



**Testimony of J. Kevin Kinsella, Vice President of Hartford Hospital
Before the Human Services Committee
Governors Bill No. 32
February 23, 2010**

An Act Implementing the Governor's Budget Recommendations Concerning Social Services

Good afternoon my name is J. Kevin Kinsella, Vice President of Hartford Hospital and I am here today to comment on Governors Bill 32 "An Act Implementing the Governor's Budget Recommendations Concerning Social Services.

The focus of my testimony is to support section 28 of the bill which states that the "Commissioner of DMHAS shall certify intermediate care beds in general hospitals to provide inpatient mental health services for adults with serious and persistent mental illness.

This new provision addresses the serious problem of overcrowding of emergency rooms in CT hospitals. Last year Hartford Hospital treated approximately 100,000 patients in our emergency room of which 20,000 were for mental and substance abuse. A majority of these patients require only evaluation/referral or short term hospitalization. There is, however, a cohort of patients who need intermediate care (1 to 3 months) which is not currently available in the community hospitals because of lack of reimbursement and State Medicaid regulation. Section 28 would allow for authorization and payment for such admission. This practice exists in many other states and has helped with the problem of clogging of mental health patients in emergency rooms.

In discussions with both the Departments of Social Service and DMHAS hospital representatives (including myself) have recommended at least three sites be established in the first year of operation. The sites should coincide with where the greatest point of Emergency Room service: Hartford, Bridgeport and New Haven. Hartford is especially critical given the potential closing of Cedarcrest Hospital which admits a majority of its patients from the Hartford region.

If Governors Bill 32 is approved, Section 28 will go a long way in improving care for persons with serious mental illness. The CT hospitals stand ready to assist in the implementation of this proposed program.

In regard to section 36 which proposes to eliminate the Medical Inefficiency Committee. I would like to voice my strong opposition. I am currently chairman of this Committee which was authorized last session by the legislature. The Committee is about to finish its work and present their findings to the Human Services Committee.



A large amount of work went into this task by dedicated professionals who volunteered their time and expertise. As co-chair I was careful to include the DSS in our meetings and deliberations. The definition of “medically necessary” is a extremely important task which should have proper public input and legislative oversight. I urge you to reject this section of the Bill.

Thank you for your time and attention.