



TESTIMONY
OF THE
CONNECTICUT CONFERENCE OF MUNICIPALITIES
TO THE
LABOR AND PUBLIC EMPLOYEES COMMITTEE

January 30, 2007

The Connecticut Conference of Municipalities appreciates the opportunity to testify on the following bill of interest to towns and cities:

H.B. 6956, “An Act Concerning Workers’ Compensation Coverage for Firefighters and Police Officers”

CCM urges you to **take no action** on this bill.

H.B. 6956 would provide a costly special rebuttable presumption benefit under the Workers’ Compensation Act to police officers and firefighters who contract hepatitis, meningococcal meningitis or tuberculosis.

CCM is concerned about the special presumption of job-relatedness contained in this bill. The existing workers’ compensation system is the appropriate mechanism to address these claims. The workers’ compensation system should not be jerry-rigged to benefit any particular group of employees or employers. *If there is a correlation between the job and the particular incident, the public safety officer would be eligible to receive workers’ compensation benefits.*

The federal Center for Disease Control (CDC) – the country’s leading disease research center – reported on five studies of hepatitis C infection in its *Morbidity and Mortality Weekly Report* (July 29, 2000). The article, entitled “Hepatitis C Virus Infection Among Firefighters, Emergency Medical Technicians, and Paramedics – Selected Locations, United States, 1991-2000”, examined studies conducted in Philadelphia, Atlanta, *Connecticut*, Miami-Dade County, Florida, and Pittsburgh. The CDC concluded that “**first responders are not at a greater risk than the general population for HCV [hepatitis C virus] infection ... [emphasis added]**”.

The proponents of H.B. 6956 have not submitted any credible scientific evidence to support the bill.

- over -

H.B. 6956 would impose a new and costly unfunded state mandate. On an identical bill from last session (H.B. 5037, file #39), the Office of Fiscal Analysis (OFA) stated that there are "potential significant" fiscal implications for municipalities and identified the bill as a costly "STATE MANDATE". The number of cases of tuberculosis and meningitis are increasing. OFA stated that *just one case could cost between \$750,000 to \$2.5 million.*

H.B. 6956 has the potential to match the fiscal impact of the heart disease and hypertension mandate -- "sunsetting" a few years ago. The H&H mandate will cost municipalities upwards of \$30 million each year over the next 20 years. After all, towns and cities are still under the mandate until every police officer or firefighter hired on or before June 30, 1996 retires.

The dedication of public safety officials is not at issue here. What is at issue is whether towns and cities - and their property taxpayers would be forced to pay millions for a state-granted special benefit -- *a benefit that, when warranted, is already covered under the current workers' compensation system.*

CCM urges you to either include provisions to reimburse municipalities for the costs of this costly mandate, or take no action on H.B. 6956.



If you have any questions, please call Bob Labanara or Ron Thomas of CCM, at (203) 498-3000.