



STATE OF CONNECTICUT

STATE DEPARTMENT ON AGING

LONG TERM CARE OMBUDSMAN PROGRAM

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PUBLIC HEALTH COMMITTEE

PUBLIC HEARING

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TESTIMONY OF

NANCY SHAFFER, STATE OMBUDSMAN

Good morning Senator Gerrantana and Representative Johnson and members of the Public Health Committee. My name is Nancy Shaffer and I am the State Long Term Care Ombudsman. The Long Term Care Ombudsman Program is mandated by the Older American's Act and Connecticut General Statutes 17b-400 through 17b-406 to provide services to protect the health, safety, welfare and rights of residents of long term care facilities. As the State Ombudsman it is my responsibility to facilitate public comment and represent the interests of residents in order to recommend changes to the laws, regulations, policies and actions which affect residents' quality of life and care. As State Ombudsman I serve as a member of the Long Term Care Advisory Council, the Money Follows the Person Steering Committee and I am a member of the CT Elder Action Network (CEAN). I am a Gerontologist and have more than twenty-five years of experience in long term care in Connecticut. Effective January 1, 2013, the Long Term Care Ombudsman Program is now under the umbrella administration of the newly created State Department on Aging. I appreciate the opportunity to testify before you today regarding certain legislative proposals.

PROPOSED S.B. No. 64 AN ACT CONCERNING NOTICE TO PATIENTS OF THE COST TO COPY OR TRANSFER MEDICAL RECORDS.

Current Connecticut law provides that nursing home residents, their authorized health agents, conservators or holders of powers of attorney have the right to review and copy all their medical records. No charge can be imposed for looking at a medical record. Furthermore, a resident who is a Medicaid recipient is entitled to a copy of his or her records at no charge. Upon admission to a nursing home all residents, regardless of payer source, are provided a copy of current fees charged for all services. This notice should include fees for copying medical records. The proposal before you should ensure that it is included in a listing of all fees for services. It should be noted on this list that no charge is incurred for a Medicaid recipient's

copy of medical records or if the request for copies relates to a claim or appeal under either Medicare or Medicaid. (Connecticut General Statutes 19a-490b)

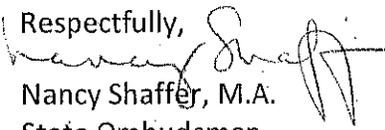
PROPOSED H.B. No. 5979 AN ACT ESTABLISHING A TASK FORCE ON ALZHEIMER'S DISEASE.

It is estimated that the aging population of Connecticut (65+ year olds) will increase by 64% between 2006 and 2030. We know that the greatest known risk factor for Alzheimer's disease is increasing age and that the majority of Alzheimer's patients are 65 years of age and older. Those statistics alone warrant a better understanding of how the aging demographic and the anticipated increased number of individuals with Alzheimer's disease will affect Connecticut's future. Alzheimer's disease progressively worsens and we know that the burden on family and caregiver is significant. The financial costs are overwhelming, both for the individual and family as well as for the State of Connecticut. The Ombudsman Program supports the Alzheimer's Association proposed task force on Alzheimer's disease.

PROPOSED H.B. No. 5738 AN ACT REQUIRING NURSING HOME FACILITIES TO PROVIDE INFORMATION CONCERNING SAFETY INCIDENTS TO PATIENTS AND THEIR FAMILIES.

A core principle of The Long Term Care Ombudsman Program is to ensure consumers have all pertinent information available to them to make an informed decision regarding nursing home placement. Safety must be a priority in the nursing home setting. Any accident or incident which causes harm to the resident is a serious matter. The Department of Public Health receives notification of accidents and incidents and determines safety violations. When the Department of Public Health (DPH) investigates these incidences the home is expected to develop a plan of care specific to that resident and also review policy and procedures and write a Plan of Correction to ensure all residents can be kept safe from similar harm. Often times the annual inspection conducted by the DPH will include violations related to safety issues. These annual survey findings and subsequent plans of correction are available to the public. Some homes maintain a copy of its most recent survey at the reception desk while others post a notice as to where this copy is located. Currently, the requirement is to post only the most recent survey, it would be informative to provide the most recent and the previous year's survey for comparison and research of the home's trends in care. The current proposal does not define "patient safety incident". For clarity sake for the consumer and the provider this should be defined if the proposal is enacted.

Respectfully,


Nancy Shaffer, M.A.

State Ombudsman