I am Joseph Connolly, Regional Vice President from Trinity Health-New England and I am here to testify against a number of bills on today’s Public Health agenda.

First, by way of background, Trinity Health-New England (TH-NE) is a regional health ministry which includes Saint Francis Hospital and Medical Center, Inc. and Mount Sinai Rehabilitation Hospital, Inc., in Hartford, Saint Mary’s Hospital, Inc. in Waterbury, Johnson Memorial Hospital, Inc., in Stafford Springs and The Mercy Hospital in Springfield, Massachusetts. In addition, our ministry includes physician practices, a behavioral health hospital in Massachusetts, home health and various post-acute care services. We are more than 13,000 health care providers committed to providing compassionate care and improving the health of our community. We are also part of Trinity Health, a nationwide ministry with more than 90 hospitals, making us one of the largest health care ministries in the United States.

The first bills that we are in opposition to deal with the Certificate of Need process. This past year, Lieutenant Governor Nancy Wyman and OPM Undersecretary Anne Foley co-chaired a Task Force on Certificate of Need which went through an exhaustive process in reviewing the CON process. The bills here today, HB 6035 An Act Concerning the Requirements for CON and SB 248 An Act Requiring a CON for the Reductions of Services at a Hospital certainly impede a hospital’s prerogative to reduce a service without going through a lengthy and costly CON process. As you
know, hospitals are complex businesses and the demand for services can fluctuate but a hospital should be able to reduce these services without regulatory oversight. For example, if we experience a reduction in demand for a particular service we should be able to reduce the hours that service is offered and redeploy the resources just like any other business. Why should hospitals be singled out and required to go the state to file a CON.

In addition, **SB 41, An Act Protecting Patients from Unreasonable Medical Bills** is also of concern. Two years ago the Legislature addressed facility fees and the Attorney General has issued very detailed regulations and guidelines to be used by hospitals which we have all embraced. This concept ignores all that has happened in the past and does not address all the work that has been done to bring more transparency to hospital pricing.

More importantly and even more concerning is the fact that all of these bills are proposed bills only – with a title, a one line explanation and a statement of purpose – all of which give no real indication as to the intent of the legislation.

It is unfortunate that many of these concepts have not yet been fleshed out to provide better insight as to the Legislature’s true intent.

Having said that and based on past experiences and seeing these concepts themselves, we are still opposed to all of these bills.

Thank you for your consideration of our position.