



SEIUHealthcare
United for Quality Care

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Testimony of Deborah Chernoff
on behalf of the
New England Health Care Employees Union, District 1199/SEIU

Opposing Raised Bill 5447, "An Act Concerning the Certificate of Need Process"

Good afternoon, Senator Harris, Representative Ritter, and members of the Public Health Committee.

My name is Deborah Chernoff and I am representing the 22,000 health caregivers in our union, District 1199.

We are deeply concerned with a number of the provisions of this bill that alter the provisions of the Certificate of Need process in a way that eliminates transparency and limits or possibly entirely eliminates, the opportunity for those individuals and organizations most affected by changes in our health care system to understand, comment on or voice their objections to those changes. It's removing the public from Public Health.

In particular, our reading of this bill suggests that the Office of Health Care Access is no longer required to hold a public hearing about the termination of services in either the public or private sector of our health care system. While that Office may, at its discretion, choose to hold a hearing, there are no longer any circumstances under which they must do so.

Currently, the statutes require that a public hearing be held if three individuals or an organization representing five or more people request it. By eliminating this

provision, all power and authority is shifted to the executive branch – no matter how many legislators request such a hearing, no matter how many of their constituents may be affected, there is no statutory support to guarantee the hearing will be held.

Another serious cause for concern is that mental health and substance abuse providers not affiliated with a health care facility are no longer required to file for a Certificate of Need prior to making changes to or eliminating their services. At the same time we are closing state facilities, like Cedar Ridge and shifting the responsibility for providing care to private agencies, we are exempting those same agencies from any responsibility to continue to provide them, potentially leaving clients and families without services at very short notice – or none at all.

Finally, we are questioning whether this bill would eliminate the current requirement that nursing homes go through the CON process and that DSS hold a public hearing if a nursing facility intends to close. The language is not entirely clear on this issue but I would remind the committee that on average, state Medicaid dollars pay for the care of 68% of all nursing home residents. The public, the residents and the staff of those homes have are stakeholders and this would silence their voices altogether in this process. Let's not forget that residents sicken and sometimes die when they are involuntarily evicted from what is supposed to be their "home," that family life is disrupted and that hundreds of caregivers risk losing their livelihoods. They should at least be given the opportunity to stand up and say "No."

Don't take the public out of public health decisions. Reject changes to the CON process that limit or eliminate public hearings and exempt recipients of public monies from scrutiny by OHCA.