



House of Representatives

General Assembly

File No. 484

February Session, 2016

Substitute House Bill No. 5264

House of Representatives, April 6, 2016

The Committee on Public Health reported through REP. RITTER of the 1st Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING ACCESSIBILITY OF MEDICAL DIAGNOSTIC EQUIPMENT.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective from passage*) (a) For purposes of this
2 section: (1) "Health care facility" means a hospital or an outpatient
3 clinic, as such terms are defined in section 19a-490 of the general
4 statutes, a long-term care facility, as defined in section 17a-405 of the
5 general statutes, and a hospice facility, licensed pursuant to section
6 19a-122b of the general statutes; and (2) "medical diagnostic
7 equipment" means an (A) examination table, (B) examination chair, (C)
8 weight scale, (D) mammography equipment, and (E) x-ray, imaging
9 and other radiological diagnostic equipment.

10 (b) The Commissioner of Public Health shall adopt by regulation, in
11 accordance with the provisions of chapter 54 of the general statutes,
12 technical standards for medical diagnostic equipment purchased by
13 health care facilities on or after January 1, 2017, that meet or exceed the
14 technical standards for accessibility developed by the federal

15 Architectural and Transportation Barriers Compliance Board in
16 accordance with Section 4203 of the Patient Protection and Affordable
17 Care Act, P.L. 111-148, as amended from time to time.

18 (c) Not later than October 1, 2017, the Commissioner of Public
19 Health shall notify each physician licensed pursuant to chapter 370 of
20 the general statutes of the technical standards for accessibility
21 developed by the federal Architectural and Transportation Barriers
22 Compliance Board in accordance with Section 4203 of the Patient
23 Protection and Affordable Care Act, P.L. 111-148, as amended from
24 time to time, for medical diagnostic equipment. The commissioner
25 shall also provide information to each physician describing the best
26 practices for the safe provision of health care to individuals with
27 accessibility needs.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section

Statement of Legislative Commissioners:

In Section 1(a)(2)(C) "weigh scale" was changed to "weight scale" for statutory consistency; and, in Section 1(b), "The Commissioner of Public Health shall adopt regulations, in accordance with the provisions of chapter 54 of the general statutes, to require each health care facility to meet or exceed the technical standards for accessibility developed by the federal Architectural and Transportation Barriers Compliance Board in accordance with Section 4203 of the Patient Protection and Affordable Care Act, P.L. 111-148, as amended from time to time, for medical diagnostic equipment purchased on or after January 1, 2017." was changed to "The Commissioner of Public Health shall adopt by regulation, in accordance with the provisions of chapter 54 of the general statutes, technical standards for medical diagnostic equipment purchased by health care facilities on or after January 1, 2017, that meet or exceed the technical standards for accessibility developed by the federal Architectural and Transportation Barriers Compliance Board in accordance with Section 4203 of the Patient Protection and Affordable Care Act, P.L. 111-148, as amended from time to time." for clarity.

PH *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 17 \$	FY 18 \$
UConn Health Ctr.	GF - Potential Cost	Significant	Significant
Public Health, Dept.	GF - Potential Cost	See Below	See Below

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill results in a potential significant cost to the UConn Health Center (UCHC), a potential one-time cost of approximately \$5,000 to the Department of Public Health (DPH) in FY 17, FY 18, or one of the out years for training, and an additional potential cost of approximately \$300 to DPH in FY 17 or FY 18 for printing and mailings to licensed physicians.

The bill requires DPH to adopt regulations for technical standards for medical diagnostic equipment that meet or exceed those developed by the United States Access Board. The Board has not yet finalized such standards.¹ Once they are finalized and included in DPH regulations, UCHC may be required to purchase equipment that is more expensive than it would otherwise purchase. Detail on medical diagnostic equipment costs are provided below.

¹The United States Access Board is developing accessibility standards for medical diagnostic equipment, including examination tables and chairs, weight scales, radiological equipment, and mammography equipment under the "Patient Protection and Affordable Care Act." The Board proposed standards for public comment and will finalize them according to the comments received and recommendations from an advisory committee it chartered.

In addition, it is anticipated that DPH will request training on these technical standards by the Board. Due to budget constraints, the Board usually requests reimbursement of travel costs for its participation, estimated at \$5,000. As it is unknown when standards will be finalized, this on-time cost could be incurred in any fiscal year. The bill also requires that DPH notify licensed physicians of these standards. Currently, there are 17,563 licensed physicians, of which DPH has email addresses for all but 527 (3%). Printing and mailing costs for this population are estimated at approximately \$300, which may be incurred in either FY 17 or FY 18 only as the notification must occur by 10/1/2017. As it is unknown if standards will be finalized in time to meet this deadline, the cost is reflected as a potential one.

The UConn Health Center currently has the following medical diagnostic equipment that, as defined by this bill, would be subject to new standards:

- Chairs, Exam and Treatment = 77 (cost approximately \$1,000 each)
- Chairs, Dental = 181 (cost approximately \$5,000 each)
- Mammography including 3D, 2D, stereotactic biopsy = 3 (cost \$250,000 - \$350,000 or greater each)
- Patient Scales with Lifts = 25 (cost \$750 - \$1,000 each)
- Scanners including CT, MRI, Catheterization, Electrophysiology = 9 (cost up to \$2.5 million or more each)
- Tables including: Examination, Operating, Treatment, X-ray = 630 (cost \$1,000 each or more)
- X-ray Units including Radiographic and Fluoroscopic = 45 (cost \$125,000 - \$200,000 each)

The Out Years

The annualized ongoing fiscal impact identified above would

continue into the future subject to when standards are developed, when regulations based on such are adopted by DPH, and if standards necessitate the purchase of equipment by UCHC.

*Sources: The State of Connecticut's eLicense Website, available: <https://www.elicense.ct.gov/>
United States Access Board, "About the Rulemaking on Medical Diagnostic Equipment," available: <https://www.access-board.gov/guidelines-and-standards/health-care/about-this-rulemaking>*

OLR Bill Analysis**sHB 5264*****AN ACT CONCERNING ACCESSIBILITY OF MEDICAL DIAGNOSTIC EQUIPMENT.*****SUMMARY:**

This bill requires the public health commissioner to adopt regulations that require health care facilities to meet or exceed certain federal technical standards for accessibility of medical diagnostic equipment purchased on or after January 1, 2017. Specifically, facilities must comply with the technical standards developed by the federal Architectural and Transportation Barriers Compliance Board in accordance with the federal Patient Protection and Affordable Care Act.

The commissioner must, by October 1, 2017, notify each licensed physician of these technical standards and provide them with best practices for providing health care safely to people with accessibility needs.

Under the bill, a “health care facility” includes a hospital, outpatient clinic, and long-term care or hospice facility.

“Medical diagnostic equipment” includes an examination table or chair; weigh scale; mammography equipment; and x-ray, imaging, and other radiological diagnostic equipment.

EFFECTIVE DATE: Upon passage

BACKGROUND***Architectural and Transportation Barriers Compliance Board***

The board is an independent federal agency established to provide information, technical assistance, and training on accessibility design

for people with disabilities. Among other things, it provides design criteria for transit vehicles, telecommunications equipment, and electronic information technology.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 17 Nay 11 (03/21/2016)