

SEN. SMITH: Ralph Carter, to be followed by Eleanor, Eleanora Coates. Or Elena. Sorry.

RALPH COATES: Thank you. I wish to speak to the issue of House Bill No. 5885. I am Ralph W. Coates from Hamden, Connecticut. I'm the Director of hte Department of Diagnostic Imaging at Yale New Haven Hospital, and a member of the Legislative Committee of the Connecticut Society of Radiologic Technologists.

I wish to speak in support of this proposed legislation. In 37 states, ours included, it is permissible for my secretary and yours, to perform radiographic examinations on the general public without any formal training or awareness of radiation protection, either to themselves, or to their patients. We, in the radiologic profession, find this not only unacceptable, but potentially dangerous. Licensure is therefore proposed to establish necessary minimal standards to assure that these conditions will not continue.

Licensure to protect the public from unqualified and untrained operators of ionizing radiation equipment is required in 13 states. Three of these states are our neighbors, New Jersey, New York and Vermont. We are also informed that a bill similar to the one before you has been presented to the legislature in the State of Massachusetts.

My testimony will be related to our analysis of the cost of registration and licensure as proposed in this bill.

The committee has surveyed the thirteen states mentioned previously, to gather relevant information on items such as reciprocity, the use of the ARRT and other examining

MR. STEWART: (continued)

Finally, the bill does provide for a provision for further education and training. I think if anything is obvious these days, the nature of our social problems are changing very dramatically. We're having many more elderly, many more divorce, separated situations, which creates new demands for social work practice. Also, I think personally we're finding new technology and skills. I think it's important that people in our profession be encouraged all the time to seek further education.

Lastly, I think the person testifying from the psychological association mentioned the importance of examination. This bill does not include examination but virtue of the fact that it would allow licenses to only people with bachelor's and master's degrees in social work. Currently all these program are, enjoy a rigorous, rather standard. And we then amend our programs to a rigorous review of the student's progress both in class and field. And we feel that there's no one examination then that really can get out of this what is really important is the student's total progress through the bachelor's and master's program. And, the given degree, then, is recognition of the fact that they have met the requisite training of programs that have a strong reputation to standard to them.

So, for these reasons, we hope that you will give this bill consideration. We think this year we have a bill that the bulk of the social work profession is behind.

SEN. SMITH: Thank you very much. Mary Quinto.

MARY QUINTO: My name is Mary Quinto from Hartford. And I'm here to talk about the medical bills, 5908, and the others. And all of them except the protection bill are are already on the books. I have researched this problem for the past seven or eight years. And I think, would like to suggest that what is needed is legislation which addresses itself to the accuracy of medical records.

I was shocked after reading my medical record to learn how dishonest the medical profession is. I know it sounds harsh for me to say this, but it's true. I always thought medical records were written for information on the general public or patients but actually they're written for the

MS. QUINTO: (continued)
protection of the writer. And I think one of the states they had one of the hospitals in another state made a ruling that they told all the staff, this is a national problem, by the way, told all the staff at the hospital that when the patient left the hospital that everyone would get their hospital of their medical record. And they did that thinking that if the staff knew that the patients were going to get their medical records on leaving the hospital that it would be more accurate. And they found this to be, it was helpful although it was not a complete success.

In my, one instance in my case, as an example, when I had an arthritic flareup and a visiting nurse took me to one of the clinics at the hospital. Now the doctor was the head one of the outpatient clinic. I had never seen him in my life before and my complete physical consisted of him taking my blood pressure over my winter coat. And that was my complete physical. Now his whole report was falsified and he even wrote lab work which was never done, falsified it and it was fortunate for me that he made the false lab work come out normal. But because of his false report which was sent to the visiting nurses, my services were stopped.

I have suggested here in the past that maybe one of the things that could be done to help to correct this problem is that no one should be able to write anykind of lab work unless it's accompanied by a slip from the lab signed by the person that did the lab work and attached to the report. That way there would be two against one. If I took the doctor to court without such a procedure, it would be my word against his. This way it would be two against one and probably should be written with unerasable ink.

Also, another thing that could - I don't know if you want to listen to all this or whether I could meet with the committee at sometime or what.

SEN. SMITH: Do you have a few more comments to make that are brief?

MS. QUINTO: Well, I strongly urge that something be done with this very serious problem. Now, he could have given me cancer or something with that false reporting that he did. He did falsify lab work.

SEN. SMITH: Let me understand this. I thought initially you said that you opposed the bill. Do you support this bill or do you think that this bill wouldn't really do any good?

MS. QUNITO: No, the bills that have been introduced at this hearing today are very vague and they are already on the books

SEN. SMITH: Well, this specific bill with the medical records. The bill which you have been addressing yourself to. To protect consumers - now what am I looking at here - that physicians be required to release a patient's medical records upon receipt of proper authorization by the patient. That's the bill that you're talking about.

MS. QUNITO: Well, it's already on the books. You can get your medical record.

SEN. SMITH: So you feel you can already get your medical records.

MS. QUNITO: Yes.

SEN. SMITH: Then what you're -

MS. QUNITO: And not only that but the access to the records doesn't guarantee their accuracy.

SEN. SMITH: All right. So, okay. I think we, you know, understand your points. It almost really doesn't matter because you question the accuracy of the medical records. From your experience.

MS. QUNITO: I'd like to point out that they have legislation has been enacted concerning the unfairness of credit bureau records and also the accuracy of school records. They have passed legislation concerning that and I think they have also passed legislation concerning criminal records which a person, an individual can look at his criminal records and correct it. Now nothing has been done along this line concerning medical records.

SEN. SMITH: Okay. Thank you very, very much for your comments. Michael Danula, last person to testify.

HB 5901

MICHAEL DANULA: Good afternoon. I'm Michael Danula. I'm from Windsor Locks and I'm a social work student at St. Joseph