



Substitute House Bill No. 6264

Public Act No. 09-77

AN ACT CONCERNING STATE-WIDE HEALTH CARE FACILITY PLANNING.

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

Section 1. Section 19a-634 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2009*):

(a) The Office of Health Care Access [, in consultation with the Department of Public Health, shall carry out a continuing] shall conduct, on an annual basis, a state-wide health care facility utilization study. [, including a study of existing health care delivery systems; recommend improvements in health care procedures to the health care facilities and institutions; recommend to the commissioner legislation in the area of health care programs; and report annually to the Governor and the General Assembly its findings, recommendations and proposals, as of January first, for improving efficiency, lowering health care costs, coordinating use of facilities and services and expanding the availability of health care throughout the state.] Such study shall include, but not be limited to, an assessment of: (1) Current availability and utilization of acute hospital care, hospital emergency care, specialty hospital care, outpatient surgical care, primary care and clinic care; (2) geographic areas and subpopulations that may be underserved or have reduced access to specific types of health care

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services; and (3) other factors that the Commissioner of Health Care Access deems pertinent to health care facility utilization. Not later than June thirtieth of each year, the commissioner shall report, in accordance with section 11-4a, to the Governor and the joint standing committees of the General Assembly having cognizance of matters relating to public health and human services on the findings of the study. Such report may also include the commissioner's recommendations for addressing identified gaps in the provision of health care services and recommendations concerning a lack of access to health care services.

(b) The office, in consultation with such other state agencies as the Commissioner of Health Care Access deems appropriate, shall establish and maintain a state-wide health care facilities plan, [including provisions for an ongoing evaluation of the facility utilization study conducted pursuant to subsection (a) of this section to: (1) Determine the availability of acute care, long-term care and home health care services in private and public institutional and community-based facilities providing diagnostic or therapeutic services for residents of this state; (2) determine the scope of such services; and (3) anticipate future needs for such facilities and services.] Such plan may include, but not be limited to: (1) An assessment of the availability of acute hospital care, hospital emergency care, specialty hospital care, outpatient surgical care, primary care, and clinic care; (2) an evaluation of the unmet needs of persons at risk and vulnerable populations as determined by the commissioner; (3) a projection of future demand for health care services and the impact that technology may have on the demand, capacity or need for such services; and (4) recommendations for the expansion, reduction or modification of health care facilities or services. In the development of the plan, the office shall consider the recommendations of any advisory bodies which may be established by the commissioner. The commissioner may also incorporate the

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recommendations of authoritative organizations whose mission is to promote policies based on best practices or evidence-based research. The commissioner, in consultation with hospital representatives, shall develop a process that encourages hospitals to incorporate the state-wide health care facilities plan into hospital long-range planning and shall facilitate communication between appropriate state agencies concerning innovations or changes that may affect future health planning. The office shall update the state-wide health care facilities plan on or before July 1, 2012, and every five years thereafter. Said plan shall be considered part of the state health plan for purposes of office deliberations pursuant to section 19a-637.

Approved June 2, 2009