

Legislative History for Connecticut Act

HB 7239	PA 350	1989
House	1561, 6488, 11232-11259	(30)
Smart	739, 4112-4114, 4164A-4164B	(6)
Human Serv.	787, 841, 1300	(3)
Pub Health	457-461, 465-466, 470-471, 472, 480-482, 512, 550-552, 578-579	(19)
		(58)

Transcripts from the Joint Standing Committee Public Hearing(s) and/or Senate and House of Representatives Proceedings

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CONNECTICUT
GEN. ASSEMBLY
HOUSE

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House of Representatives Wednesday, March 22, 1989

PUBLIC SAFETY. H.B. No. 5784 (COMM) AN ACT CONCERNING BINGO, BAZAARS, RAFFLES AND GAMES OF CHANCE.

The bill was then referred to the Committee on FINANCE, REVENUE AND BONDING.

TRANSPORTATION. Substitute for H.B. No. 5975 (COMM) AN ACT REQUIRING A VEHICLE IDENTIFICATION NUMBER OF ALL WINDOWS OF NEW PASSENGER MOTOR VEHICLES.

The bill was then referred to the Committee on INSURANCE AND REAL ESTATE.

PUBLIC HEALTH. Substitute for H.B. No. 7239 (RAISED) AN ACT CONCERNING THE LICENSING OF NURSING HOMES.

The bill was then referred to the Committee on JUDICIARY.

TRANSPORTATION. Substitute for H.B. No. 7259 (RAISED) AN ACT CONCERNING THE AUTHORIZATION OF SPECIAL TAX OBLIGATION BONDS OF THE STATE FOR TRANSPORTATION PURPOSES FOR THE INSTALLATION OF NOISE BARRIERS IN ACCORDANCE WITH THE DEPARTMENT OF TRANSPORTATION'S PRIORITY LISTING.

The bill was then referred to the Committee on FINANCE, REVENUE AND BONDING.

GENERAL LAW. H.B. No. 7390 (RAISED) AN ACT CONCERNING THE APPLICATION OF THE CONNECTICUT UNFAIR TRADE PRACTICES ACT.

The bill was then referred to the Committee on JUDICIARY.

GOVERNMENT ADMINISTRATION AND ELECTIONS. H.B. No. 7481 (RAISED) AN ACT CONCERNING DISCLOSURE OF INFORMATION BY STATE EMPLOYEES TO THE STATE ETHICS COMMISSION.

The bill was then referred to the Committee on LABOR AND PUBLIC EMPLOYEES

CLERK:

Mr. Speaker, the only further business is today's Calendar.

SPEAKER BALDUCCI:

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House of Representatives

Friday, May 12, 1989

CLERK:

Calendar 482, page 19, Substitute HB7239. AN ACT
CONCERNING THE LICENSING OF NURSING HOMES.

Favorable Report of the Committee on
APPROPRIATIONS.

REP. FRANKEL: (121st)

Madam Speaker?

DEPUTY SPEAKER POLINSKY:

Representative Frankel.

REP. FRANKEL: (121st)

May that bill be referred to the Committee on
Human Services?

DEPUTY SPEAKER POLINSKY:

Motion is to refer the bill to the Committee on
Human Services. Is there objection? Hearing no
objection, so ordered.

CLERK:

Calendar 257, page 15, Substitute HB7279. AN ACT
CONCERNING SNOWMOBILES AND ALL-TERRAIN VEHICLES.

Favorable Report of the Committee on
TRANSPORTATION.

REP. FRANKEL: (121st)

Madam Speaker, I would move this item be passed
temporarily.

DEPUTY SPEAKER POLINSKY:

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SPEAKER BALDUCCI:

Thank you, Representative Jaekle. Representative Frankel, do you accept the yield?

REP. FRANKEL: (121st)

Yes, I do, Mr. Speaker. At this time I would move the House stand in recess, subject to the Call of the Chair with the intention of resuming business at approximately 3:00 p.m. this afternoon.

SPEAKER BALDUCCI:

Is there objection? Seeing none, the House stands in recess.

The House recessed at 1:50 o'clock p.m., to reconvene at the Call of the Chair.

The House reconvened at 3:43 o'clock p.m., Speaker Balducci in the Chair.

SPEAKER BALDUCCI:

The House will come to order. Clerk, please return to the Call of the Calendar.

CLERK:

Please turn to page 17, where you will find Calendar 482, Substitute HB7239. AN ACT CONCERNING NURSING HOMES.

Favorable Report of the Committee on HUMAN SERVICES.

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REP. DEZINNO: (84th)

Mr. Speaker?

SPEAKER BALDUCCI:

Representative DeZinno of the 84th.

REP. DEZINNO: (84th)

Yes, Mr. Speaker. I move for adoption and passage of the bill.

SPEAKER BALDUCCI:

The question is on passage. Will you remark?

REP. DEZINNO: (84th)

Yes, Mr. Speaker. Mr. Speaker, this bill establishes detailed procedures for licensing and regulating nursing homes in Connecticut. It requires nursing home license applicants to provide the Department of Health Services with comprehensive information concerning the business interest and experience of those owning and managing nursing homes.

Mr. Speaker, this bill needs some amendments. I'd like to call LCO6080.

SPEAKER BALDUCCI:

(Gavel) Members of the Chamber, I know we have just returned. Hopefully, we can move through a few pieces of legislation before the dinner break, the short dinner break. If we would give our attention to Representative DeZinno.

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REP. DEZINNO: (84th)

Thank you, Mr. Speaker. May I--

SPEAKER BALDUCCI:

Clerk, please call LCO6080, designated House "A".

CLERK:

LCO6080, House "A", offered by Representative DeZinno.

SPEAKER BALDUCCI:

The question is on summarization. Is there objection? Seeing none, Representative DeZinno.

REP. DEZINNO: (84th)

Yes, Mr. Speaker. This moves to a biennially licensure program for those departments within the Department, those agencies, those departments within the agency known as the Department of Health Services. We are trying to bring their individual departments into a two year licensing program.

It is a cost savings to the state, and I move for adoption of the amendment, sir.

SPEAKER BALDUCCI:

The question is on adoption of House "A". Will you remark? Representative Jaekle.

REP. JAEKLE: (122nd)

Thank you, Mr. Speaker. I can't help but rise when I hear this is a cost savings to the state. That is

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music to my ears. But I am wondering if the Office of Fiscal Analysis shares that conclusion, and whether that statement is contained in a fiscal note on this amendment and would like to ask through you, Madame Speaker, to the proponent of the amendment if there is a fiscal note on the amendment, and if so, what the fiscal note says.

DEPUTY SPEAKER POLINSKY:

Representative DeZinno.

REP. DEZINNO: (84th)

Boy, do we change fast! Madam Speaker, had my head down. Through you, Madam Speaker, I do not have a note stamped. Oh, wait a minute. LCO-- Just handed to me. Bear with me for a second, Representative Jaekle. If you will bear with us for a second, Mr. Minority Leader, they are hand delivering you a copy at this minute.

DEPUTY SPEAKER POLINSKY:

The Chamber will stand at ease for a few moments.

(Gavel) Representative Jaekle.

REP. JAEKLE: (122nd)

Thank you, Madam Speaker. I am possession of the fiscal note. It does indicate a potential cost savings to the state by moving away from the annual inspections to biennial inspections. I wish it had a dollar

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amount, a big fat figure. I appreciate that it does seem like it would save the state money.

Thank you.

DEPUTY SPEAKER POLINSKY:

Always a good thing, sir. Will you remark further on House "A"? Representative Emmons.

REP. EMMONS: (101st)

Madam Speaker, through you, a question to the proponent of the amendment?

DEPUTY SPEAKER POLINSKY:

Representative DeZinno, prepare yourself. Please frame your question, Representative Emmons.

REP. EMMONS: (101st)

Yes. Representative DeZinno, usually when we go to annual or biennially, there is some type of a phase in, so that either half of them are every two years on one staggered system and the other half are another two years. And my question, through you, is how is it going to be implemented going from annually to biennially?

DEPUTY SPEAKER POLINSKY:

Representative DeZinno.

REP. DEZINNO: (84th)

Thank you, Madam Speaker. Through you, Madam Speaker, to Representative Emmons, I believe they are

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going to start this with, this fiscal year, starting July 1.

DEPUTY SPEAKER POLINSKY:

Representative Emmons.

REP. EMMONS: (101st)

Thank you, Madam Speaker, just one more question because I'm not familiar with this. Through you, are the license renewals, do they come throughout the year and according to when a nursing home got its original one or is it something where all them come due and payable at one particular month in a year?

DEPUTY SPEAKER POLINSKY:

Representative DeZinno.

REP. DEZINNO: (84th)

Yes, thank you, Madam Speaker, through you, once again, to Representative Emmons. I'm assuming, and I'm assuming that these are on a staggered basis, some of the departments within the agency of Department of Health Services come due January 1, some come due, I know, April 1, and some October 1, which one specifically, I cannot tell you at this time. I just know that they are on staggered systems.

REP. EMMONS: (101st)

Thank you, Madam Speaker.

DEPUTY SPEAKER POLINSKY:

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DEPT: You're quite welcome. Will you remark further on House "A"? Will you remark further on House "A"? If not, let us try your minds. All those in favor of the amendment please signify by saying aye.

REPRESENTATIVES:

Aye.

DEPUTY SPEAKER POLINSKY:

Opposed nay.

The ayes clearly have it.

The amendment is adopted.

House Amendment Schedule "A".

In line 298, bracket "annually" and after the closing bracket insert "BIENNIALLY"

In line 361, strike ", EXCEPT A"

In line 362, strike "NURSING HOME LICENSE," and insert an opening bracket before "one" and after "year" insert "] TWO YEARS"

In line 365, bracket "each" and after the closing bracket insert "THE APPROPRIATE"

In line 366, after "license" insert "OR A NURSING HOME LICENSE"

In line 367, bracket "annually" and after the closing bracket insert "BIENNIALLY"

In line 371, bracket "an annual" and after the closing bracket insert "A"

In line 375, insert an opening bracket before "and"

In line 383, insert a closing bracket after the comma

In line 392, strike "SHALL BE VALID FOR"

In line 393, strike "A TERM OF TWO YEARS AND" and after "RENEWED" insert "BIENNIALLY"

In line 498 bracket "an annual" and after the closing bracket insert "A BIENNIAL"

In line 502, bracket "annual" and after the closing bracket insert "BIENNIAL"

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DEPUTY SPEAKER POLINSKY:

Will you remark further on the bill as amended?

REP. DEZINNO: (84th)

Yes.

DEPUTY SPEAKER POLINSKY:

Representative DeZinno.

REP. DEZINNO: (84th)

Thank you, Madam Speaker. The Chair is in possession, once again, or the Speaker is in possession once again of LCO7855. May the Clerk call and read.

DEPUTY SPEAKER POLINSKY:

Will the Clerk please call LCO7855, which shall be designated House Amendment "B" and will the Clerk please read.

CLERK:

LCO7855, House "B", offered by Representative DeZinno.

DEPUTY SPEAKER POLINSKY:

The question is on adoption of House "B". Will you remark? Representative DeZinno.

REP. DEZINNO: (84th)

Yes, Mrs. Speaker, yes, Mrs. Speaker. Madam Speaker, LCO7855 addresses really two concepts. One, we have a critical need for nurses in Connecticut and

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the first part, where it says, Section 21, "This act shall take effect, July 1, 1989, is aimed towards the graduate Licensed Practical Nurse, so that those particular nurses may come on board and work in our nursing home settings as of July 1.

The second part of the amendment, where it addresses January 1 of 1990 is to allow for those people that have temporary licenses to come on board, this is in the administrative field of nursing homes, for them to come on board at an earlier date, so that we can make utilizations of people that are temporarily licensed as nursing home administrators, in the first part, as I say, to make utilization of the graduate nurse, LPN graduate nurse.

I move for adoption of the amendment.

DEPUTY SPEAKER POLINSKY:

The motion is on adoption of House "B". Will you remark further on House "B"? Will you remark further? If not, let us again try our minds. All those in favor of the amendment please signify by saying aye.

REPRESENTATIVES:

Aye.

DEPUTY SPEAKER POLINSKY:

Opposed nay.

House "B" is adopted.

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House Amendment Schedule "B".

After line 958, insert the following:

"Sec. 21. This act shall take effect July 1, 1989, except that sections 1 to 18, inclusive, shall take effect October 1, 1989, and section 20 shall take effect January 1, 1990."

DEPUTY SPEAKER POLINSKY:

Will you remark further on the bill as amended?

Representative DeZinno.

REP. DEZINNO: (84th)

Thank you, Madam Speaker. Madam Speaker, there were some other amendments floating around. At this particular time I'm not in possession of them, so at this time I'm going to say that I wish that we would pass the bill as adopted by House "A" and House "B". Thank you.

DEPUTY SPEAKER POLINSKY:

Will you remark further on the bill as amended?
Representative Thorp of the 89th.

REP. THORP: (89th)

Madam Speaker. As one in whose district there are two rather large nursing homes, I have become aware of some of the inspection process and I have an amendment to address that which would say that no inspections could be done on days like Christmas Eve and New Year's

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Day and so forth and so on.

I've had had some --.

DEPUTY SPEAKER POLINSKY:

Sir, would you like to call the amendment first.

REP. THORP: (89th)

I was hoping to save some time and not even call the amendment. That was my next utterance. I was going to say I have had some nice chats with the people from the Health Department and in the interest of moving things along, will not be calling the amendment.

DEPUTY SPEAKER POLINSKY:

Oh, I apologize for interrupting you, sir. Thank you. Will you remark further on the bill as amended? Will you remark further on the bill as amended? Representative DeZinno.

REP. DEZINNO: (84th)

Madam Speaker, may I yield to Representative Cocco please.

DEPUTY SPEAKER POLINSKY:

Will you accept the yield, Ma'am.

REP. COCCO: (127th)

Yes, Madam Speaker. Thank you. Madam Speaker, the Clerk has an amendment, LCO7885. Would the Clerk please call and read.

DEPUTY SPEAKER POLINSKY:

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Will the Clerk please call LC07885, which shall be designated House Amendment "C" and will the Clerk please read.

CLERK:

LC07885, House "C", offered by Representative DeZinno, et al.

DEPUTY SPEAKER POLINSKY:

Representative Cocco.

REP. COCCO: (127th)

Madam Speaker, thank you. The amendment, if you look at the file copy, is self-explanatory. It simply deletes the language in the file copy that allows a public hearing at the discretion of the commissioner and I move adoption.

DEPUTY SPEAKER POLINSKY:

The motion is on adoption of House "C". Will you remark further? Representative Cocco.

REP. COCCO: (127th)

Madam Speaker, thank you. Just a couple of points for the Chamber to consider. In reality, the language that's in the file copy is unnecessary. At the present time we already have the right for a public hearing at any time, not only at the time of licensure, which is every two years, but any time that a family member, a patient, or an employee sees in that nursing home

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something that is questionable, the report can be made and the Department of Health Services will order a hearing.

There is input also during the licensing process. That input comes in three ways. When the Health Department comes to the facility for an inspection, there must be posting, posting that is easy for families and patients to see and at that period of time family members, patients and staff can meet with those people who are examining the nursing home for licensing.

Connecticut's licensing standards are among the strictest in the United States and the Department of Health Services strictly enforces such standards. In light of this and the ample input into the process, there is no reason to include this provision. Thank you, Madam Speaker.

DEPUTY SPEAKER POLINSKY:

The motion is on adoption of House "C". Will you remark? Representative Doreen Del Bianco.

REP. DEL BIANCO: (71st)

Thank you, Madam Speaker. Madam Speaker, I rise to oppose this amendment. I'd like to give the Chamber some history of where this language comes from and what has happened.

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DEPUTY SPEAKER POLINSKY:

I think that the Chamber has gotten a bit noisy. Obviously, as there is going to be some debate on this amendment, and I would request the Chamber to keep the sound down so that those of us interested in the debate can hear it. Thank you. I apologize, Representative Del Bianco.

REP. DEL BIANCO: (71st)

Thank you, Madam Speaker. This language was put on in the Public Health Committee after some debate about its necessity. It was voted on and was affirmed as being needed in part of this bill. It was then sent to Judiciary where I guess the language was taken off. Then the bill was sent to Human Services where, once again, after discussion this language to say if there is a request for a public hearing during licensure, the commissioner could ask that there be one, so this has had plenty of discussion and when the discussion has taken place in both the Human Services and Public Health Committee and votes have been taken on it, they voted to keep this language in the bill. That's No. 1.

No. 2, I'd like to talk about the argument that the commission can already do it. The fact of the matter is that in other licensure instances, when the commission has been asked by various parties to hold a

public hearing, they have said that they do not have the -- that they at that time did not have the statutory provision to hold a public hearing during licensure.

I do not understand why when a request is made they don't have the statutory requirement for it, provision for it, but when it then becomes part of the bill, they say they can do it. I'd rather be safe than sorry. I would urge the members to keep this language in the bill. It's important when questions of care come up that people have an avenue. This is one avenue during licensure in which they can participate.

The bill has no fiscal impact. Actually, in last year's discussions about nursing home licensure, the language originally was much stronger. The language said that when there was a request, it gave no discretion to the commissioner, but said that he had to have a public hearing about this issue. As a result of the costliness of that and much discussions, we waited until this bill and put it in where we found it was much more palatable to the parties.

Once again, I think this issue is an issue of open government. Nursing home industries I don't think would be hurt by this. I think that it just gives once again people who are involved in the service to the

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elderly an opportunity to participate in the process and I feel strongly enough about this amendment, Madam Speaker, that when the vote is taken, I request that the vote be taken by roll.

DEPUTY SPEAKER POLINSKY:

The question is on a roll call. All those in favor of a roll call please indicate by saying aye.

REPRESENTATIVES:

Aye.

DEPUTY SPEAKER POLINSKY:

The requisite 20% having been met, when the vote is taken, it shall be taken by roll call. Will you remark further on the amendment? Representative Grabarz.

REP. GRABARZ: (128th)

Thank you, Madam Speaker. I rise in support of the comments made by Representative Del Bianco and in opposition to the amendment. This amendment was discussed in the Public Health Committee. The Public Health Committee was in agreement that the public hearing was an essential part of this bill. I think that the public hearing represents the best consumer interest as regards to patient rights and nursing home care. I think it's in the best interest of the general public that this language remain in the bill and I would ask the House to oppose this amendment. Thank

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you, Madam Speaker.

DEPUTY SPEAKER POLINSKY:

Will you remark further on House "C"?
Representative Paul Gionfriddo.

REP. GIONFRIDDO: (33rd)

Thank you, Madam Speaker. Madam Speaker, I rise in opposition to this amendment. I think it should just be noted for the sake of the body that we worked long and hard over this issue not only this year, but last year too when the nursing home bill came before the Public Health Committee at that time. There was considerable discussion about this particular aspect of the bill and I felt that we had come to some agreement among the legislators at that time that this was not one of the more controversial aspects of it, that in fact this was good public policy, this was good open government and this was something that would do well for our constituents, for the people who would be using the nursing homes, for the people who worked in the nursing homes and for people just plain interested in nursing homes in the State of Connecticut.

I don't think it's a bad idea, therefore, to leave this kind of a provision in the act. In fact, it's a very good idea. I think that it's great that the bill got to us in this form so that we could take a look at

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this provision. I think it's great that we have an opportunity to act on it. I don't think this amendment before us, although I have great respect for all of the sponsors of this amendment, is precisely the kind of forum through which we might want to be discussing this amendment. I would hope, I would hope that the body would turn down the amendment, would leave intact the provision in the bill. So much work has gone into this. It's really a small matter, but it's, I think, a great benefit to us all and I would urge rejection, therefore, of the amendment. Thank you, Madam Speaker.

DEPUTY SPEAKER POLINSKY:

Thank you, sir. Will you remark further on the amendment? Representative Gyle.

REP. GYLE: (108th)

Yes, Madam Speaker, thank you. I rise in support of the amendment. I rise in support of the --.

DEPUTY SPEAKER POLINSKY:

It may be late in the afternoon, but it's going to get later, so let's keep the noise down or we'll all have headaches by 10:00. I apologize, Representative Gyle, please proceed.

REP. GYLE: (108th)

Thank you, Madam Speaker. I rise in support of the amendment because I think it should be noted that we

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were not unanimous in the Public Health Committee about whether this provision should be included or not. I think it's important to realize that the people who want this provision are very well-intentioned. I understand their feelings, but it would be redundant. It would also be a chance for people to have the publicity that could be quite destructive to a nursing home that was really trying to do its best for its patients.

Having just gone through the personal experience of having my father going into a nursing home, when I say I know the guilt that some people feel, I do know that guilt, and it's a terrible thing when an aged parent has to go away from his own home and because of that many people feel very strongly that no place where their parents go or their loved ones go is ever going to be good enough. It's never going to be the right place and to prove what good children they are or what good relatives they are, they're going to complain and that's just a fact of life, they do.

We do have a procedure in place for any complaints to be investigated and it's my information that every single complaint is investigated, that there is a deliberation made and that you can see the consensus that the commission comes to, the Department on Aging

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comes to, on each and every complaint. We have an ombudsman in every single nursing home and they also are available for anybody who feels that there are things in that nursing home that they are upset about.

Should the media pick up on the fact that these nursing homes are going to have people that are complaining about them, it's going to raise a lot of fear and a lot of anxiety in the families of the people that are already in these nursing homes. That fear and anxiety could very well be wrong, but because of this media event, these people are going to be anxious and upset about their loved ones.

I don't think the concept of a public hearing is bad, but I think the concept of getting people upset when the charges could be very well unfounded and could come from people who are very concerned about their loved ones and are mistaken in their accusations. I think what we need to do is let the commissioner and the Department on Aging do their work. They have done a beautiful job so far, and not muddy the waters with public hearings that could deteriorate into something that would be very unfortunate for the families and for the people in those nursing homes.

There would be pressure on the commission to grant public hearings. It would be very difficult should we

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put this in statute for them to say no even if they felt those hearings were unsubstantial, would be unsubstantial.

So, therefore, I ask you to support this amendment. I don't it's necessary and I think it's important to preserve the fact that these nursing homes are doing the best they can and they do have oversight.

DEPUTY SPEAKER POLINSKY:

Will you remark further on the House "C"? Will you remark further on House "C"? If not, will all members please take their seats -- sorry. Representative Fahrbach.

REP. FAHRBACH: (61st)

Thank you, Madam Speaker. I too rise in support of this amendment. As a member of the Public Health Committee, this issue was debated. It was not unanimous to include the hearing process in the legislation because the hearing process is already there. It's already in place. It can be taken advantage of if people feel that there are complaints and those complaints that they may have with the nursing homes should not wait until a contract renewal is up for a hearing. Those complaints should be brought at the time they arise.

This amendment is a very good amendment and I hope

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everyone will support it.

DEPUTY SPEAKER POLINSKY:

Will you remark further on House Amendment "C"?

Will you remark further?

REP. RENNIE: (14th)

Madam Speaker.

DEPUTY SPEAKER POLINSKY:

Representative Rennie.

REP. RENNIE: (14th)

I rise in opposition to this amendment for just a couple of reasons. I think they have been most eloquently stated by Representative Del Bianco, but I think also that we need to consider that first of all that openness is usually not something that causes problems in any institution. I think in this case that's also true. I think there are more problems that will arise in secrecy, rather than with the light of public interest shining on them.

In addition to that, I think we also have to realize that, (1) the major source of funds for many of these nursing homes has become the taxpayers in Connecticut through the State of Connecticut and, therefore, I think it's important that those taxpayers have a right to observe a fundamental aspect of this process, which is the licensing process and, therefore,

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I believe that it's simply a matter of public policy and public interest that this amendment be defeated today. Thank you, Madam Speaker.

DEPUTY SPEAKER POLINSKY:

Will you remark further on the bill?

Representative Cocco.

REP. COCCO: (127th)

Thank you, Madam Speaker. The Representative brought up something very interesting when he mentioned taxpayers. In Bridgeport, we have a municipally owned nursing home, which is subsidized by the taxpayers in that city, who already pay a very high property tax. A million dollars or more a year is subsidized, not only for people who live within our city, but also for people who live without our city. Those taxpayers can't bear that burden.

And I would feel very badly if they did not have recourse, but they do. When those people are there to inspect that nursing home, it is posted. Anyone can request the hearing at that time. And I have been assured by the Department, who is not in favor of this particular phase of the bill, that that hearing would be granted once that problem was brought to their attention.

I ask the Chamber to vote for this amendment.

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Thank you, Madam Speaker.

DEPUTY SPEAKER POLINSKY:

Will you remark further on House Amendment "C"?
Will you remark further? If not, will all members
please take their seats? Staff and guests, to the Well
of the House. The machine will be opened.

CLERK:

The House of Representatives is now voting by roll.
Members, report to the Chamber. The House is taking a
roll call vote. Members, to the Chamber please.

Members, report to the Chamber. The House is
voting by roll call.

DEPUTY SPEAKER POLINSKY:

Have all members voted, and is your vote properly
recorded? Have all members voted? If all members have
voted, the machine will be locked, and the Clerk will
take a tally. Clerk will announce the tally.

CLERK:

House Amendment Schedule "C" to HB7239:

Total Number Voting	149
Necessary for Adoption	75
Those Voting Yea	79
Those Voting Nay	70
Those absent and not Voting	2

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DEPUTY SPEAKER POLINSKY:

The bill as amended is passed. Oops! Excuse me. That was on the-- I was rushing things. House "C", the amendment, fails. I must apologize. I should look before I leap. House "C" is adopted.

House Amendment Schedule "C":

In line 399, before "(3)" insert "AND"
 In line 403, insert a period after the word
 "REGULATIONS"
 Strike line 404 in its entirety
 In line 405, strike "COMMISSIONER."

DEPUTY SPEAKER POLINSKY:

By the way, for those of you who wonder why we haven't been saying amendments are ruled technical, as of this date, we don't have to do it til the end of the session. That's about the only mistake I didn't make on this one.

Will you remark further on the bill as amended?
 Representative DeZinno.

REP. DEZINNO: (84th)

Madam Speaker, we now have a very important bill as amended by House "A", House "B", House "C". I think we should put it to bed and vote it. Thank you.

DEPUTY SPEAKER POLINSKY:

Will you remark further on the bill as amended?

pat

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Will you remark further on the bill? Representative Metsopoulos.

REP. METSOPOULOS: (132nd)

Yes, Madam Speaker, thank you. While I agree with a lot of the components of this bill, I do hope that the Commissioner will listen to what the legislative intent was. Many people had different reasons for voting against the amendment that just failed. Having had a grandmother who was in a nursing home, and some of the conditions that existed in that nursing home, the public hearing process is necessary. And I do hope that the Commissioner will take advantage of the discretion that he has, in opening up the process.

Because it is only when that process is opened up that some of those problems can get addressed and come to light. We talk about the problem with it being used as a forum and being a media spectacle. Well, I can tell you that many times, what happens currently is what's leaked out to the press becomes a media spectacle, and a lot is done in secrecy and in the dark.

So, I do hope the Commissioner takes advantage of what rights he has, and I do hope that the public is informed of the processes they have in addressing some of their concerns in the nursing home industry. It is

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an industry that is under a fantastic pressure, but it is an industry that does provide care and that a lot of seniors, and not only senior citizens, but a lot of individuals in our society rely on that care.

And quality care is suffering in a number of those institutions. And I only hope that the Commissioner does use the law to his greatest advantage. Thank you, Madam Speaker.

DEPUTY SPEAKER POLINSKY:

Thank you, sir. Will you remark on the bill as amended? Will you remark on the bill as amended? If not, will all members please take their seats? Staff and guests, to the Well of the House. The machine will be opened.

CLERK:

The House of Representatives is voting by roll.
Members, please report to the Chamber. The House is voting by roll. Members, to the Chamber please.

DEPUTY SPEAKER POLINSKY:

Have all members voted, and is your vote properly recorded? Have all members voted? If all members have voted, the machine will be locked, and the Clerk will take a tally. Clerk will announce the tally.

CLERK:

pat

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HB7239, as amended by House Amendment

Schedules "A", "B", and "C":

Total Number Voting 150

Necessary for Passage 76

Those Voting Yea 148

Those Voting Nay 2

Those absent and not Voting 1

DEPUTY SPEAKER POLINSKY:

This time, the bill as amended is passed.

CLERK:

Page 14, Calendar 424, HB5174. AN ACT CONCERNING
REAL PROPERTY TAKEN BY EMINENT DOMAIN FOR
TRANSPORTATION PURPOSES. (As amended by House Amendment
Schedule "A").

Favorable Report of the Committee on
FINANCE, REVENUE AND BONDING.

The Committee recommends passage without House "A".

REP. PRAGUE: (8th)

Mr. Speaker?

SPEAKER BALDUCCI:

Representative Prague of the 8th.

REP. PRAGUE: (8th)

Thank you, Mr. Speaker. I move the Joint
Committee's Favorable Report and passage of the bill.

Mr. Speaker?

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WEDNESDAY
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March 22nd.

THE CHAIR:

Without objection, so ordered.

SENATE AGENDA #4

1. SENATE BILL FAVORABLY REPORTED WITH A CHANGE OF REFERENCE - to be referred to committee indicated

Public Safety

SB909 An Act Permitting the Use of a Branch of Military Service Rated Disability for Purposes of the Veterans' Property Tax Exemption.

REFERRED TO: FINANCE, REVENUE AND BONDING

2. BUSINESS FROM THE HOUSE:

HOUSE BILL FAVORABLY REPORTED WITH A CHANGE OF REFERENCE - to be referred to committee indicated

Public Health

Substitute HB7239 An Act Concerning the Licensing of Nursing Homes.

REFERRED TO: JUDICIARY

END SENATE AGENDA #4

THE CHAIR:

Senator Mustone.

SENATOR MUSTONE:

Yes, Mr. President, I move that the Senate stand adjourned until 2:00 p.m. tomorrow afternoon and there will be a Senate Democratic Caucus at 1:00 p.m.

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3947-4317

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Mr. President, could the Chamber stand at ease for one minute, please.

THE CHAIR:

Beg your pardon sir, I didn't hear you. Stand at ease?

SENATOR PRZYBYSZ:

Yes, thank you.

THE CHAIR:

The Senate will stand at ease.

SENATOR SPELLMAN:

Mr. President, may that matter be PT'd at this point in time, please?

THE CHAIR:

Passed Temporarily.

THE CLERK:

Calendar Page 4, Calendar 586, File 590 and 834, Substitute HB7239, AN ACT CONCERNING NURSING HOMES. As amended by House Amendment Schedules "A", "B" and "C". Favorable Report of the Committee on HUMAN SERVICES.

THE CHAIR:

Senator Matthews.

SENATOR MATTHEWS:

Mr. President, I move adoption of the Joint Committee's Favorable Report in concurrence with House Amendments "A", "B" and "C".

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THE CHAIR:

Thank you. Are there any amendments?

THE CLERK:

No amendments, Mr. President.

THE CHAIR:

Senator Matthews, will you remark?

SENATOR MATTHEWS:

Thank you, Mr. President. This bill, Mr. President establishes a detailed procedure for licensing and regulating nursing homes. The amendments create a licensure procedure which take place biannually. Furthermore they would allow a person without a Masters in long term care administration to be a nursing home administrator. This would fulfill and fill some of the many vacancies that nursing homes are experiencing.

In addition it would allow Practical Nurses, who re allowed to practice in hospitals after they graduate but before their licensure examination results and are not permitted to do so in a nursing home. This would permit that and in addition it would remove and eliminate a provision in the bill that gave the Department of Health Services the discretion to hold a public hearing concerning nursing home license renewal.

This bill, Mr. President, does provide tremendous protections to the consumer in our State and to the

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entire field of nursing homes and the patients involved. In the event there is a forfeiture or a financial problem the nursing home, that information would be available to the Department of Health Services. They would be to investigate, ascertain whether a nursing home operator had a poor performance record or had some type of criminal record.

In the event a nursing home did enter into receivership the nursing home...the Department of Health Services would have this information as to their solvency and would be able to be prepared to place nursing home residents in other facilities.

In toto, Mr. President, it is a good bill that has been worked on for many months by the nursing home industry as well as the Department of Health Services and it fulfills a real need for the industry and for the Department and for the consumer. I move its adoption.

THE CHAIR:

Further remarks? Senator Matthews.

SENATOR MATTHEWS:

If there are no objections, Mr. President, I move this to the Consent Calendar.

THE CHAIR:

Without objection, so ordered.

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amendment by House Amendment Schedules "A" and "D".

The machine is open, please record your vote.

Senator Smith, Senator Avallone, Senator Hale,
Senator Larson. Senator Avallone, Senator Hale.

The machine is closed.

Clerk, please tally the vote.

The result of the vote:

28 Yea

7 Nay

The bill is adopted.

Clerk, please make an announcement for an immediate
roll call on the Consent Calendar.

THE CLERK:

Immediate roll call has been ordered in the Senate
on the Consent Calendar. Will all Senators please
return to the Chamber. Immediate roll call has been
ordered in the Senate on the Consent Calendar. Will
all Senators please return to the Chamber.

THE CHAIR:

Please give your attention to the Clerk who will
read the items that have been referred to the Consent
Calendar. Mr. Clerk.

THE CLERK:

Consent Calendar #1 begins on Calendar Page 1,
Calendar #21, Substitute HB5693. Calendar Page 3,

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Calendar #580, Substitute HB7228. Calendar Page 4,
Calendar #586, Substitute HB7239. Calendar #587,
Substitute 7571. Calendar #589, Substitute HB7445.
Calendar Page 6, Calendar #422, Substitute HB7201.
Calendar Page 10, Calendar #22, Substitute HB5694.
Calendar Page 11, Calendar #243, Substitute SB156.

Mr. President, that completes the First Consent
Calendar.

THE CHAIR:

Are there any changes or omissions?

The machine is open, please record your vote.

Senator Benvenuto. Has everyone voted?

The machine is closed.

Clerk, please tally the vote.

The result of the vote:

36 Yea

0 Nay

The First Consent Calendar is adopted.

Senator O'Leary.

SENATOR O'LEARY:

Mr. President, I move for immediate transmittal of
those items that are going to the House.

THE CHAIR:

Without objection, so ordered.

SENATOR O'LEARY:

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discharge, to strengthen the existing statutory bill of rights for them and to provide the Department of Income Maintenance with strengthened intermediate remedies in case of non-compliance with Medicaid requirements.

I won't go into detail about the provisions of the bill because the Office of Policy and Management representative has already reviewed it for you. I would like, if I might be indulged, to also ask the Committee Members, as individuals, to support Raised HB7239, which is now pending in the Public Health Committee. It relates to the licensing functions of the Department of Health Services. It improves the licensing process for nursing homes and is a necessary part of a package to fully implement the 1987 federal legislative mandates designed to safeguard the health, safety and quality of life of nursing home patients. Without it, as well as HB7228, there will still be recognized gaps in the network of regulation and safeguards.

In summary, the American Association of Retired Persons in Connecticut ask the committee to approve HB7228, which is before you and asks you as individual members of the legislature, to support Raised HB7238, which is before the Public Health Committee. The enactment of these two bills into law not only is required by federal legislation, but more importantly, will go a long way toward securing the health, safety and quality of life for nursing home patients and residents in Connecticut.

REP. COURTNEY: Thank you, Mr. McLean. Are there any questions? Thank you. Our next speaker is Carroll Hughes followed by Joan Achille.

CARROLL HUGHES: Thank you, Chairman Courtney and Chairman Przybysz and Members of the Human Services Committee. My name is Carroll Hughes. I represent the Connecticut Home Health Services and Staffing Association. I would like to speak in regard to HB7227, particularly Section 4 of that bill, which purports to regulate the nurse pools in the State of Connecticut.

not like signing a contract with an oil company. You sign a contract with an oil company they guarantee you oil for all of your needs for the whole year. You sign a contract with a nursing pool, are they going to guarantee to fill every slot, every vacancy you have? Impossible. We have 8 nursing pools we contact and we go down the list. There is a vacancy we call one, they say no, we can't fill it, we go to the next, and we go to the next and we go to the next. And if we don't fill the slot, well, if you read HB7228, we may be subject to \$10,000 a day penalties, HB7239, Public Health Committee heard two weeks ago, we may be subject to \$100,000 penalty. We are looking at very serious penalties for not filling these slots.

So, no, sending out to bid to a nursing pool is not always the solution. But I do want to clarify that we are doing that. Continuum Organization in Wallingford is getting all the nursing pools around the State and they have sent me a form and it is a bid system, so yes, we are doing that.

But, on how to save money? It was discussed. Donald Trump could go on Medicaid in this State. Donald Trump lives in Greenwich, so it's not too farfetched. He could transfer all his billions of dollars below market value and within two years and four months go on Medicaid assistance. I mean, you want to save money, let's open our eyes and look around. The options are there. Why DIM didn't propose that? Good question. Why didn't the OPM propose it? I don't know.

But if you are going to expand the give away program. If you are actually going to give millions of dollars to people that don't need it, how can you complain about the cost? I don't know. Well, anyway, you got my message and thank you for those of you who lasted this long, thank you.

SEN. PRZYBYSZ: We thank you Martin.

REP. BOLSTER: Just one question. (Inaudible) Senator, he stayed just as long as we have and it gets very tiresome standing outside a public hearing. It's nice to see you again. I don't understand this. I

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remedies in cases of non-compliance with Medicare and Medicaid requirements,

- °It provides that persons who are mentally ill or retarded and do not require nursing facility level services shall not (in general) be admitted or retained in a nursing home.

THE CONNECTICUT AARP URGES LEGISLATORS ALSO TO SUPPORT
RAISED BILL NO. 7239

since it relates to licensing functions of the Department of Health Services, Raised Bill No. 7239 is pending before the Public Health Committee, rather than yours. Nevertheless, the AARP is asking you as individual legislators concerned with the quality of nursing home care to support that bill as a necessary part of a package to fully implement the 1987 federal legislative mandates designed to safeguard the health, safety, and quality of life of nursing home patients and residents. Without it there will still be recognized gaps in the network of regulation and safeguards.

Raised Bill No. 7239 improves the licensing process for nursing homes. The Department of Health Services needs this bill in order to more adequately protect the health, safety, and quality of care of nursing home patients and residents:

- °It requires disclosure of felony convictions of operators and employees,
- °It requires reports of all assaults and cruelty to patients,
- °It provides a 5 year restriction on nursing home acquisition by persons with a history of nursing home penalties or sanctions,
- °It gives the Department of Health Services power to define enforceable terms of the granting or renewal of nursing home licenses,
- °It expands the list of licensure sanctions, including monetary fines,
- °It provides procedural subpoena and injunction powers,
- °It strengthens receivership appointment powers.

Raised Bill No. 7239 is essentially the same bill which was approved by the Public Health Committee last year with revisions to meet the objection of last year's Appropriations Committee by reducing its budgetary requirements. We strongly urge you to approve it again this year.

SUMMARY

In summary: The AARP in Connecticut asks the Committee to approve Bill No. 7228 which is before you, and asks the members of the Committee as individuals to support Raised Bill No. 7239 which is before the Public Health Committee. The enactment of these two bills into law will go a long way toward securing the health, safety, and quality of life for nursing home patient and residents in Connecticut.

Exhibit 1--Attached are charts from the federal Healthcare Financing Administration's 87/88 analysis of Connecticut nursing homes. It shows the number and percent of facilities not meeting requirements in the State, and for comparison, in the nation. Highlighted are those requirements not met by 10% or more of the nursing homes in Connecticut.

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REP. DEZINNO: Questions? If not, thank you very much.

The Chair has an announcement to make. The room is overcrowded. You have noticed that the State Troopers will come in and out and they have already given me notification that either you will have to stand out in the hall or stand behind us - but, they'll allow you to stand if you just give them a little bit of a leeway for people to come and go by the exit on each side of the room in case of an emergency. I'm sorry we don't have a bigger room for you but I wasn't one of the designers of this building.

I also would like to announce that across the way is our cafeteria. And to the left of the cafeteria and to the left of the elevators there are johns provided for you. Seriously speaking, we have children in the audience and for the benefits of the newcomers to the Legislative Office Building I make that notice available to you.

Continuing on with the call of our agenda, (inaudible) the next group of speakers should be from the Department of Health Services, would be Steve Harriman and Elizabeth Burns, and following them should be Cynthia Dean, Sheila Murphy and following Sheila Murphy we should get into the public.

STEVE HARRIMAN: Good morning, Representative DeZinno, Senator Matthews and Members of the Committee. It's nice to see so many friends here. My name is Steve Harriman. I'm the Bureau Chief, Department of Health Services. I would like to give some testimony on HB7239, AN ACT CONCERNING THE LICENSURE OF NURSING HOMES.

The Department of Health Services would like to speak in support of this Bill. Both the form and the nature of the nursing home industry has changed significantly over the past fifteen years. What was once a "mom and pop" operation where families owned and operated nursing homes, has evolved into an industry where chains of homes are owned by

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Owens-Corning, Merrill-Lynch and others.
Essentially corporations within corporations within holding companies.

Nursing home care is big business with tax dollars in the hundreds of millions being spent to support the care of friends, families and loved ones who might be in a long term care facility. Projections which we are all familiar with point to more people living longer and an increasing number of whom will need nursing home care.

When the State, that's us, issues a license to a nursing home owner or operator I think that license says several things. First, it is a grant to limit competition which allows the holder to potentially make a great deal of money. Along with that, it also says to the public that the State, the agent of the people, has put its "Good Housekeeping" stamp of approval on that facility and that the public can expect that its interests have been well looked after. In all candor, I come here today and tell you that that is not as it should be.

In the past few years, Connecticut has had three nursing homes go into receivership, two of which closed and one of which was sold. I won't go into detail and tell you about the patients who weren't fed or the patients who weren't turned, or the patients who laid in their own feces, or the patients who rode around in ambulances at midnight with no place to go -- the families who call us at all hours worried sick about their loved ones -- I'll leave those tales for others to tell. The experiences did, however, tell us a story which needs to be told and that's what brings us here today.

Fact one. When a nursing home seeks licensure to do business in Connecticut we don't have the authority and/or ability to take a critical look at the fiscal and corporate elements which should be scrutinized.

Fact two. When the worst happens and nursing homes collapse financially a crisis environment envelopes all of us and rational decisions which should be made in days or weeks become sometimes less than rational decisions that have to be made within

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hours. Patients have to be moved. Some, frankly, can't be moved, others shouldn't be moved, and then there are others who have no place to be moved to.

Fact three. The regulatory mechanism currently in place in Connecticut promotes the reactive posture rather than a proactive posture. We can't do anything until the horse has left the barn.

Four. Although there currently is a receivership statute there is not a strong connection between life-threatening violations of the Public Health Code and access to the appointment of a receiver by the courts.

HB7239 addresses these concerns. It provides for a critical look at the fiscal and corporate components of those seeking licensure in Connecticut. It sets performance standards in the computerization of licensure and inspection data, which will allow the Department to identify those homes in financial distress before the fact, not after the fact, so we can be proactive not reactive to meet the needs of the patients.

It calls for a licensing fee so that the nursing home industry will share the cost of our licensing program with the general taxpayer. The receivership statutes are updated to allow the courts flexibility in the appointment of receivers, and it expands the Department's options to encourage compliance with the statutes beyond suspension or revocation of a license.

One components which is not in this Bill which was in last year's bill is a provision for a receivership fund. This would allow any court appointed receiver access to a dedicated pool of monies to insure that food, medicine and wages could be purchased to provide for nursing home patients pending either the sale or closure of the home.

These monies would be repaid back into the fund upon the sale of the business or the property of the nursing home. We believe that this component remains a very important element of this proposal and hope that the Committee will consider it with other components of the Bill.

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In conclusion, HB7239 is not more regulation -- it is better regulation. It is a proposal whose goal is to make us the molder of events and not the victim of circumstances.

I'll close with this final thought. We all have friends, family and loved ones who are in nursing homes -- but for the grace of God we might be there ourselves someday. And I just ask you, would we be better off with this Bill or without it.

Before I conclude, I would like to draw your attention to one section of the Bill, which is Section Nine, and it talks about the various elements that - various things that the Department could do if we had a formal statement of charges against nursing homes. Let me tell you the problem that we have and I'm open to suggestions because I know this is a particular provision that is not supported by the nursing home industry. Let me tell you the problem and I'm open to suggestions on how to solve the problem.

The statute now provides the Department can suspend, revoke, or take other necessary action with respect to a nursing home license. When that provision applies to other facilities or individuals that means if we don't suspend or revoke we can reprimand, we can censure or we can do a fine.

With respect to the particular statute and nursing home section there is a separate provision for civil fines and penalties for nursing homes for violations, serious violations, of the Public Health Code, which is a separate section. It is the advice of the Attorney General's Office, because the nursing home has a separate section for civil fines and penalties, that we can't legally turn around under the current statute and fine them again.

We would like some flexibility to have an alternative other than suspending or revoking a license. We tried to enumerate the alternatives in this Bill. We are open to suggestions on how it might be worded so that excessive fines are not placed on the nursing home industry.

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Maybe a suggestion might be, and Kathy would know better than I, a suggestion might be to put a caveat on the civil fines and penalty portion of the statute which says that wouldn't preclude us doing a fine if we had a statement of charges to suspend or revoke the license.

I'll be very glad to answer any questions people might have.

REP. DEZINNO: Questions of Steve Harriman? Kathy, but the way, for the benefit of the audience, is Kathy Wright, and she's a very learned attorney. She works for the Legislative Commissioner's Office and she's sitting to my immediate left. Without her we would be totally lost. To my immediate right are the representatives from the Office of Legislative Research, and without them we would be totally lost. Also we would be totally lost without members of this Committee.

Now that I've done my political

(inaudible)

It's a worthwhile question you had. We certainly take it under advisement, Steve, and as we get more into the Bill I'm sure we'll be in direct contact with you and members of your staff.

Any further questions of Mr. Harriman?

Does Elizabeth Burns want to address the Committee?

ELIZABETH BURNS: No, Representative DeZinno. I think Steve covered all the points. I'd be willing to answer any questions if anyone had one.

REP. DEZINNO: Did he do a good job, Elizabeth?

ELIZABETH BURNS: Are you asking me to say that publicly about my boss? Of course.

STEVE HARRIMAN: Thank you very much.

REP. DEZINNO: (inaudible) Dom, do we have any seats up on your side? Those members of the public that are sitting down - are there any seats next to you?

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Second. In line 53 the word "quarterly" should be deleted and in its place I ask you to insert "annually and within thirty days of the issuance of any rate adjustment by the Department of Income Maintenance pursuant to Section 17-314 of the General Statutes". I would not like to see an undue burden placed on either the nursing pools or the Commission. If the same rate is in effect for an entire year, one annual filing should be sufficient. If, however, for some reason the Department of Income Maintenance finds it necessary during the year to revise or correct a rate issued under Section 17-314 then this change would be reflected in the rates required to be filed within thirty days of the D.I.M. adjustment. With these two changes I urge adoption of HB7392.

Regarding HB198, AN ACT CONCERNING THE CONTROL OF NURSING POOL COSTS. This Bill is not compatible with HB7392. The Commission takes no position on Sections One and Two of SB198. Commissioner Wright does request, however, that Section Three of SB198 be deleted in its entirety. Section Three of SB198 is not compatible with Section Four of HB7392 and Commissioner Wright supports the recommendations of the Study of Nursing Pools as drafted in 7392, with the two changes previously mentioned.

I'll be happy to take any questions.

REP. DEZINNO: Questions of Sheila?

SHEILA MURPHY: Thank you very much.

REP. DEZINNO: Thank you, Sheila. Peter Vaillano from the Commission on Aging.

PETER VAILLANO: Chairman DeZinno, Members of the Public Health Committee, my name is Peter Vaillano. I'm representing Commissioner on Aging, Mary Ellen Klinck. I wish to record Commissioner Klinck's support for two bills before you; HB7239, AN ACT CONCERNING THE LICENSING OF NURSING HOMES and HB7392, AN ACT CONCERNING THE REGISTRATION OF NURSING POOLS.

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I have filed with the clerk Commissioner Klinck's statement, which reiterates some of the statements and arguments presented earlier by Commissioner Audrey Wasek, and also later by Steve Harriman. Thank you.

REP. DEZINNO: Questions of Peter? Hearing none, thank you very much, Peter.

For the benefit, once again for the audience, you will notice that the members will come and go and just rejoining is my Co-Chair from the Senate. Senator Matthews had a very important leadership meeting at the Senate. They don't ask the House to join, so what can I tell you. One of us has to stay. Welcome back, Senator Matthews. With that I'll turn the meeting back over to Senator Matthews. We're at the public section, Senator. Senator Matthews --

When the public does come before us we have usually four or five pages to go and I just want you to know that I'm a member of the Public Safety Committee and tonight we have a bill on Gun Controls. It starts at 6:00. I'd like to make that public hearing. So with that thought in mind, I told you where the johns were, I told you where the cafeteria was, we going to break around 12:30 until 1:00 for a bite to eat. I have to leave around five to twelve because I have a meeting at the House side, Senator, and -- take as long as you want. Three minutes. You usually can say a lot in three minutes. (Inaudible) Senator Matthews.

SEN. MATTHEWS: We are looking for our lists. The first person on our list, speaking to SB198, is Ken Boudrea. Pat Steves is next. Again, if you could confine your comments to three, three to four minutes, it would very helpful, because there are so many that would like to speak and if we could all shorten our statements then everybody would have an opportunity.

KEN BOUDREA: Senator Matthews, Representative DeZinno, other members of the Public Health Committee, I want to speak on SB198 but I also want to speak on HB7392, covering the same matters.

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because they didn't pay the nurse anything, for years. If, right now, there were 40% to 60% male in the nursing profession there would be no issue about a wage control on this issue.

It wasn't until men got into the teaching profession that teachers started making a decent wage and getting more benefits. I would like you people to consider on voting "no" to this bill and other bills that might be included, because women have worked too hard, too long to be put down with a wage control issue. Thank you.

SEN. MATTHEWS: Thank you, Mrs. Steves. Our next speaker is Bob Tessier, followed by Kathleen Bogard, followed by Amy Weitzner-Brown.

BOB TESSIER: Good morning, Senator Matthews and members of the Public Health Committee. My name is Bob Tessier. I am with the New England Health Care Employees Union, District 1199. Our union represents 15,000 health care workers in the State of Connecticut. We are registered nurses, nurses' aides, mental health workers, mental retardation workers, and all variety of health care professionals.

I'm here this morning to speak to you about two issues of great importance; in fact, I think there are no more important issues before this General Assembly this year than the issues before you today. The issue of nursing pools and capping nurses' wages is very very much tied to the issue of taxes and budget, which are dominating this session. In fact, if it weren't for a budget deficit and a tax problem these proposals probably wouldn't be before you today.

Specifically, I want to start by saying we support HB7239, AN ACT CONCERNING LICENSURE OF NURSING HOMES. We would recommend that you amend Section 8-B of that on page 10 to provide a procedure for the public to petition the Commissioner of the Department of Health Services, to allow public hearing on licensure or relicensure, to give the public, parents, advocates, workers in the system, an opportunity to comment on whether or not a particular nursing home ought to be licensed or relicensed.

It is something the law provides for radio stations and television stations, but for some reason nursing homes are not important enough to allow the public input. But I would like to specifically move to the issue of nursing pools and to say - I'm sorry - before I do. On the other issue of nursing homes, HB7393, which has to do with costs of nursing in nursing homes, that proposal represents part of the first recommendation of the Governor's Task Force, the Governor's Blue Ribbon Task Force, on the nursing shortage.

It essentially says for two years lift the caps on wages for nursing personnel in nursing homes. That was the recommendation of the Governor's Task Force and we support it and we support this Bill.

I'm here also today to oppose HB7392 and SB198. Again, the Governor's Blue Ribbon Task Force studied the issue of the nursing shortage, the nursing crisis in this State, for a whole year. They studied it more than anyone else has and they came up with very specific recommendations. These two Bills are absolutely, diametrically opposed to the recommendations of the Governor's Task Force. These Bills will cap nurses' wages.

The Governor's Task Force said raise compensation to registered nurses, licensed practical nurses, nurses' aides and allied health professionals. Allow the wages of those professions to rise to the market level. It made a bunch of other recommendations, as well, that had to do with education, enhancing the work place, giving nurses and other health professionals greater say in their jobs, but specifically the first recommendation was, raise wages. Don't cap them, don't roll them back.

I ask you to please look around here this morning. There is a nursing shortage, but not here this morning. Nurses are here to tell you there is something very wrong with these proposals. First of all these proposals are unfair. Secondly, they are an attack on nurses. And third of all, and most scary, these proposals will be successful.

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They will drive nurses out of the profession much more quickly than nurses have already left in recent years.

I ask you, is that something the Public Health Committee wants to have happen? There is an irony that the one time that I know of when the marketplace has worked for the benefit of workers. One particular group of working people, registered and licensed practical nurses. The one time that market has worked in favor of workers, supposed free-market advocates come storming out and saying, we have to regulate the marketplace. We can't afford it. That's not fair. If you want to regulate something, please consider regulating the profits that the nursing homes and the nursing pools make. Don't put a cap on wages, don't put a cap on what they can charge, but please study and determine what is a fair profit. And please make it a small profit. Let nurses get what they deserve. Let's be clear about what we're saying.

If we oppose HB7393 or if we support HB7392 or SB198 we saying that Connecticut can't afford good health care and to demonstrate that we're going to make the nurses the scapegoat for a system that's in crisis. Health care workers, nurses' aides, allied health professionals need the support of the Public Health Committee - need the support of this Legislature. Please don't talk about budget freezes and budget cuts.

Talk about fair taxes from the wealthy in this State who don't pay their fair share and talk about a fair budget that provides the funds that are needed to ensure quality care. Please don't regulate nurses' wages. It will only make a bad situation worse. Thank you very much.

SEN. MATTHEWS: Thank you, Mr. Tessier. Any questions? Mr. Tessier, just a moment. I wanted to ask you something. You did say, though, that you supported HB7329.

BOB TESSIER: HB7239. Yes. The licensure of nursing homes?

SEN. MATTHEWS: Yes. You support that. Do you support HB7392?

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For that reason, also, I would endorse Section 2, that the nursing pool be registered with the Commissioner of Health Services. At the moment they are, in many cases, registered with the Department of Labor as an Employment Agency

(cass 2) (cass 1 and 2 do not connect, small gap)
no quality complaints can be made to the Department of Health Services when there is a quality problem. I think that those are the three sections that I strongly endorse with the appropriate rewrites in this bill.

SEN. MATTHEWS: Thank you, Mr. Veling. If you could have your remarks written, it would be very much appreciated.

THEODORE VELING: Okay.

SEN. MATTHEWS: And present them to the clerk.

THEODORE VELING: I will try to get them to you.

SEN. MATTHEWS: I appreciate that.

THEODORE VELING: Thank you.

SEN. MATTHEWS: Thank you. Our next speaker is Norman Janes followed by Beatrice Murdock.

NORMAN JANES: Good morning ladies and gentlemen of the Public Health Committee. My name is Norman Janes. I am the Executive Director of Connecticut Legal Services. I'm speaking this morning on raised HB7239, that's AN ACT CONCERNING THE LICENSING OF NURSING HOMES. We have to make sure that we don't get those numbers mixed up. You have two bills with similar numbers with very different provisions. Connecticut Legal Services is a private, non-profit corporation law firm which represents poor people in Connecticut. Many of our clients, of course, are in nursing homes.

So, we have been involved, over the years in a number of nursing home facilities that have failed financially. So that we, initially, want to support the initiative by the State Department of Health in drafting this bill and recommend it to

you. Essentially, the real problem that we are trying to solve, that Steve Harriman described to you very eloquently earlier is to deal with those homes that are in financial difficulty and of course, trying to protect the patients in those homes. We would make several additions to the bill that is raised by the Committee and I asked the clerk to distribute to you just a moment ago our draft of the bill which has some additions that I'll point out to you now.

First, we would recommend very strongly that there be a fund for receivers to use when homes are in financial difficulty. Steve Harriman mentioned that as something which the Department of Health was wise but evidentially in the State's current fiscal crisis the fiscal people prevailed and that was not a part of their bill but we think that it is important enough to be able to have that that we would recommend it in spite of the fact that it costs some money. Certainly, in the last several years, the homes where we have had clients that have gone under financially, some additional funds for the receiver might well have made the difference and provided an extra opportunity so that there could have been an orderly sale or some other restructuring of the corporate organization so that the homes could have continued and the patients could have stayed there and not faced the trauma of being moved.

The second change we would add is with regard to the current receivership law. The State's bill has a provision which has an additional criteria for the appointment receiver when there is a substantial financial failure. We would add to that some language that would permit the appointment of a receiver if the facility has failed to demonstrate that it has sufficient financial resources to provide care for its patients. I think that goes along with Steve Harriman's desire to have some early warning provision. This would permit the receiver to come in before the crisis had gone beyond the point where it could be repaired.

We also have several suggestions of changes with regard to financial responsibility problem that are in our bill. Very quickly, one would change the

current standard that the receiver could be appointed if there were habitual violations of the Health Code and relevant standards. We would (inaudible) it. Our experience has been that courts have a little trouble with habitual violations standard and this other definition is more workable, I think, and gives the courts a little more flexibility. In the Unemployment Compensation Law there is a definition of repeated violation which means two or more times so that we have a standard which the courts could use.

Finally, we would suggest the residents or responsible relatives, representatives of residents, should become parties to, should have the opportunity to become parties to receivership actions. Again, we have represented patients in facilities which have been in receivership actions and we have been frustrated in our ability to represent them. I think, particularly, where there are negotiations about somehow to settle the problem, the perspective of the patients is not always well represented and should they have the opportunity to become parties, I think they would be in a much better position, particularly in that regard.

We also, finally, I'd like to recommend the Department of Health's provision that there should be a limited, the opportunity for the court to appoint a limited receiver to solve a particular problem. Again, the experience has been that the courts are a little reluctant to appoint receivers to totally take over control of a facility because they see that as an extreme measure. I think an opportunity for a more limited provision, in some cases, might make it easier to solve a particular problem. Thank you very much for your attention. I'd be happy to answer any questions.

SEN. MATTHEWS: Thank you, Mr. Janes. We appreciate your comments and also your written testimony.

NORMAN JANES: Thank you.

SEN. MATTHEWS: Thank you. Our next speaker is Beatrice Murdock followed by Carroll Huges, then we have Laura Beeman. Again, I have to remind you that we have at least three pages of testimony to

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Twenty-two million dollars had already been spent by nursing homes in excess of their reimbursement to try and keep the staff they had and we are seeking a commitment by the state to cover its share of those costs. Without such reimbursement and regulation many nursing home owners who had gone out on a limb, taking out loans, would have been in severe jeopardy and forced, not into bankruptcy, as we might expect in some other industry, but to sell since this system encourages that. Then came February 8 when our overwhelming concern then became that of survival, plain and simple.

It should be obvious to all of you that an industry with \$22 million in reimbursement disallowance in 1988 cannot withstand a \$38 million cut which, by the way, has now turned out to be \$90 million in 1989. Before that day, many of today's bills would have received more wholehearted support from our members, but now without the assurance that existing staff and support will be adequately funded we can only give lukewarm support to bills that we consider to be of minor significance and must oppose those which would increase our costs.

Therefore, we are opposed to the following raised bills: SB185, AN ACT CONCERNING FAMILY INVOLVEMENT IN NURSING HOME INSPECTIONS; SB834, AN ACT CONCERNING EMPLOYMENT OF THERAPEUTIC RECREATION AIDES BY NURSING HOMES; HB7239, AN ACT CONCERNING LICENSING OF NURSING HOMES and we support the following raised bills: SB81, AN ACT CONCERNING REIMBURSEMENT OF NURSING HOMES FOR TUITION PAID FOR STAFF TRAINING; SB198, AN ACT CONCERNING THE CONTROL OF NURSING POOL COSTS; SB342, AN ACT CONCERNING THE TASK FORCE ON CAREER PATHS FOR NURSES; SB837, AN ACT CONCERNING NURSES FROM THE PHILIPPINES; HB6431, AN ACT CONCERNING A LOW INTEREST LOAN FUND FOR NURSING HOMES and HB7392, an act concerning salaries of nurses employed in nursing homes. (SB198) (HB7392) (HB7393)

The focus, however, of our speakers testimony today will be on two bills: the bill to control nursing pool rates and the bill to lift the caps on nursing salaries and nursing homes. I might add that although we are in favor of controlling the rates,

care issue, and I know some of the other speakers from the other major hospitals will address the same issue.

Stamford, like all Connecticut hospitals, is acutely concerned about quality of care, and that's been a Hallmark of Connecticut hospitals, quality of care. The nurses that have come to Stamford, and I'm sure to the other hospitals, have gone through efforts to prepare them for nursing practice in the State of Connecticut in those particular hospitals.

Our nurses were limited to the scope of their practice when they were employed. They followed the same rules, if you will, as a graduate nurse from an American school and there are limitations imposed and levels of practice there. The same limitations were imposed at Stamford. There were mentors that preceptors that did follow the nurses through their training programs, so when they did take the boards, that's why our success rate has been so remarkable because they were limited and were fully prepared to take those examinations.

REP. GYLE: Thank you very much.

SEN. MATTHEWS: Thank you, Mr. Staples.

MICHAEL STAPLES: Thank you.

SEN. MATTHEWS: Our next speaker is Martin Spriglio, followed Eric Petersen. Again I'm going to have to remind you to limit your remarks to three minutes.

MARTIN SBRIGLIO: Thank you. My name is Martin Sbriglio. I'm the Administrator of the Lord Chamberlain Nursing Home in Stratford, Connecticut. I chose to speak independently because I want to address other issues today.

One of the questions in mind that I have is HB7239, AN ACT CONCERNING THE LICENSING OF NURSING HOMES. I find that this bill is overwhelming and again, I have written letters to all of you. I am sure you have received them. This bill is in addition to the Omnibus Budget Reconciliation Act, which is about 700 more pages of regulations the federal government initiated and passed on nursing homes.

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I think that maybe the Department of Health Services needs to evaluate those more closely and review the fact that fines and penalties are already provided for and are excessive already. I was just listening to stories today about fines and penalties that are being issued to nursing homes.

For example, one nursing home was fined \$1,000 because the generator did not kick on in 12 seconds. It kicked on in 12 seconds, instead of 10 seconds and the Department of Health Services deemed that as life threatening.

We feel the fines and penalties are frivolous and bordering on harassment. There are many, many regulations that already exist that would probably go halfway up to the ceiling if you were to total all of the federal and state regulations affecting nursing homes.

In HB7239 I know there was some discussion in Section 9 about the attempt to fine nursing homes \$100,000 for deficiencies as I have mentioned. I think to increase fines and penalties, and we've heard excellent testimony today about nursing homes losing money, patient care being jeopardized already because of unreimbursable costs, why does the Department of Health Services believe they are going to improve care by increasing fines and penalties?

If we're already losing money because we can't get staff and because we are paying and not reimbursed properly for the staff why does the Department of Health Services pursue a dead end with this regulation?

I would like to congratulate Senator Gunther and Representative Chase for attempting to address an issue that's been dragging on for years as far as reimbursement for tuition. We at Lord Chamberlain have been paying and supporting many of our nurse's aides to become nurses and LPNs to become RNs, and none of that has ever been reimbursable.

It seems contradictory when we have a policy of trying to increase the supply of nurses, and trying

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to retain nurses within our institutions that it is not a reimbursable situation right now under the current system.

There are other issues that I would like to address. I think the fact that nursing homes need to have their cost controls removed, when it comes to nursing expenses is absolutely essential. I don't believe in controlling anybody's costs artificially. This is supposed to be a free enterprise system. It is the United States. Unfortunately the nursing home industry has been totally controlled at least as far as nursing costs, and that has been for about 12 years, as far as I know.

My family has been doing this for 38 years, and this just seems to be totally contradictory. Again, I congratulate everyone that has testified today. I think there is a lot of changes that need to be made and I certainly understand the budget deficit, but we have a crisis, and we have to solve it. Thank you.

SEN. MATTHEWS: Thank you, Mr. Sbriglio, and we do appreciate your writing to us and explaining to us your concerns. We certainly read your letters and understand what you're going through.

MARTIN SBRIGLIO: Thank you very much.

SEN. MATTHEWS: Thank you. Eric Petersen, followed by Angelina Field.

ERIC PETERSEN: Senator Matthews, other members of the Public Health Committee, I thank you for giving me this opportunity to speak to you. My name is Eric Petersen. I'm President of the Connecticut Home Health Services and Staffing Association. I'm also President and owner of Medical Personnel Pool of New Haven.

There's a couple of issues that I think need to be reiterated a little bit, and I'll try to breeze through them rather quickly so that we don't waste a lot of time, but I do represent both sides of it, because I am a licensed home health agency, and I also do staff relief services.

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management goals and excess employee turnover. The Massachusetts Federation of Nursing Home in the letter to Dr. Miriam Sharp, Director of the Connecticut Bureau, I'm sorry, the Commissions Bureau of Ambulatory Care, reiterated its position that the pool agency charges be based on the prevailing wages of the nursing home staff as a base figure.

This represents the industry thinking and strategy. Therefore, the nursing home industry, rather than face up to the challenges of solving their own internal problems with regard to recruitment of qualified nursing personnel, instead choose the back door approach through rate setting, which will only serve to depress the wages profession-wide and drive qualified caregivers from the profession. Thank you.

SEN. MATTHEWS: Thank you Miss Ruggiero, we're pleased that you waited and thank you for your testimony. If it's written, do give it to the clerk and they'll transmit it to us. Frances Sekorowicz, it says ANRHR, speaking to SB198. Royal Gustafson, Stephen Root, Betty Glass followed by Lockland McLean, and then Teresa Loomis. Good afternoon.

BETTY GLASS: I would like to take the opportunity if I may. HB 7239 Locklane McLean, who is representing the same organization I am, had to go back to work this afternoon. You have a copy of his research on this particular issue, HB7293. I will just kind of summarize his comments if I may after I give my own. My name is Betty Glass and I feel a little bit out of place because I am not an R.N. and have never been quite so overwhelmed by the nursing profession today. It's been an education for me. I represent the American Association of Retired Persons as a member of the State Legislative Committee of AARP.

One of our legislative priorities this year in Connecticut, has been the improvement of nursing homes, and I think you all received brochures of the kind of work we have been doing. Mr. McLean has headed up the Committee and developed a position paper on nursing homes and you have copies of his testimony there also. The elderly and those in nursing homes in particular, are a group at risk

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in terms of being unable to be in control of their circumstances and often the victims of nursing home financial problems and nursing home staff problems. Committee bill HB7239, AN ACT CONCERNING THE LICENSING OF NURSING HOMES, we feel is essential to provide the necessary oversight that is needed.

I urge you to vote favorably on this important piece of information. From McLean's testimony, even though there are many fine nursing homes and operators in Connecticut, it is clear that there are problems that need to be addressed and corrected which affect the care of patients and residents in some of our nursing homes. Responding to these conditions nationwide, federal legislation was passed in 1987, which in turn requires Connecticut legislation to strengthen nursing home licensing and regulatory laws. We feel that Committee bill HB7239, is essential in order to provide the Department of Health Services with the adequate protection, or the adequate means for protecting the health, the safety and the quality of care for our nursing home patients and residents.

This is the position of the 460,000 AARP residents in Connecticut and we're very concerned and hopefully there will be a favorable report on this important legislation. Thank you very much for your patience.

SEN. MATTHEWS: Thank you very much. Are there any questions? We do have Mr. McLean's testimony.

BETTY GLASS: Yes you do.

SEN. MATTHEWS: Thank you very much. Theresa Loomis, followed by Gloria Sarer from Staffmates.

THERESA LOOMIS: Senator Matthews, Representative members of the Committee. I'm Theresa Loomis from Medistats Incorporated, and I'm also a registered nurse. I'm here today to discuss the matter of limiting the rates charged by one private enterprise for services rendered to another private enterprise in good faith. As you all know, it has been proposed that an upper limit be placed on the fees charged by temporary nursing employment agencies or pools as they are referred to in the

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