



**STATE OF CONNECTICUT**  
*DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES*  
*A Healthcare Service Agency*

Dannel P. Malloy  
Governor

Patricia A. Rehmer, MSN  
Commissioner

**Testimony of Patricia Rehmer, Commissioner**  
**Department of Mental Health and Addiction Services**  
**Before the Government Administration and Elections Committee**  
**March 21, 2011**

Good Morning Sen. Slossberg, Rep. Morin and distinguished members of the Government Administration and Elections Committee. I am Commissioner Patricia Rehmer of the Department of Mental Health and Addiction Services, and I am here today to speak in favor of **SB 943 AN ACT CONCERNING PRIVILEGED COMMUNICATIONS AND THE FREEDOM OF INFORMATION ACT**. I want to thank the Committee for your assistance in raising this bill.

SB 943 would protect the clinical/patient relationships that occur in state operated settings. DMHAS is a health care agency providing services to individuals with psychiatric disabilities and substance use disorders. The individuals we serve come to state hospitals for their care when they are not able to be managed in a general hospital setting or when they need intermediate to long-term care. Most often, our clients are poor, and have chronic diseases which require, like any other chronic disease, ongoing care. We work with them, their families and advocates toward the best possible treatment outcome and to determine how best to assist them to achieve recovery.

The department receives many requests for patient records under the Freedom of Information Act. With properly signed releases and the ability to redact identifying information we can and do allow access to health care information in certain circumstances. Some times, however, we must deny access to those records and we do so by citing numerous state and federal confidentiality laws. A recent decision by the FOI Commission which allowed access to certain records caused us grave concern. Though the individuals were deceased, it is our firm belief that records of this nature are very sensitive and that family members of those who have been in state hospitals would not want that information disclosed. It should not be the case that because your illness was such that you needed to seek state services that your health records could be obtained through the FOIA.

I would also like the committee to know that DMHAS has an Institutional Review Board that allows for documented researchers to look at these types of records but with the added protection of redacting any identifying information. This Board is required by federal regulations in order to allow for research while protecting the rights and welfare of the subjects of the research. DMHAS offered to use the IRB guidelines as a way to share the requested information but that option was not accepted by the individual making the FOI request or the Commission. **SB 943** would protect those records just like those records are protected for any other individual that seeks similar care but has the means to afford that care in the private sector.

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I would like to take another minute or two of the Committee's time to speak to an issue that I understand was supposed to be before you today but was inadvertently left off the public hearing agenda. DMHAS asked for language that would amend the Department of Public Works statutes to allow our department to hold a lease directly with a landlord for the provision of residential services. We currently provide residential services to some individuals, who because of their psychiatric disability cannot hold a lease. These individuals often times need 24/7 staff for treatment and supervision. This language will give DMHAS a mechanism where we can lease the apartment unit for the individual. This is very similar to language that is already in existence for individuals served by the Department of Developmental Services. For your frame of reference, the language we requested is in HB 6334.

Thank you for the opportunity to address the Committee. I would be happy to answer any questions you may have at this time.

