February 25, 2016

Testimony of Matthew V. Barrett, Executive Vice President of the Connecticut Association of Health Care Facilities (CAHCF), Inc.

Good morning Senator Flexer, Representative Serra and to the members Committee on Aging. My name is Matthew V. Barrett, Executive Vice President of the Connecticut Association of Health Care Facilities (CAHCF), our state's one hundred and sixty-seven (167) member trade association and advocacy organization of skilled nursing facilities and rehabilitation centers. Thank you for this opportunity to offer testimony at today's public hearing.

Support for S.B. No. 161 (RAISED) AN ACT CONCERNING NOTIFICATION OF PENALTIES FOR ABUSE AND NEGLECT OF NURSING HOME RESIDENTS

The bill provides a reasonable notice to new applicants for a nursing home license, especially addressed to potential out-of-state providers, emphasizing the value that Connecticut places on providing high quality nursing home care. The bill's notice provisions also put emphasis on the potential for liability when care is provided below the standard of care. Our association appreciates the opportunity provided by the Aging Committee to work with the legislation's proponents, namely the state long term care ombudsman and the nursing home resident councils, and with Leading Age Connecticut, on this legislation over the last several years. This year's bill represents the consensus of the parties on the statutory language that should be adopted and we urge the committee to pass the bill this year.

S.B. No. 166 (RAISED) AN ACT EXPANDING UTILIZATION OF PATIENT-DESIGNATED CAREGIVERS.

CAHCF understands that this bill is intended to extend federal "Care Act" provisions adopted last session pertaining to Connecticut hospitals in Connecticut to skilled nursing facilities. For skilled nursing facilities, the discharge planning process, which S.B 161 implicates, is governed by a comprehensive body of law developed over

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decades at both the state and federal levels. For example, The Connecticut Public Health Code (19-13-d8t, Section (p)) overlaps much of what is proposed in SB 161 in the area of discharge planning. In addition, Connecticut state law (CGS 19a-535 (c)) similarly addresses transfer or discharge requirements. Moreover, there are a significant body of federal requirements in the area of sufficient preparation and orientation for the safe and orderly transfer of residents from the skilled nursing facility (CFR Section 483.12).

CAHCF is concerned that the legislation will confuse residents providers and those who advocate on their behalf during the transfer and discharge process. For this reason, a careful and diligent review of the existing process and the implication of S.B. 161 should be conducted before layering additional requirements into yet another section of the Connecticut General Statutes. CAHCF recommends that a better approach to implementing the federal Care Act provisions would be to build off of the Connecticut statutory framework found at CSG 19a-535 toward achieving the goal of the legislation. We would be happy to work with the committee in this process.

I would be happy to answer any questions you may have.

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