

**PA10-23**

HB5452

House	729-737	9
Public Health	759-760, 1038-1043, 1360-1371	20
<u>Senate</u>	<u>879-880, 1064-1066</u>	<u>5</u>

**H – 1076**

**CONNECTICUT  
GENERAL ASSEMBLY  
HOUSE**

**PROCEEDINGS  
2010**

**VOL.53  
PART 3  
595 – 894**

rgd/md/gbr  
HOUSE OF REPRESENTATIVES

135  
April 13, 2010

DEPUTY SPEAKER ORANGE:

Thank you, Mr. Clerk. The bill passes.

Will the Clerk please call Calendar Number 209.

THE CLERK:

On page 20, Calendar 209, substitute for House Bill 5452, AN ACT CONCERNING THE PROVISION OF VOLUNTEER HEALTH CARE SERVICES ON A TEMPORARY BASIS, favorable report of the Committee on Public Health.

DEPUTY SPEAKER ORANGE:

Representative Betsy Ritter, you have the floor, ma'am.

REP. RITTER (38th):

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

DEPUTY SPEAKER ORANGE:

The question is acceptance of the joint committee's favorable report and passage of the bill. Will you remark, Representative Ritter?

REP. RITTER (38th):

Thank you, Madam Speaker.

This bill allows out-of-state volunteer health care practitioners to provide health care services in Connecticut at a free clinic or similar event, or at the Special Olympics or a similar athletic event that

rgd/md/gbr  
HOUSE OF REPRESENTATIVES

136  
April 13, 2010

could attract a large number of out-of-state participants.

It provides that they meet stated criteria regarding their qualifications and current licensure as well as the holding of sufficient malpractice insurance.

Madam Speaker, the Clerk is in possession of an amendment. I would ask that he call LCO 3395 and that I be granted leave of the Chamber to summarize.

DEPUTY SPEAKER ORANGE:

Will the Clerk please call House amendment -- excuse me, LCO Number 3394, which will be designated as House Amendment Schedule A.

REP. RITTER (38th):

Madam Speaker, that would be LCO 3395.

DEPUTY SPEAKER ORANGE:

My apologies. Will the Clerk please call LCO Number 3395, which will be designated as House Amendment Schedule "A."

THE CLERK:

LCO Number 3395, House "A," offered by Representative Ritter and Senator Harris.

DEPUTY SPEAKER ORANGE:

The Representative seeks leave of the Chamber to

rgd/md/gbr  
HOUSE OF REPRESENTATIVES

137  
April 13, 2010

summarize the amendment. Is there objection to  
summarization? Is there objection? Hearing none,  
Representative Ritter, you may proceed with  
summarization.

REP. RITTER (38th):

Thank you, Madam Speaker.

Madam Speaker, the amendment stipulates that in  
line 20, after the word "malpractice," the following  
be added, "either personally or through the sponsoring  
organization."

Madam Speaker, the purpose of the amendment is to  
clarify that the malpractice insurance that must be  
held by the participant may be either held personally  
or through a sponsoring organization. I urge  
acceptance.

DEPUTY SPEAKER ORANGE:

The question before the Chamber is adoption of  
House Amendment Schedule "A." Will you remark further  
on the amendment? Will you remark further on the  
amendment? If not, all those --

REP. SAWYER (55th):

Madam Speaker. Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Sawyer.

REP. SAWYER (55th):

Thank you, Madam Speaker. A question through you to the proponent of the amendment.

DEPUTY SPEAKER ORANGE:

Please proceed, ma'am.

REP. SAWYER (55th):

Just for legislative intent, in a case where we're talking about a physician who has malpractice insurance through a practice, would that qualify? Through you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Representative Ritter.

REP. RITTER (38th):

Through you, Madam Speaker, yes.

DEPUTY SPEAKER ORANGE:

Representative Sawyer.

REP. SAWYER (55th):

Thank you, Madam Speaker.

DEPUTY SPEAKER ORANGE:

Thank you, Representative Sawyer.

Will you care to remark further on House Amendment Schedule "A"? Will you care to remark further on House "A"? If not, let me try your minds. All of those in favor of the amendment, please signify

by saying, aye.

REPRESENTATIVES:

Aye.

DEPUTY SPEAKER ORANGE:

All those opposed, nay.

The ayes have it. The amendment is adopted.

Will you care to remark further on the bill as amended? Representative Ritter.

REP. RITTER (38th):

Thank you, Madam Speaker.

Only to suggest, Madam Speaker, that this particular bill, the urgency behind this bill was made even more apparent to the committee and, I hope, to the Chamber this -- just in this calendar year, when we saw clinics held by both the National Association of Free Clinics as well the Dental Mission of Mercy, staged right here in Connecticut, in one case in Hartford at the convention center. Participants, medical participants in those clinics came from all over the country. This bill will enable a greater participation and make it far easier for those clinics to do their good work.

And I urge its adoption. Thank you, Madam Speaker.

rgd/md/gbr  
HOUSE OF REPRESENTATIVES

140  
April 13, 2010

DEPUTY SPEAKER ORANGE:

Thank you, ma'am.

Will you care to remark further? Representative Jan Giegler of the 138th, you have the floor, ma'am.

REP. GIEGLER (138th):

Thank you, Madam Speaker.

I, too, rise in support of this bill. It's a bill that will benefit the citizens of Connecticut through the expansion of the number of health care professionals that will be able to assist in charitable events within the state. And I urge my colleagues' support. Thank you.

DEPUTY SPEAKER ORANGE:

Thank you, ma'am.

Will you care to remark further on the bill as amended?

Representative Sawyer.

REP. SAWYER (55th):

Madam Speaker, as we look forward to offering as much health care as possible to our citizens of the state, it only makes sense that we offer to those professionals from neighboring states the ability to be able to come in and to volunteer their services. And the word is "volunteer."



rgd/md/gbr  
HOUSE OF REPRESENTATIVES

141  
April 13, 2010

They've had the medical training. They have the certification. It just happens to not be in our state. So it's been something that's been requested, I know, for the last couple of years, and we have been able now to iron out some of the kinks. And I want to thank the chairwoman of the Public Health Committee as well as her cochair in moving this forward.

Thank you, madam.

DEPUTY SPEAKER ORANGE:

Thank you, ma'am.

Will you care to remark further?

Representative Klarides of the 114th.

REP. KLARIDES (114th):

Thank you, Madam Speaker.

Through everything I've heard in the Public Health Committee and today on the floor, I certainly see the need for this and appreciate the work that was done.

I just have one question, through you.

DEPUTY SPEAKER ORANGE:

Please proceed, ma'am.

REP. KLARIDES (114th):

Thank you, Madam Speaker.

I see on the bill applicability that the

different types of health care providers that it would apply to. And one of the providers is veterinarians, and although I certainly understand the need for that kind of service also, is there a different type of licensing procedure that veterinarians have then, as opposed to other medical professionals? Through you.

DEPUTY SPEAKER ORANGE:

Representative Ritter.

REP. RITTER (38th):

Thank you, Madam Speaker.

Veterinarians, like many, many, many other health care professionals are licensed through the Department of Public Health. And as far as that's concerned they are very similar procedures, and I am not aware of any others.

DEPUTY SPEAKER ORANGE:

Representative Klarides.

REP. KLARIDES (114th):

Thank you, Madam Speaker.

And I thank the gentlewoman for her answer.

DEPUTY SPEAKER ORANGE:

Thank you, ma'am.

Will you care to remark further on the bill as amended? Will you care to remark further on the bill

rgd/md/gbr  
HOUSE OF REPRESENTATIVES

143  
April 13, 2010

as amended? If not, staff and guests to the well of the House. Members take your seats. The machine will be open.

THE CLERK:

The House of Representatives is voting by roll call. Members to the chamber. Members to the chamber. The House is voting by roll call.

DEPUTY SPEAKER ORANGE:

Have all the members voted? Have all the members voted? If all the members have voted, please check the board to determine if your vote has been properly cast. If all members have voted, the machines will be locked and the Clerk will take a tally. Will the Clerk please announce the tally.

THE CLERK:

House Bill Number 5452 with House "A."

Total Number voting 147

Necessary for adoption 74

Those voting Yea 147

Those voting Nay 0

Those absent and not voting 4

DEPUTY SPEAKER ORANGE:

The bill passes as amended.

Will the Clerk please call Calendar Number 71.

**JOINT  
STANDING  
COMMITTEE  
HEARINGS**

**PUBLIC  
HEALTH  
PART 3  
649 – 951**

**2010**

89  
rgd/mb PUBLIC HEALTH COMMITTEE

March 12, 2010  
10:00 A.M.

given those circumstances.

Thank you, Mr. Chairman.

SENATOR HARRIS: Thank you.

Any further questions?

Seeing none, appreciate it.

PETER FREYTAG: Thank you.

SENATOR HARRIS: I'm told that Laura Francis is not here. I don't see Representative Sawyer here -- oh. There she is.

Good timing, Pam. Welcome.

REPREP. SAWYER: Thank you, Mr. Chairman --

SENATOR HARRIS: I was looking on the side, not to that side.

REPREP. SAWYER: -- and ranking members, nice -- and members, thank you very much for having me here today. I'll make it very, very brief.

HB 5452  
HB 5446

Volunteer health services on a temporary basis: granting temporary licensure for out-of-state personnel; I'd like to applaud the State Dental Association. Those that have been very involved in the Mission Of Mercy. It will be March 12th and 13th, I'm doing an advertisement for them. I'd like thank you all. So (inaudible) for putting them up for two days -- two days for their free dental services.

Obviously, it's imperative that we have as many dentists as possible and in the future, obviously, this is a type of situation we like to see grow and expand and it can with this

bill and your thoughtfulness and bringing it forward. And I would like to say thank you very much for that. Out-of-state dentists would be a big boon and certainly if they would like to volunteer, we would be very grateful for all the work that they could do. And we just have to fix that little snafu.

And also, with the mass gatherings, I like to say thank you again for that one also, because it will make a very large difference in the issue of the state fairs. And I have the Hebron Lions Club Fair and I get points if I mention that, too, so thank you very much.

And I'd certainly answer any questions if I could. But again, thank you to the committee.

SENATOR HARRIS: Thank you, Representative Sawyer.

Any questions?

Thank you very much.

Next, we have Kurt Barwis followed by Dr. Adam Silverman followed by Howard Feller.

KURT BARWIS: Good morning and thank you, Representative Ritter, Senator Harris and the committee members.

A lot has been said already, so I'm going to try to be succinct. And I'm going to start where I'm going to finish and say to you that this is truly a public policy issue. This is what I believe Bill Number 429 will positively impact the public. And it is a broad issue. It is a complex issue. One, an issue from my perspective, that really should be referred to Program Review and Investigations so that it gets the diligence that it needs.

**JOINT  
STANDING  
COMMITTEE  
HEARINGS**

**PUBLIC  
HEALTH  
PART 4  
952 – 1258**

STEVEN WOILFSEN: I think this seat has been thoroughly warmed up.

On behalf of everybody, I'd like to thank the committee for your patience. I don't know how you do it.

Senator Harris, Representative Ritter and members of the Public Health Committee, my name is Steve Woilfsen. I'm a practicing cardiologist in New Haven and a member of the Connecticut State Medical Society Council. On behalf of our 7,000 members, thank you for the opportunity to testify today in support of Senate Bill -- of House Bill 5452, AN ACT CONCERNING THE PROVISION OF VOLUNTEER HEALTH CARE SERVICES ON A TEMPORARY BASIS. To summarize, we are asking for help so that we can give our services away.

The language before you today establishes a process in which the commissioner of the Department of Public Health may temporarily suspend licensure, certification and registration requirements for health care professionals who provide pro bono services associated with free medical clinics, charitable medical events, the Special Olympics or similar athletic competitions. This would allow out-of-state physicians to come to Connecticut to provide services free of charge for a limited period of time.

We fully support the intent of this legislation and also provide recommendations to strengthen the bill.

And as an example of the power of volunteer services, on February 3, 2010, Connecticut became the fourth location to host an all-day free clinic by the National Association of Free Clinics. I believe that you were there.



In one day, 998 Connecticut residents without health insurance received pro bono care from many health care providers. Ironically, we met several physician who traveled from out of state to participate and were then informed upon arrival that Connecticut law prevented them from providing services. The proposed law would have allowed clinic organizers to seek approval for these physicians to provide services for the day.

Although we do believe that certain sections of the bill should be amended to allow for ample application and approval time for appropriate events, we strongly encourage support of this legislation.

Additionally, we believe that this proposed legislation can lead us toward the concept, expanding on efforts of past sessions to tap into existing resources within Connecticut to help underserved populations. We urge you to consider the incentive of a reduced or waived licensed fee for retired physicians who wish to volunteer their services.

In 2007, CSMS established a senior section committee. This committee has developed pillars for involvement by senior physicians in Connecticut.

One guide in this committee is the delivery of care to the indigent. It is strongly believed that senior physicians can assist in the care of the indigent population either as generalists or within their specialties.

In the past years, this General Assembly has passed legislation allowing for a license fee waiver for any retired physician who delivers a minimum of 100 hours of uncompensated care

throughout the year. The settings are limited to a public health facility, as defined in Section 20-126 L, or in connection with a mobile health clinic that provides health care services to individuals in this state.

REP. RITTER: Dr. Woilfsen, if you could quickly conclude. Thank you.

STEVEN WOILFSEN: Okay. We respectfully ask that you consider this. Thank you so much.

REP. RITTER: Thank you very much.

And yes. That is correct. On February 3rd, I was able to attend the free clinic. And along with several of my colleagues, and I think it was probably within a week or so after that, that we agreed this year we would urge the committee to raise the bill.

In addition, along with Representative Lesser, this morning we were down in Middletown at the Connecticut Dental Mission of Mercy and this bill also would be very helpful in that effort as well.

So thank you for your testimony.

STEVEN WOILFSEN: Sue Lagarde, who follows me, came here from there.

REP. RITTER: I know that. Thank you very much.

Are there questions from the committee? No.

And thank you for sharing your passion for this with us.

And next, we will be hearing from Dr. Jonathan Knapp, who perhaps is still down at the

371  
rgd/mb PUBLIC HEALTH COMMITTEE

March 12, 2010  
10:00 A.M.

Mission of Mercy. Right.

And doctor -- oh, boy. Suzanne --

SUZANNE LAGARDE: Lagarde.

REP. RITTER: Lagarde. Thank you.

SUZANNE LAGARDE: I think the fact that I'm still here and not at dinner after the Mission of Mercy is a testimony to my passion for this bill.

Senator Harris, Representative Ritter, members of the Public Health Committee, my name is Suzanne Lagarde. I'm a gastroenterologist. I've been in practice for more than 30 years in Southern Connecticut and I'm here to plead the case for the passage of House Bill 5452, the provision of volunteer health care services on a temporary basis.

It's a well-known fact that the numbers of uninsured and underinsured Connecticut residents is on the rise. US Census Bureau data shows that the average uninsured rate in Connecticut in 2006 to 2008 was over 10 percent. Current conservative estimates place the number of uninsured closer to 15 percent.

In addition to the uninsured there's also a significant number of underinsured. And even amongst the insured, many Connecticut residents still find themselves doing without basic care, especially dental and vision care because many commercial plans exclude these areas or because deductibles are so large, routine care is avoided.

The end result is that a large number of our residents, uninsured, underinsured and insured go without basic medical, dental and vision

care. Not only does this result in undue suffering, diseases go undiagnosed in an early stage when they are more likely to be cured, patients often end up in emergency rooms or as inpatients, when the cost of care is exorbitant and borne by all of us.

As a founding member and current vice president of Project Access New Haven, a nonprofit that works to ensure access to specialty physicians for the uninsured, I can tell you that the number of Connecticut residents who need our services are far exceeds what we can do whatever.

I also volunteer with Remote Area Medical, or RAM. It's a nonprofit which provides free dental, vision and primary care in clinics throughout this country, however RAM is seriously hampered in its ability to deliver these services when a request comes from a State like ours, which does not honor licenses from out-of-state providers. RAM ready to come to Connecticut if we allow them to tap into their extensive network of out-of-state providers.

And I just want to diverge for a second because very earlier today I saw the written testimony that was submitted to this committee by Jen Filippone from the Department of Public Health. And I just want to say that I support her comments 100 percent. I think she's right on the mark as to how such legislation should be written.

And last, but not least, as Representative Ritter and Representative Lesser know, earlier today, more than a thousand Connecticut residents received high-quality free dental care at the third annual Connecticut Mission of Mercy, which took place in Middletown.

If experience of our experience of past years is predictive, today -- well, we know, today we turned people away. Tomorrow we expect to see another thousand people. We expect to have to turn people away.

We have colleagues in other states who are ready to join us or such events and passage of this bill would help this to happen and I sincerely hope that the committee can see the wisdom of passage of this very significant piece of legislation.

And I thank you very much.

REP. RITTER: Thank you very much and thank you for your service, particularly today. It was very impressive down there.

Are there questions from the committee? I guess not.

SUZANNE LAGARDE: Thank you.

REP. RITTER: Thank you.

SENATOR HARRIS: On to House Bill 5476. First we have Dr. Richard Eisen.

If we want to take -- we'll take a -- stand at ease here for a sec. To be followed by Robert Bobowski and then Dr. Tarantino.

Is he available? If not, we'll just go on to someone else.

Dr. Bobowski.

ROBERT BOBOWSKI: Good evening, folks.

Hi. I'm Robert Bobowski. I'm a pathologist

**JOINT  
STANDING  
COMMITTEE  
HEARINGS**

**PUBLIC  
HEALTH  
PART 5  
1259 – 1470**

**Legislative Testimony**  
**HB5452 AAC The Provision Of Volunteer Health Care Services On A Temporary  
Basis**  
**Public Health Committee**  
**Friday, March 12, 2010**  
**Ernest Spira, D.D.S.**

God Morning Senator Harris, Representative Ritter and the members of the Public Health Committee, my name is Ernest Spira. I am a practicing periodontist in Glastonbury and Manchester.

I am also a member of the CT State Dental Association Board of Governors.

I am writing in support of HB5452. As a participant in four Dental Missions of Mercy, two out of state and two in Connecticut, it is clear that the dental needs for the underserved are great. Although these missions are not the answer they do provide help to those in pain. The advantage in having additional professional volunteers participating from other states is clear. I myself was one such volunteer in both Virginia and Colorado. The participation of out-of-state professionals is predicated by both the patients who receive the care and the in state professionals who are supported.

Respectfully submitted,

Ernest Spira  
1420 Main St., Suite 134  
Glastonbury, CT 06033  
(860) 659-0307

**Legislative Testimony  
Committee on Public Health  
HB 5452 An Act Concerning the Provision of Volunteer Health Care Services  
on a Provisional Basis  
Friday, March 12, 2010  
Bruce Tandy, D.M.D**

Senator Harris, Representative Ritter, and members of the Public Health Committee, my name is Bruce Tandy and I am the president of the Connecticut State Dental Association that represents over 2400 dentists and dental team members. I also serve on the planning committee for the CT Mission of Mercy (CTMOM) and the national foundation for MOM. I have been practicing for 30 years in Vernon and Coventry. Thank you for the opportunity to present this written testimony to you in support of HB 5452.

At the moment and over the next two days, 2000 patients are lining up to be treated at the 3<sup>rd</sup> Annual CT Mission of Mercy project in Middletown. Over 1500 volunteers from the dental profession and the community will donate their time and efforts to treat the underserved of the state of Connecticut in a caring, no questions asked environment. With the increase to over 1000 dentists treating the state's Husky patients, we have seen a steady decrease in the number of children seen at this event. Yet, the adults with limited funds and safety net coverage, look to MOM every year as their dental home. As we see an ever increasing number of patients, there is more need for volunteers to provide the services necessary to relieve the pain these patients suffer. Up until now, we have had to turn down volunteers from other states due to the legislative restrictions to their participation at these types of events. This restriction also applies to other charitable health care events.

Due to the success of the Connecticut MOM event over the last 3 years, we have become a model for the more than 17 MOM events around the country. Dental organizers and providers from these other states have visited the CTMOM project but have been unable to fully participate, which would have been important as a tool for their own projects. As CTMOM moves into a leadership role for east coast MOM projects, the ability to have volunteer dentists from other states be a part of the actual treatment phase of the project, will enhance not only CTMOM, but treatment of patients around the country.

For these reasons, I fully support the bill before you today. Please allow provisional health care services to be provided by out of state doctors with appropriate credentials during these important and altruistic events.

I would like to thank the Committee for your consideration of this testimony. Please feel free to contact me if you have any questions.

Sincerely,

Bruce Tandy, D.M.D  
281 Hartford Turnpike  
Vernon, CT 06066  
860-875-2881





180 St. Ronan Street, New Haven, CT 06511-2390 (203) 865-0587 FAX (203) 865-4997

**Connecticut State Medical Society Testimony**  
**House Bill 5452 An Act Concerning the Provision of Volunteer Health Care Services on A**  
**Temporary Basis**  
**Public Health Committee**  
**March 12, 2010**

Senator Harris, Representative Ritter and members of the Public Health Committee, my name is Dr. Steven Wolfson. I am a practicing cardiologist in New Haven and a member of the Connecticut State Medical Society (CSMS) Council. On behalf of our more than 7,000 members thank you for the opportunity to present this testimony to you today in support of House Bill 5452 An Act Concerning the Provision of Volunteer Health Care Services on a Temporary Basis. We fully believe that this legislation is necessary to leverage access for indigent residents of this state pro bono medical services.

In short, we are asking for help so that we can give our services away!

The language before you today establishes a process in which the Commissioner of the Department of Public Health (DPH) may temporarily suspend licensure, certification and registration requirements for health care professionals who provide pro bono services associated with free medical clinics, charitable medical events, the Special Olympics or similar athletic competitions. This would allow out of state physicians to come to Connecticut to provide services, free of charge, for a limited period of time. We fully support the intent of this legislation and also provide recommendations to strengthen the bill.

As an example of the power of volunteer services, on February 3, 2010, Connecticut became the fourth location to host an all day free clinic by the National Association of Free Clinics. In one day 998 Connecticut residents without health insurance received pro bono care from many health care providers. Ironically, several physicians who traveled from out of state to participate were informed upon arrival that Connecticut law prevented them from providing service. The proposed law would have allowed clinic organizers to seek approval for these physicians to provide services for the day.

Although we do believe that certain sections of the bill should be amended to allow for ample application and approval time for appropriate events, we strongly encourage support of this legislation.

Additionally, we believe that this proposed legislation can lead us toward the concept, expanding on efforts of past sessions, to tap into existing resources within Connecticut. We urge you to consider the incentive of a reduced or waived license fee for retired physicians who wish to volunteer their services. In 2007 CSMS established a Senior Section Committee. This committee has developed pillars for involvement by senior physicians in Connecticut. One pillar guiding this committee is the delivery of care to the indigent. It is strongly believed that senior

physicians can assist in the care of the indigent population either as generalists or within their specialties.

---

In past years this General assembly has passed legislation allowing for a license fee waiver for any retired physician who delivers a minimum of 100 hours of uncompensated care throughout the year. The settings are limited to at a public health facility, as defined in section 20-126I, or in connection with a mobile health clinic that provides health care services to individuals of this state. We respectfully ask that members of this committee work with CSMS to review the requirements of Public Act 08-31 to appropriately adjust the hourly threshold and acceptable settings for the delivery of pro bono care.

Thank you for the opportunity to provide this testimony to you today. We respectfully ask for your support of House Bill 5452.

**Legislative Testimony  
Public Health Committee**

**HB 5452 AAC THE PROVISION OF VOLUNTEER HEALTH CARE SERVICES ON A TEMPORARY BASIS.**

**Friday, March 12, 2010  
Jonathan B. Knapp D.M.D.**

Senator Harris, Representative Ritter and members of the Public Health committee, my name is Dr. Jonathan Knapp and I have been practicing dentistry for 20 years in the town of Bethel. I currently serve as the Immediate Past President of the Connecticut State Dental Association. I also serve on the board of the Connecticut Foundation for Dental Outreach, which oversees the CT Mission of Mercy Project. Please accept my regrets for not being able to provide oral testimony. Unfortunately, the 2010 MOM Project is taking place today in Middletown and I am unable to get away to come to Hartford. However, I thank you for the opportunity to present this written testimony in support of HB 5452.

Volunteer events such as Mission of Mercy and the various "mini-MOM" events that are being held around the state, have become an important facet in the multi-pronged approach that is being implemented by Connecticut's dental professionals to address the problem of access to appropriate oral health care for the underserved in our state. The first CTMOM project back in 2008, made Connecticut the seventh state in the country to hold a MOM project and the first state in New England to do so. Since that time, MOM projects have come to fruition in many additional states. As the first state in New England, it is anticipated that Connecticut will become a MOM "hub" for the eastern seaboard. If you have witnessed these events, you have seen the massive and complex logistics that must be addressed to ensure a maximally successful project. The first MOM project in our state was able to provide care to over 1200 of Connecticut's neediest citizens in two days only because dentists from our state were allowed to participate in MOM events in Virginia and Colorado. Our dentists were allowed to provide direct patient care, became bitten by the MOM "bug", and were inspired to bring MOM to CT. More importantly, their participation provided more care to the underserved in those states. This year we expect to treat over 2000 patients and provide \$1 million in free dental care in two days in Middletown.

As a MOM hub, Connecticut would serve a number of functions. Since these events utilize massive amounts of portable dental equipment, it is impractical for organizers in every state to purchase their own units with chairs, lights compressors, suction units etc. Our group has already raised money and purchased equipment that will be utilized on a rotating basis as MOM events are scheduled in other states. We are also the most experienced group in the northeast corridor at sponsoring these events and will serve as a "MOM squad" as other states come on board. These factors make Connecticut the "go to" state in the region for others looking to replicate this very successful model. Allowing practitioners from other states to provide care during our events will allow us to continue to increase the capacity of these events here in Connecticut, and will provide for the expansion of these volunteer events to provide care to new regions. Enacting the same provisions for practitioners in other professions will allow us to expand these projects to provide a much broader range of services, with additional care provided in other specialties of healthcare, to those who would not otherwise receive it.

In fact, we already have dentists who come from other states (but they can only observe), and we have received calls from others who are willing to come but will only make the trip if they are allowed to actively participate.

President Obama has issued a call to all Americans to increase volunteerism. What an ideal way to facilitate the answering of that call, by providers who are eager to respond.

For all of these reasons, I urge you to support HB5452

In closing, I would like to again thank the Committee for allowing me to provide testimony today, and would be happy to make myself available at any time should you have questions.

Sincerely,

Jonathan B. Knapp D.M.D.  
One Diamond Avenue  
Bethel, CT 06801  
203-748-6935

Legislative Testimony  
HB5452 AAC The Provision Of Volunteer Health Care Services On A Temporary Basis  
Public Health Committee  
Friday, March 12, 2010  
John J. Hillgen, IV, D.M.D.

Senator Harris, Representative Ritter, and the members of the Public Health Committee, my name is John Hillgen. I am a practicing Oral & Maxillofacial Surgeon in Waterbury. I am also on the Board of Governors for the Connecticut State Dental Association. Please accept this as my testimony urging your support of HB5452 AAC The Provision Of Volunteer Health Care Services On A Temporary Basis.

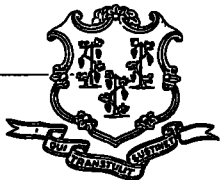
Today and tomorrow because of the Connecticut Mission of Mercy ("CT-MOM") approximately 2,000 citizens of this state will receive free dental care from more than 1,600 volunteers. Many of these volunteers are licensed professionals in this state. There are, however, many other healthcare providers who would have likewise provided care to our citizens but are unable because their license is not from this state.

Recent events in Haiti and Chile show the importance of volunteer healthcare providers in times of need. The present financial crisis in the state has created a greater need for charitable events from volunteer healthcare providers. This bill is important because, if passed, it would allow non-Connecticut healthcare providers to participate in programs such as CT-MOM. The outcome would benefit citizens of this state.

In closing I would like to thank the Committee for allowing me to testify. I am also happy to make myself available, now or at any other time, should you have questions.

Respectfully Submitted,

John J. Hillgen, IV, D.M.D.  
1389 West Main Street  
Waterbury, CT 06708



# STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

## TESTIMONY PRESENTED BEFORE THE PUBLIC HEALTH COMMITTEE March 12, 2010

*Jennifer Filippone, Health Care Systems Branch 860-509-7590*

### House Bill 5452- An Act Concerning the Provision of Volunteer Health Care Services on a Temporary Basis

The Department of Public Health provides the following information and would like to share our concerns regarding House Bill 5452.

The Department applauds the efforts of health care practitioners in providing care and services to patients in Connecticut at no cost

The provisions of this bill would authorize the Commissioner of Public Health to temporarily suspend licensing requirements to allow licensed practitioners from other states to provide volunteer care and services at free clinics or other similar events that provide health care services to Connecticut residents at no cost and at the Special Olympics or similar athletic competitions, without having to obtain a Connecticut license. The bill provides that such temporary practice cannot exceed the scope of practice permitted in Connecticut. It also allows the Department to adopt temporary policies and procedures to ensure the safety and well-being of persons receiving such services, which shall be provided to the event organizer and posted on the DPH website not later than seven days prior to the start date of the event.

The bill does not require any group seeking a temporary suspension of licensing requirements to submit an application or any specific information regarding the event to the Department nor does it provide a time frame within which such requests must be submitted.

Where similar provisions already exist in statute, additional requirements are in place to ensure that out-of-state practitioners are held to substantially similar standards as practitioners who are licensed in Connecticut. The Department respectfully requests that instead of requiring the Commissioner to suspend licensing requirements during such events and adopting temporary policies and procedures, the statutes be amended to provide for a statutory exemption as follows:

No provisions of the general statutes shall be construed to prohibit an out-of-state practitioner who holds a current, unrestricted license or certificate in another state or territory of the United States or the District of Columbia, from providing uncompensated care and services during free clinics or other similar events that provide health care services to Connecticut residents at no cost or at the Special Olympics or similar athletic competitions for persons with disabilities, provided such practitioner (A) does not represent himself or herself to be a Connecticut licensed practitioner; (B) only provides care and services to clients who are participating in the event; (C) maintains professional liability insurance or other indemnity against liability for professional malpractice equal to or greater than that required for practitioners who are licensed in Connecticut; and (D) only provides care and services authorized within the Connecticut statutes under the supervision of a Connecticut licensed practitioner within the same professional category. The organization sponsoring the event shall verify that each participating practitioner holds the required license and maintains the required professional liability insurance if applicable.

The language also needs to be modified to include professions that were omitted from the bill and to remove professions that would not be eligible to provide care and services during these types of events. Should this proposal move forward, the Department would be glad to identify those chapters of the general statutes that should be specifically included within the bill.

The Department of Public Health has worked with interested stakeholders concerning similar proposals in the past and would be pleased to continue to do in the future.

Thank you for your consideration of the Department's views on this bill.

Phone



Telephone Device for the Deaf (860) 509-7191

410 Capitol Avenue - MS # \_\_\_\_\_

PO Box 340308 Hartford, CT 06134

*Affirmative Action / An Equal Opportunity Employer*



# State of Connecticut

HOUSE OF REPRESENTATIVES  
STATE CAPITOL  
HARTFORD, CONNECTICUT 06106-1591

REPRESENTATIVE PAMELA Z. SAWYER  
HOUSE REPUBLICAN WHIP  
FIFTY-FIFTH DISTRICT

CAPITOL. 1-800-842-1423  
(860) 240-8700  
FAX. (860) 240-0207

RANKING MEMBER  
HIGHER EDUCATION AND EMPLOYMENT COMMITTEE

MEMBER  
APPROPRIATIONS COMMITTEE  
LEGISLATIVE MANAGEMENT COMMITTEE  
TRANSPORTATION COMMITTEE

*Testimony by Representative Pam Sawyer*

Public Health Committee

House Bill 5452

March 12, 2010 10:00 Room 1D

***RE: In Support – Volunteer Health Care Services on a Temporary Basis***

Good morning Chairmen Harris and Ritter, Ranking Members Debicella and Giegler, and members of the Public Health Committee. For the record, I am Representative Pam Sawyer, representing the 55th District. I am here today to speak in favor of House Bill 5452 AAC The Provision Of Volunteer Health Care Services On A Temporary Basis.

Thank you for your consideration to allow the Department of Public Health to grant temporary licensure for out-of-state medical personnel.

This common sense legislation expands our ability as a state to allow free medical services through specialty events sponsored by generous group. These events are widely used by the impoverished, underserved populations both in urban and rural areas.

The review of the clients served has proved that they often have not accessed other medical or dental care when they have been in need of health care.

Allowing professionals who wish to donate their time and energy and great depth of training, will open up more access to the valuable medical and dental care.

These professionals are well trained, experienced and a devoted group. Connecticut simply has to be flexible, looking across state lines to allow doctors, dentists and other valuable medical personnel to be the caregivers, mostly for emergency issues.

Thank you for the opportunity to testify on House Bill 5452 and I ask the Committee to act favorably on this bill.

SERVING THE TOWNS OF ANDOVER, BOLTON, HEBRON AND MARLBOROUGH

95 SOUTH ROAD BOLTON, CONNECTICUT 06043 PHONE (860) 649-5655

09/15/2002 08 59 FAX

My name is Angela Ciccone I am writing to testify on behalf of the elderly patients who live in nursing homes.

I have seen first hand the needs of our seniors from Nursing Homes who come unattended to their dental appointments. I have seen first hand.. the humiliation of a patient, who came to an appointment with a family member. who could not assist him to use the restroom, and then suffer further embarrassment as he soiled himself and had to sit unclean until the nursing facility came with a change of clothes. That only happened after several calls insisting the nursing home make an aid available.

I have seen first hand, a very sweet female patient, come to a dental appointment, unable to comprehend where she was, or why she was there. She did not recognize any of the office staff and became very upset.

I have seen first hand when a patient could not stand to get x-rays, and being our office is not trained to transfer, the patient could not get the treatment required and had to be sent back only to reschedule another visit, twice the time, twice the effort, transportation costs to the state. . Patients need to be able to transfer from wheelchairs to dental chairs for most procedures, and that cannot happen if patients come without an experience trained aid to help them.

Giving proper treatment to our patients is very difficult when we do not have the support from the nursing homes. It must start there. Our office is more than able and willing to treat patients who have needs; we have made it possible to have wheelchair accessibility, and operatories that accommodate their wheelchairs. Making sure our elderly patients overall needs are met should be a top priority.

Thank you for making this happen.

Sincerely Angela Ciccone



---

**From:** Shelley McNeely <shelleymcneely@yahoo.com>  
**To:** ocdg4@aol.com  
**Subject:** Shelley Statement  
**Date:** Fri, 12 Mar 2010 8:02

March 12, 2010

Hello my name is Shelley McNeely I am the Billing Secretary at Oral Care Dental Group and these are my feelings regarding treatment of our nursing home residents when they are seen outside of the nursing homes.

I would like a policy set in place that states that a nursing home resident needs to be accompanied by a capable staff member when seen out side of there home for medical appointments. By capable I mean able to assist them with transferring from a wheelchair to an exam table or chair. Able to assist properly when bathroom facilities need to be used. And lastly able to advocate for the patient when they are not able to advocate for themselves.

I have seen far too many nursing home residents not treated with the appropriate care that needs to be shown them when they are out side of the facility. I just hope this small step will lead to a much bigger step in the treatment of our elderly. Because after all they are the ones who truly deserve and need our help.

Thank you for your time.

Shelley McNeely

---

**CONNECTICUT ASSOCIATION OF HEALTH CARE FACILITIES, INC.**

---

March 12, 2010

**Written Testimony of Matthew V. Barrett, Executive Vice President of the Connecticut Association of Health Care Facilities (CAHCF) before the Public Health Committee**

Good morning Senator Harris, Representative Ritter and to the members of the Public Health Committee. My name is Matthew Barrett and I am Executive Vice President of the Connecticut Association of Health Care Facilities (CAHCF), our state's 110 member trade association of proprietary and nonprofit nursing homes. I am pleased to have this opportunity to testify on several bill's on H. B. No. 5475 (RAISED) AN ACT CONCERNING DENTAL CARE FOR NURSING HOME RESIDENTS.

This legislature requires nursing homes to ensure that a resident attending a dental care appointment is safely transported to and from such appointment and receives adequate supervision and assistance for the duration of such appointment.

To the extent that this legislation would required a Certified Nursing Aide (CNA) to accompany a resident on any such appointment, our association understands that nursing homes provide this level of supervision, even though there is no add-on reimbursement for this under the Connecticut Medicaid program. We also understand that dentist and physicians are unwilling to schedule these types of appointments unless proper supervision is provided.

Nursing homes make every effort to secure a family member or other responsible party to accompany the resident on such appointments given that providing CNA supervision inevitably would have the effect of diverting scarce staffing resources from the nursing home floor for extended periods of time. However, when this can't be assured, nursing homes must and do provide supervision above their normal staffing patterns.

Finally, a strict requirement that supervision be provided in all instances reasonably should include the opportunity to receive fair and reasonable reimbursement for doing so.

I would be happy to answer any questions you may have.

**S - 600**

**CONNECTICUT  
GENERAL ASSEMBLY  
SENATE**

**PROCEEDINGS  
2010**

**VOL. 53  
PART 3  
618 - 932**

cd  
SENATE

33  
April 21, 2010

Thank you, Mr. President.

Calendar 374, House Bill Number 5225, Mr.

President, move to refer this item to the Committee on  
Energy and Technology.

THE CHAIR:

Seeing no objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President.

Calendar 375, House Bill Number 5320, Mr.

President, move to place this item on the consent  
calendar.

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President.

Calendar 376, House Bill Number 5254, Mr.

President, move to refer this item to the Committee on  
Finance, Revenue and Bonding.

THE CHAIR:

Seeing no objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President.

Calendar 377, PR; Calendar 378, PR; Calendar 379  
is marked go; Calendar 380, House Bill Number 5452,

cd  
SENATE

34  
April 21, 2010

Mr. President, move to place this item on the consent calendar.

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President.

Continuing calendar page 27, Calendar 381, House Bill Number 5006, move to place this item on the consent calendar.

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President.

Calendar 382, House Bill Number 5157, move to place this item on the consent calendar.

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President.

Calendar 383 is PR. Moving to calendar page 28, Calendar 384, House Bill Number 5204, Mr. President, move to place this item on the consent calendar.

THE CHAIR:

Seeing no objection, so ordered.

**S - 601**

**CONNECTICUT  
GENERAL ASSEMBLY  
SENATE**

**PROCEEDINGS  
2010**

**VOL. 53  
PART 4  
933 - 1266**

cd  
SENATE

218  
April 21, 2010

Bill 5265; Calendar 313, substitute for House Bill 5002.

Calendar page 20, Calendar 314, House Bill 5201.

Calendar page 24, Calendar 340, substitute for Senate Bill 175.

Calendar page 25, Calendar 346, substitute for Senate Bill 151; Calendar 350, Senate Bill 333; Calendar 371, substitute for House Bill 5014.

Calendar page 26, Calendar 375, House Bill 5320.

Calendar page 27, Calendar 379, substitute for House Bill 5278; Calendar 380, substitute for House Bill 5452; Calendar 381, substitute for House Bill 5006; Calendar 382, House Bill 5157.

Calendar page 28, Calendar 384, substitute for House Bill 5204.

Calendar page 29, Calendar 395, substitute for Senate Bill 127; Calendar 396, Senate Bill 147.

Calendar page 30, Calendar 413, House Bill 5024; Calendar 414, substitute for House Bill 5401.

Calendar page 31, Calendar 419, substitute for House Bill 5303.

Calendar 32 -- page 32, Calendar Number 421, substitute for House Bill 5388; and on calendar page 34, Calendar 46, substitute for Senate Bill 68;

cd  
SENATE

219  
April 21, 2010

Calendar 50, substitute for Senate Bill 17.

Calendar page 35, Calendar 64, substitute for  
Senate Bill 187.

Calendar page 37, Calendar 109, substitute for  
Senate Bill 189.

Calendar page 39, Calendar Number 148, substitute  
for Senate Bill 226.

Calendar page 40, Calendar 182, substitute for  
Senate Bill 218.

Calendar page 41, Calendar 188, substitute for  
Senate Bill 200.

Mr. President, that completes those items placed  
on the consent calendar.

THE CHAIR:

All right. If the Clerk has made an announcement  
that a roll call vote is in progress in the Senate on  
the first consent calendar, the machine will be open.  
Senators may cast their vote.

THE CLERK:

The Senate is now voting by roll call on the  
consent calendar. Will all Senators please return to  
the chamber. The Senate is now voting by roll call on  
the consent calendar. Will all Senators please return  
to the chamber.



cd  
SENATE

220  
April 21, 2010

THE CHAIR:

Would all Senators please check the roll call board to make certain that your vote is properly recorded. If all Senators have voted and if all votes are properly recorded, the machine will be locked, and the Clerk may take a tally.

THE CLERK:

Motion is on adoption of Consent Calendar Number 1.

Total Number Voting	35
Those voting Yea	35
Those voting Nay	0
Those absent and not voting	1

THE CHAIR:

Consent Calendar Number 1 is passed.

Are there any announcements or points of personal privilege? Are there any announcements or points of personal privilege?

Senator LeBeau.

SENATOR LEBEAU:

Thank you, Mr. President, for a -- for an announcement.

THE CHAIR:

Please proceed.