



# Senate

General Assembly

**File No. 396**

February Session, 2004

Substitute Senate Bill No. 319

*Senate, April 1, 2004*

The Committee on Public Health reported through SEN. MURPHY of the 16th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

## **AN ACT REQUIRING A PAIN MANAGEMENT PROTOCOL IN NURSING HOMES.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2004*) (a) Each nursing home, as  
2 defined in section 19a-490 of the general statutes, as amended, shall  
3 establish and implement a pain management protocol for the benefit of  
4 residents. The protocol shall be consistent with regulations adopted  
5 pursuant to subsection (b) of this section.

6 (b) The Commissioner of Public Health shall adopt regulations, in  
7 accordance with chapter 54 of the general statutes, to establish a pain  
8 management protocol for use in nursing homes. In adopting such  
9 regulations, the commissioner shall consider the (1) standards for the  
10 assessment and management of pain adopted by the Joint Commission  
11 on Accreditation of Healthcare Organizations, and (2) pain  
12 management directive adopted by the Veterans Health Administration  
13 within the federal Department of Veterans Affairs.



The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

**OFA Fiscal Note**

**State Impact:**

Agency Affected	Fund-Effect	FY 05 \$	FY 06 \$
Social Services, Dept.	GF - Cost	Potential Minimal	Potential Minimal
Public Health, Dept.	GF - Cost	None	None

Note: GF=General Fund

**Municipal Impact:** None

**Explanation**

It is anticipated that the Department of Public Health will be able to adopt the required regulations without requiring additional resources.

The requirement that each nursing home establish and implement a pain management protocol may lead to administrative and training costs to these facilities. The Medicaid program under the Department of Social Services (DSS) currently pays for roughly two-thirds of the nursing home beds in the state. To the extent that any of the increased costs to nursing homes are passed on to the DSS through the future rates set under Medicaid, additional costs to the state may result. Any such costs are expected to be minimal.

**OLR Bill Analysis**

sSB 319

***AN ACT REQUIRING A PAIN MANAGEMENT PROTOCOL IN NURSING HOMES*****SUMMARY:**

This bill requires each nursing home in the state to establish and implement a pain management protocol for its residents. The bill requires the public health commissioner to adopt regulations establishing the protocol for use in nursing homes and requires each home's protocol to be consistent with the regulations.

In adopting the protocol regulations, the bill requires the commissioner to consider:

1. pain assessment and management standards adopted by the Joint Commission on Accreditation of Health Care Organizations (JCAHO) and
2. the pain management directive adopted by the Veterans Health Administration in the federal Department of Veterans Affairs.

EFFECTIVE DATE: October 1, 2004

**BACKGROUND*****JCAHO Pain Management***

JCAHO, an organization that accredits hospitals, nursing homes, and other health care facilities, instituted certain standards in 2001 for appropriate assessment and management of pain, which institutions must meet in order to be accredited by the organization.

***VHA Directive***

The Veterans' Health Administration developed its national pain management strategy in 1998. Its goal is to implement a comprehensive, multicultural, integrated, system wide approach to pain management to reduce pain and suffering for veterans with acute

and chronic pain associated with a wide range of illnesses (VHA Directive 2003-021).

**COMMITTEE ACTION**

Select Committee on Aging

Joint Favorable Substitute Change of Reference

Yea 9 Nay 0

Public Health Committee

Joint Favorable Report

Yea 15 Nay 7