Senate

General Assembly

File No. 713

January Session, 2025

Substitute Senate Bill No. 1538

Senate, April 16, 2025

The Committee on Public Health reported through SEN. ANWAR of the 3rd Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING EMERGENCY DEPARTMENT BOARDING AND CROWDING.

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

Section 1. (*Effective from passage*) The Probate Court Administrator and the Commissioner of Social Services shall evaluate the feasibility of establishing an expedited process for the appointment of a conservator for patients of hospital emergency departments who lack the capacity to consent to receive health care services from the hospital to ensure such patients receive such services in a timely fashion and help alleviate emergency department boarding and crowding. Not later than January 1, 2026, said administrator and commissioner shall jointly report, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to public health regarding such evaluation and any recommendations for legislation necessary to establish an expedited conservator process for emergency department patients. As used in this section, "emergency department boarding"

means holding patients who have been admitted to the hospital after presenting to the emergency department in the emergency department while awaiting an inpatient bed.

Sec. 2. Section 19a-490ii of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(a) Not later than January 1, 2025, and annually thereafter until January 1, 2029, each hospital in the state with an emergency department shall, and each hospital operated exclusively by the state may, directly or in consultation with a hospital association in the state, analyze the following data from the previous calendar year concerning its emergency department: (1) The number of patients who received treatment in the emergency department; (2) the number of emergency department patients who were admitted to the hospital; (3) for patients admitted to the hospital after presenting to the emergency department, the average length of time from the patient's first presentation to the emergency department until the patient's admission to the hospital; and (4) the percentage of patients who were admitted to the hospital after presenting to the emergency department but were transferred to an available bed located in a physical location other than the emergency department more than four hours after an admitting order for the patient was completed. Each such hospital shall utilize such analysis with the goals of (A) developing policies or procedures to reduce wait times for admission to the hospital after a patient presents to the emergency department, (B) informing potential methods to improve admission efficiencies, and (C) examining root causes for delays in admission times.

(b) Not later than March 1, 2025, and annually thereafter until March 1, 2029, each hospital that conducts an analysis pursuant to subsection (a) of this section shall submit a report, in accordance with the provisions of section 11-4a, to the joint standing committee of the General Assembly having cognizance of matters relating to public health and, not later than March 1, 2026, and annually thereafter until March 1, 2029, shall also submit such report to the Commissioners of

Public Health and Health Strategy, regarding its findings and any recommendations for achieving the goals described in subparagraphs (A) to (C), inclusive, of subdivision (4) of subsection (a) of this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	*from passage*	New section
Sec. 2	*from passage*	19a-490ii

Statement of Legislative Commissioners:
In Section 2(b), "shall also submit such report" was added 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: None

Municipal Impact: None

Explanation

The bill requires the Probate Court and the Commissioner of Social Services to evaluate the feasibility of establishing an expedited process for appointing a conservator in certain circumstances, which is not anticipated to result in a fiscal impact to the state as both parties have the expertise and capacity necessary to meet the requirements of the bill.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis

sSB 1538

AN ACT CONCERNING EMERGENCY DEPARTMENT BOARDING AND CROWDING.

SUMMARY

Existing law generally requires hospitals to annually analyze certain emergency department data toward the goals of (1) developing ways to reduce admission wait times, (2) informing potential ways to improve admission efficiencies, and (3) examining root causes for admission delays. By each March 1 (until 2029) they must annually report to the Public Health Committee on their findings and recommendations. This bill requires them to also submit these reports to the public health and health strategy commissioners.

The bill also requires the probate court administrator and social services commissioner to evaluate the feasibility of establishing an expedited process to appoint a conservator for hospital emergency department patients who lack the capacity to consent to services. This process's purpose is to ensure that these patients receive timely services and to help reduce emergency department crowding and boarding (that is, keeping patients in the department while they await inpatient beds). By January 1, 2026, they must jointly report on the evaluation and any legislative recommendations to the Public Health Committee.

EFFECTIVE DATE: Upon passage

BACKGROUND

Temporary Conservator Appointments

By law, the probate court may appoint a temporary conservator if, upon the petition of certain parties (e.g., a spouse or other relative), it finds that (1) the respondent cannot manage his or her affairs or care for himself or herself, (2) immediate and irreparable harm to the person's

mental or physical health or financial or legal affairs will result without the appointment, and (3) the appointment is the least restrictive available way to prevent this harm. A physician generally must have examined the person and made certain findings.

Under some circumstances, if the court determines that delay would cause immediate and irreparable harm, it can order the appointment ex parte and without prior notice to the respondent. In these cases, it must hold the required hearing within three days after the order (excluding weekends and holidays) (CGS § 45a-654).

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute
Yea 32 Nay 0 (03/28/2025)