

# Public Health Committee JOINT FAVORABLE REPORT

**Bill No.:** HB-6835

AN ACT CONCERNING VARIOUS REVISIONS TO THE PUBLIC HEALTH

**Title:** STATUTES.

**Vote Date:** 3/27/2023

**Vote Action:** Joint Favorable

**PH Date:** 3/13/2023

**File No.:** 541

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## **SPONSORS OF BILL:**

Public Health Committee

## **REASONS FOR BILL:**

This bill contains various revisions to the public health statutes. Among them it provides for the following:

- Requires that any person employed by an outpatient surgical facility or hospital to provide surgical technology services has completed a nationally accredited surgical technology program and holds a current surgical technologist certification.
- Increases from 6 to 18, the number of continuing education units a licensed massage therapist may complete via the internet or distance learning.
- Allows a psychologist, prior to their renewal date, to submit to the Department of Public Health (DPH) a retirement application along with a one-time \$50 fee. DPH must then record the status of the psychologist as retired from practice in good standing.
- Allows tribal lands to issue birth and death certificates and makes the necessary related technical and conforming changes.
- Makes various technical changes to the statutes outlined in sections 30-39 of the bill.

## **RESPONSE FROM ADMINISTRATION/AGENCY:**

### **Manisha Juthani, MD, Commissioner, Department of Public Health (DPH)**

DPH is concerned with Section 3 allowing licensed psychologists to retire their license in good standing with a one-time \$50 fee. DPH does not believe this is necessary and could cause public confusion. The current language for a retired or lapsed license that was in good standing is "inactive, lapsed due to non-renewal". The language in Section 3 does not describe how a psychologist can reenter the professional space, nor does the language

address how DPH would handle a request from a psychologist with prior disciplinary action.

The agency also seeks clarification on Sections 4 through 29 regarding the vital records registration system. DPH questions the goal of the revisions as it is unclear if this bill will add jurisdictions to Connecticut's current vital records or create a separate system for births and deaths on tribal lands. These changes could also have fiscal impacts not included in the Governor's proposed budget.

Additionally, the language concerning "homeless young adults" has been deleted from the statutory text but remains as a definition, which the DPH believes is necessary to distinguish from "homeless youths."

## **NATURE AND SOURCES OF SUPPORT:**

### **Connecticut Hospital Association (CHA)**

Section 1 of this bill is to clarify the role of certified surgical technologists. CHA worked with the Association of Surgical Technologists (AST) to reach an agreement on the language that clarifies their role and credentials while still allowing appropriately experienced and trained individuals to perform similar jobs. CHA urged the adoption of revised language that reflects the agreed-to language and includes changes necessary to avoid blocking various appropriately experienced and trained individuals from working in this area.

### **Connecticut Association of Physician Assistants (ConnAPA)**

ConnAPA offered suggestions for language changes. Specifically, they want physician assistants (PA's) to be included alongside physicians and advanced practice registered nurses in obtaining social security numbers for death certificate processing. Additionally, ConnAPA suggests amending Section 20-21 of the statutes, which currently speaks to physicians "supervising" PA's, to reflect the collaborative nature of PA practice within healthcare teams. The current language has created barriers for PA's seeking employment, and changes what would help to ensure patients have unencumbered access to care. The pandemic has highlighted the need for such changes, as PA's faced difficulties pivoting to health care for patients, and there were even questions as to whether PA's needed delegation agreements to administer vaccines. ConnAPA has suggested language changes to alleviate administrative burdens and create a more friendly work environment for Pas. This in turn would help to address the shortage of healthcare providers.

### **Rebecca Torns-Barker, Chairperson, American Massage Therapy Association – Connecticut Chapter (AMTA-CT)**

AMTA-CT supports Section 2 of this bill which increases the number of units of continuing education that licensed massage therapists can earn online or via distance learning from 6 to 18. This change would benefit working massage therapists, who struggle to find time for in-person education and often incur travel costs to attend classes

### **Vanessa Hannermann, Director, Association of Surgical Technologists (AST)**

AST supports Section 1 of this bill which sets minimum education and certification standards for newly practicing surgical technologists. The organization also proposes an amendment that provides a grandfather option to ensure that currently practicing surgical technologists are not left behind. The amendment also clarifies that the legislation does not affect anyone's

scope of practice and does not place administrative functions on the Department of Public Health (DPH). The proposed amendment lists five options for healthcare facilities to employ or retain surgical technologists, including completion of a nationally accredited surgical technology program or military training. Health care facilities must provide documentation to the DPH to demonstrate compliance with these requirements.

**Christine Hooper, Senior Director, Government & Industry Relations, American Massage Therapy Association (AMTA)**

AMTA, the largest non-profit professional association serving massage therapist, massage students, and massage schools, supports Section 2 of this bill to increase the continuing education requirements obtained virtually from six to eighteen hours.

**Matthew Pearson, Tribal Council Secretary, Mashantucket Pequot Tribal Nation**

The Mashantucket Pequot Tribal Nation supports Sections 4-29 of this bill authorizing birth and death certificates to be issued by the Tribal Clerk at Mashantucket. Pearson emphasized the importance of recognizing Mashantucket as a sovereign nation and the significance of having proper documentation when births and deaths occur on tribal land. He also provided a brief history of the Mashantucket Tribe and its fight to maintain its land and identity. Pearson requested support for this bill to address the harm caused by current policies that relegate the Mashantucket Tribe to another part of a Connecticut municipality.

**Marcy Russo, Legislative Committee Chair, Connecticut Psychological Association (CPA)**

CPA supports Section 3 of this bill which creates a retirement status in the licensing options for retired and no longer practicing psychologists. Currently, retired psychologists can only neglect renewing their license for another year, which lists them as "inactive due to nonpayment" in the licensed psychologist database. This is cost-prohibitive for many retired psychologists and does not accurately reflect their career decision. Granting retirement status would communicate to the public that the psychologist ended their practice in good standing, according to the DPH, and would be a more accurate representation of their career decision.

**Other Sources of Support**

Theresa Crisci  
Sabrina Gonzalez  
Dawn Porter  
Shawn Sheridan  
Carol Wright

**NATURE AND SOURCES OF OPPOSITION:**

**Tarik Kardestuncer, MD, President, Connecticut Orthopedic Society (COS)**

COS opposes Section 1 of this bill as it does not consider the current shortage of healthcare workers, including surgical technologists. The orthopedic community believes that it is critical to have the flexibility to use experienced and qualified personnel in this role, regardless of certification. They also point out that it takes 12 to 18 months to complete an accredited surgical technologist certification program, and the effective date of implementation will not make it feasible to meet the requirements based on the date. COS suggests a grandfathering provision to avoid significant gaps in healthcare workplaces.

**Reported by: Kate Hamilton**

**Date: April 14, 2023**