CONNECTICUT HOSPITAL ASSOCIATION

TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
PUBLIC HEALTH COMMITTEE
Wednesday, March 13, 2024

SB 368, An Act Concerning Source Plasma Donation Centers

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 368, An Act Concerning Source Plasma Donation Centers**. CHA supports the bill with recommended language changes.

Connecticut hospitals are critical to their communities. They are confronting the challenges posed by a post-pandemic healthcare system with an exemplary healthcare workforce that continues to provide outstanding care. But challenges remain. Hospitals are treating sicker patients, it continues to be challenging to hire and retain staff, and the financial headwinds are grave. Through it all, hospitals are steadfast, providing high-quality 24-hour care for everyone who walks through their doors, focusing on making Connecticut's healthcare system more equitable, and driving world-class innovation right here in Connecticut.

CHA supports the changes to law set forth in SB 368. These changes are necessary to correct shortcomings relating to oversight of blood and plasma collection services in **PA 23-97, An Act Concerning Source Plasma Donation Centers**. In addition to those changes set forth in SB 368, we urge the Committee to make the following change to Section 19a-565(d) – as that law is set forth in the 2024 supplement to the General Statutes.

PA 23-97 was meant to provide flexibility to blood collection and plasma source collection services that otherwise did not need a laboratory license. Unfortunately, the language that passed in PA 23-97 (then codified at 19a-565, in the supplement) accidentally punishes providers that were appropriately relying on their lab or hospital license to provide these vital blood-related services. The exceptions provided to hospitals in PA 23-97 were incorrect. The location of the service is irrelevant. The question is whether the services are provided by a hospital.

To correct this problem and ensure patient access and safety are protected, CHA urges the Committee to make the following statutory correction:

> *(d) Each initial or renewal application for licensure of a clinical laboratory, blood collection facility or source plasma donation center shall be made in a form and manner prescribed by the commissioner and shall be executed by the owner or owners or by a*

responsible officer of the firm or corporation owning such laboratory, facility or donation center and be accompanied by the fee required pursuant to the provisions of subsection (f) of this section. A mobile or temporary blood collection facility shall not be required to obtain a license if such person or business entity operating such facility is licensed as a blood collection facility. A licensed source plasma donation center shall not be required to obtain a clinical laboratory license to perform any pre-donation screening test required by Title 21, Chapter I of the Code of Federal Regulations. A hospital licensed under this chapter shall not be required to obtain a license as a blood collection facility for blood component collection ***activities performed by the hospital*** **[*that take place on the hospital campus, as defined in section 19a-508c]***.

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