CONNECTICUT HOSPITAL ASSOCIATION

TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
JUDICIARY COMMITTEE
Wednesday, March 20, 2024

SB 4, An Act Concerning Victims Of Domestic Violence, The Unsolicited Transmission Of Intimate Images By Means Of An Electronic Communication Device And The Impermissible Use Of Nondisclosure Agreements In The Workplace

SB 361, An Act Concerning The Impermissible Use Of Nondisclosure Agreements In The Workplace

SB 425, An Act Prohibiting Discrimination By Health Care Providers In The Provision Of Health Care Services In The State

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 4, An Act Concerning Victims Of Domestic Violence, The Unsolicited Transmission Of Intimate Images By Means Of An Electronic Communication Device And The Impermissible Use Of Nondisclosure Agreements In The Workplace**, **SB 361, An Act Concerning The Impermissible Use Of Nondisclosure Agreements In The Workplace**, **and SB 425, An Act Prohibiting Discrimination By Health Care Providers In The Provision Of Health Care Services In The State**. CHA opposes certain provisions of these bills.

Prior to addressing the bills, it is important to say directly that no one should be subject to illegal workplace harassment or illegal conditions. CHA, however, has concerns about the impact of the statutory language and impact of these bills.

CHA opposes Section 3 of SB 4 and SB 361 because those provisions go well beyond the stated purposes of the bills, creating the potential for negative and unintended consequences. At first glance, these bills appear to be similar to laws proposed or enacted in other states, such as New York, which took steps after the #MeToo movement to ensure that people who had been sexually harassed at work were not forced to remain silent or continue to experience illegal treatment due to gag clauses in settlement agreements or in workplace policies. But SB 4 and SB 361 are decidedly *not* like those other states' bills.

These bills do not protect employees from illegal activities by employers. Instead, these bills create unachievable and unwise protection for employees who disparage and defame their employer when the employer has done nothing wrong—let alone something illegal—simply because an employee holds a strong belief that an activity was illegal or against public policy. The bill does not focus on the actual conduct of the employer but on the perception of the employee, which elevates legal behavior into illegal behavior based on perception, including misperceptions.

To illustrate, consider the following example. A worker has a job at a restaurant. The employee heard from their cousin, a person they trust but incorrectly believe previously worked at the same restaurant, that the restaurant uses rotten food for a certain dish in violation of public health requirements. The employee decides to warn restaurant customers that the food in that particular dish is spoiled and they should order something else. Customers complain to the manager. The manager talks to the employee and determines (accurately) that the story is entirely untrue. The manager asks the employee to stop disparaging the restaurant. The employee refuses to stop and continues to repeat untrue and damaging assertions about the restaurant. Under SB 4 and SB 361, the employee cannot be fired, cannot be asked to stop disparaging the restaurant, and can seek monetary damages against the restaurant, even though the restaurant did nothing wrong and even if it is later revealed that the cousin was lying, confused, or mistaken. This result is problematic.

With respect to SB 425, CHA whole-heartedly supports protecting people from discrimination when receiving healthcare services. It is essential that the legislature consider that the healthcare landscape is unique with respect to a variety of issues, including public health, medical futility, and expert professional judgment. The bill should be revised to clarify that it is not the intention of the law, nor the policy of the state of Connecticut, to override sound medical practices or necessary public health planning. Specifically, language should be added as follows:

> *Nothing in this act shall be interpreted to require delivery of futile care, affect the professional standard of care, or interfere with public health planning.*

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.