

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: HB-5290

Title: AN ACT CONCERNING THE OFFICE OF HEALTH STRATEGY.

Vote Date: 3/23/2018

Vote Action: Joint Favorable Substitute

PH Date: 3/16/2018

File No.:

***Disclaimer:** The following JOINT FAVORABLE Report is prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose.*

SPONSORS OF BILL:

Public Health Committee

REASONS FOR BILL:

HB-5290 makes various changes to effectuate the establishment of the Office of Health Strategy (OHS) within the Department of Public Health (DPH) for administrative purposes. The bill also transfers the Office of Health Care Access and the Certificate of Need Program (CON) from DPH to OHS and renames it the Health Systems Planning Unit.

Under the bill, DPH retains decision making authority over pending CON applications that are completed before the bill takes effect. Any further action required after DPH issues its final decision on these applications will be decided by OHS.

RESPONSE FROM ADMINISTRATION/AGENCY:

Nancy Wyman, State of Connecticut, Lieutenant Governor:

Lieutenant Governor Wyman strongly supports HB-5290. Connecticut is a national leader in providing access to healthcare and in order to maintain that role, it must also maintain efforts to bring down its costs. The Office of Health Strategy was created by the legislature during the 2017 legislative session, and HB-5290 allows for the full completion of the Office by making statutory changes. OHS will set health policy that provides the best value of healthcare services for providers, patients, insurers, and pharmaceutical industry.

Martin Looney, Connecticut State Senator, District 11:

Senator Looney supports the bill and thanks the Public Health Committee for raising it. HB-5290 makes technical statute changes which allow for the Office of Health Strategy to become fully operational. OHS includes the Office of Health Care Access, the Health

Information Technology Officer, and the Payer Claims Database. This will allow Connecticut to have a comprehensive healthcare vision.

Victoria Veltri, Executive Director, Connecticut Office of Health Strategy:

The Office of Health Strategy was created by Public Act 17-2. OHS will align Connecticut's major health care planning into one office. This will prevent duplication of resources and will improve access to health care services as well as reducing costs. Ms. Veltri, in her capacity as Executive Director of OHS, requests two changes to the language: ***Section 62 of the bill should be effective July 1, 2018 rather than upon passage of the bill.*** This will ensure a smooth transition of the Healthcare Cabinet from Lieutenant Governor Wyman's office and the Office of the Healthcare Advocate to OHS. Line 302 of the bill should say ***"Information collected, stored and published by the Office of Health Strategy [exchange] pursuant to this section is subject to the federal Health Insurance Portability and Accountability Act of 1996, P.L. 104-191, as amended 304 from time to time."*** OHS includes the Health Data and Analysis team, Health Innovation and Strategy, and Health Systems Planning. It develops health policy that improves health outcomes and limits or reduces health costs. The collaboration of state agencies and the private sector will allow for the improvement of access to quality healthcare.

NATURE AND SOURCES OF SUPPORT:

Connecticut Hospital Association:

The Connecticut Hospital Association (CHA) supports the bill and looks forward to working with the Office of Health Strategy. Currently, Connecticut hospitals pay an assessment to fund core operations of the Office of Health Care Access. Under this bill, OHCA will become part of the Health Systems Planning Unit. CHA requests that the legislature continue to monitor this process to ensure that other functions of OHS are not moved into the Health Systems Planning Unit in a way that could unfairly impact assessments to Hospitals.

Universal Health Care Foundation of Connecticut:

Universal Health Care Foundation of Connecticut supports and applauds HB-5290. The foundation has a vision to provide universal, continuous, affordable, sustainable, and healthy outcomes for all individuals. The creation of OHS is a step towards achieving that vision. Connecticut has a complex health care system comprised of state agencies and the private sector. OHS will bring together and align their resources. The mission of OHS *"to implement comprehensive, data driven strategies that promote equal access to high quality health care, control costs and ensure better health for the people of Connecticut"* will move the state forward.

Connecticut Voices for Children:

Connecticut Voices for Children supports HB-5290 as it will be able to track racial disparities in healthcare and evaluate interventions intended to impact them. Connecticut Voices has championed the need to coordinate the efforts of the All Payer Claims Database, the State Innovation Model data dashboard, and other data portals. The Office of Health Strategy is well positioned to advance these efforts and improve healthcare across Connecticut.

Susan Kelley, Director, Alliance for Children’s Mental Health:

The Alliance for Children’s Mental Health (ACMH) enthusiastically supports the bill. OHS will create the critically needed central health database which will bring transparency and improvements in health care, as well as reduce disparities among patient groups. While there have been multiple efforts within child serving agencies such as Beacon Health Options, the Administrative Service Organization, the Behavioral Health Partnership, and other state agencies, none have been part of a comprehensive picture that would assist the state in developing policy to improve healthcare for all. The collaboration of OHS with agencies and the private sector across the state will solidify these efforts.

Dennis McConville, Eastern Connecticut Health Network:

Eastern Connecticut Health Network (ECHN) applauds the Public Health Committee for establishing OHS to address health care challenges facing Connecticut. Community hospitals serve their towns at lower costs than larger hospitals, and provide lifesaving health care to local communities, yet they have had to seek mergers or acquisitions in order to survive. ECHN asks the committee to consider the findings of the Certificate of Need Taskforce that focused on promoting an open and competitive healthcare market.

The original draft of SB-795, An Act Establishing the Office of Health Strategy And Improving the Certificate of Need Program (2017), which was intended to address the taskforce findings, removed the requirements of Certificate of need approval for the establishment of cardiac services, including cardiac catheterization and interventional cardiology. This proposal was removed because hospitals were concerned about the safety of that approach as the eliminating of CON for this service would result in free standing cardiac catheterization laboratories. ECHN agrees that this service requires hospital care and studies have proven that cardiac catheterization services are safely performed in community hospitals without on-site cardiac surgery services. They can also offer more timely intervention for local residents, and at a lower cost. It is in the state’s and patient’s best interest to ensure that patients have choices for providers and access to cost effective hospital care. *ECHN has provided the Public Health Committee with specific language for consideration. Please see testimony provided.*

Monte Wagner, DNP, MPH, APRN-BC, Co-chair of Health Policy Committee, Connecticut Advanced Practice Registered Nurse:

The Connecticut Advanced Practice Registered Nurses (APRNs) support the bill. They support the inclusion of various clinical stakeholders, and offer their assistance to identify a qualified APRN to participate in the Health Care Cabinet.

NATURE AND SOURCES OF OPPOSITION:

Susan Israel, Medical Doctor:

Ms. Israel does not support HB-5290. She expresses concerns that Connecticut citizens will have their medical records seen by people other than their providers and without their consent. HB 5290 and SB 16 further increases the amount of health data that is taken and

disclosed by the state and will allow for the release of such information to researchers, state agencies, federal agencies, the attorney general, the comptroller, and other states as well. Patients believe their life experiences and intimate medical information is private and confidential. With this legislation, Connecticut continues to override patient privacy rights in order to get data to determine the health care policies. HIPPA largely provides for confidentiality, not privacy. Among Ms. Israel's concerns are whether patients will be able to opt out of the inclusion of their medical records, or parts of it, in a computer system or whether they will be forced to enter an electronic exchange system and with it their privacy rights.

Reported by: Valentina Mehmeti

Date: 4/5/2018