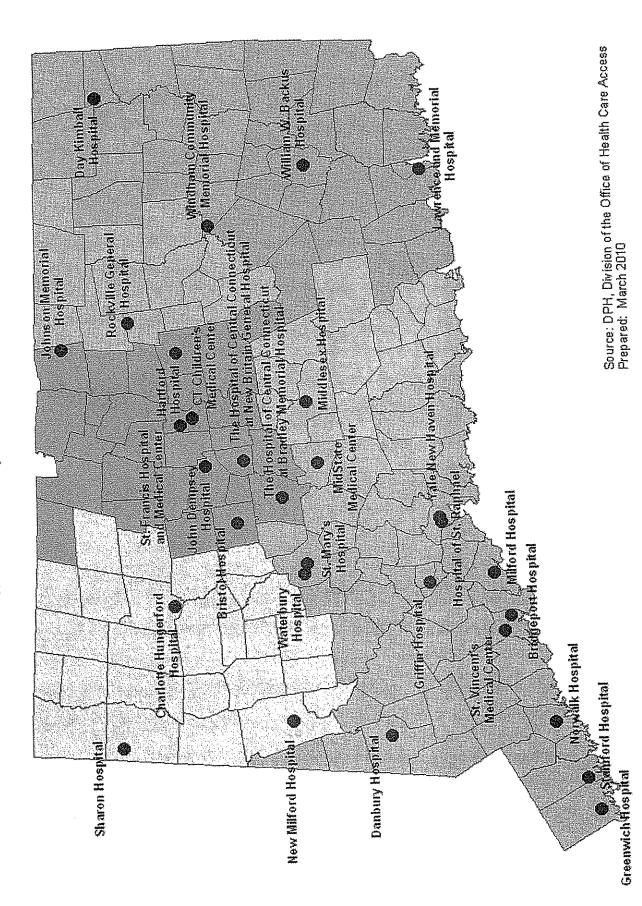
### DRAFT – For discussion purposes only

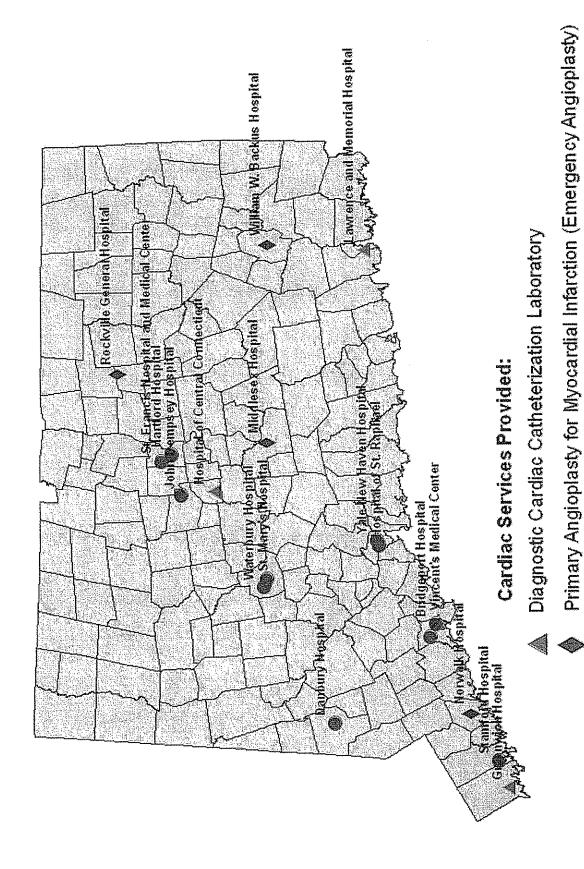
## Suggested Components of Chapter Four - Acute Care Services

- Definitions -- acute care, hospital, ambulatory surgery, OP surgical facility, etc.
- Maps -- acute care hospitals, satellite EDs, cardiac services
- **Descriptions of services** -- emergency services, cancer treatment services, cardiac services, services for infants and children, maternity services
- **Data on utilization** -- metrics -- patient days; licensed, available and staffed beds; occupancy rates; utilization metrics by hospital size and location, staffed beds by service; rate per 1,000; discharge trends
- Comparisons -- to nation/region
- Bed need methodology -- once discussed
- Possibly -- table similar to AHA Annual Survey/Vermont Health Resources Allocation Plan?
- Other suggestions/recommendations from Advisory Body?

# Acute Care Hospitals in Connecticut



# Cardiac Services in Connecticut January 2011



Source: State of CT, DPH Certificate of Need Database

Full Service (Emergency and Elective Angioplasty and Open Heart Surgery)

2009 Health Resource Allocation Plan Chapter Three – Hospital Services

Table 3.3: Hospital Services 10

•	Statewide	ride	_			_	Regional	nai				<u> </u>		J	Community-Wide	unit	y-Wic	9				2	Major M	Medical		Equipment		
Hospita	Cardiology Services - Open Heart Surgery	finandsatt smusit i lava. Jinsiqansit negiC	Renal Dialysis (Hospital based)*	Sardiac intensive care	-IN-AIDS Services	Veurological Services Cardiology Services - Cardiac Catheterization	Services yelloon	Sleep Center	npatient Psychiatric Services Ded. Unit* Outpatient Mental Health/Substance Abuse*	Suparient Mental Hospitalization Program	npatient Rehabilitation Dedicated Unit**	Jrgent Care Center	-lealth Screenings Emergency Services	Secritor Services	Outpatient Surgery	General Medical Surgical Care	Pediatric Medical Surgical Care	Laboratory Services* Obstetrics/Birthing	Physical rehab outpatient services	Intensive Care	CT Scanner*	Ultrasound	Magnetic Resonance imagine (MRI)* Extracorporeal Shock Wave Lithotripter (ESWL)	Single Photon Emission Computerized	Tomography (SPECT) Positron Emission Tomography (PET)*	Angiographic (Radiographic/Fluoroscopic System)*	Linear Accelerator*	Robotic Surgery System (da Vinci Robot)*
Brattleboro Memoriai Hospital		1	ــــــالــــــــــــــــــــــــــــــ	JI	<u> </u>	JL	li .	K	1	<u> </u>	Л	<u> </u>	ļ	L	•	ļ				+	•		L	Í				
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Fletcher Allen Health Care	* *	+	٠	٠	*		*	•	•	٠	٠	•	•	٠	٠	•	•	٠	٠	٠	٠	•	•	٠	٠	٠	٠	۰
Gifford Medical Center		ļ			*		٠		_				*	٠	٠	٠	*	٠	٠	٠	+	+						Т
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Springfield Hospital					+				-	•		•	•	_	•	•	<b>.</b>	•	•	•	•	*			-			
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<sup>10</sup> Most of this information was self-reported by hospitals in the 2006 American Hospital Association (AHA) Annual Survey. Services with an asterisk are 2009 data and were directly reported to BISHCA by the hospitals. Department of Banking, Insurance, Securities and Health Care Administration 89 Main Street, Montpelier, Vermont 05620-3601
Tel: (802) 828-2900 x: (802) 828-2949



# STATE OF CONNECTICUT

# DEPARTMENT OF PUBLIC HEALTH Office of Health Care Access

March 8, 2011

To: Outpatient Surgical Facility Administrator or Head of Outpatient Surgery Department

### Dear Sir/Madam:

Pursuant to General Statutes §19a-634(c), the Office of Health Care Access ("OHCA") division of Department of Public Health ("DPH") is establishing an inventory of health care facilities and services in the state of Connecticut for the purposes of preparing and releasing a State-Wide Health Care Facilities and Services Plan in July of 2012 as mandated by General Statutes § 19a-634(b). Accordingly, OHCA has developed an Inventory Questionnaire which seeks pertinent information regarding outpatient surgery services in the state provided by hospitals and licensed outpatient surgical facilities. OHCA requests that you or another member of the outpatient surgical facility or outpatient surgery department team, complete and submit the outpatient surgery questionnaire to OHCA.

The questionnaire document can be accessed by going onto the OHCA website at <a href="https://www.ct.gov/ohca">www.ct.gov/ohca</a> and clicking on the link labeled "2010 Outpatient Surgery Questionnaire" on our main webpage. The link will be available at around noon on Wednesday, March 9th. It is requested that the providers use the Survey Monkey instrument for completion of this questionnaire. However, if the provider cannot access or complete the Survey Monkey process, please email Brian Carney at <a href="mailto:brian.carney@ct.gov">brian.carney@ct.gov</a> or Karen Roberts at <a href="mailto:karen.roberts@ct.gov">karen.roberts@ct.gov</a> and a Microsoft Word version document will be emailed to you to fill out and submit manually.

Please note the following important information related to the Outpatient Surgery questionnaire:

- The questionnaire is the same, whether the provider is an acute care hospital outpatient department, an acute care hospital surgery center satellite or a licensed Outpatient Surgical Facility provider. There are not different questionnaires for different provider types.
- The questionnaire is location specific. For example, if a hospital has outpatient surgery at its main campus and at an off-campus location (whether as a department of the hospital or a separate satellite entity), separate questionnaire documents will need to be completed for each location.

- The information regarding utilization and number of operating rooms in the questionnaire is based on the calendar year (CY) ending December 31, 2010.
- Please note that while it is not OHCA's intent to publish the Section 16 utilization data on a facility identifiable basis, OHCA may publish the facility name and address, provider type, number of ORs and hours of operation information on a facility identifiable basis. Please be further informed however, that the information filed in this questionnaire, including the Section 16 utilization data, will be subject to release when requested through the Freedom of Information Act, Chapter 14 of the Connecticut General Statutes. Finally, note that there is no patient specific or financial data being requested through this questionnaire.

OHCA would like to complete the collection of this information by *March 31, 2011* and asks that you complete the questionnaire via the Survey Monkey link described above or send in the paper copy (electronically or by fax/mail) by that date. OHCA's fax number is 860-418-7053. If a paper copy is being filled out and mailed, the address for mailing in paper copy is as follows:

Office of Health Care Access
Department of Public Health
410 Capitol Avenue
MS#13HCA
Hartford, CT 06134-0308
- Attn: Brian Carney

Questions regarding the above can be emailed to Brian Carney at <a href="mailto:brian.carney@ct.gov">brian.carney@ct.gov</a> or Karen Roberts at <a href="mailto:karen.roberts@ct.gov">karen.roberts@ct.gov</a>.

On behalf of the Department of Public Health, I would like to thank you for your participation in this important first step toward gathering information necessary to maintain a health care facility/service inventory for the state of Connecticut and to complete Connecticut's first Statewide Health Care Facilities and Services Plan.

Sincerely,

Kimberly Martone Director of Operations

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Office of Health Care Access

KM:kr



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In an effort to obtain recommendations from experts in the health care industry with respect to the Statewide Health Care Facilities and Services Plan, DPH has convened an Advisory Committee pursuant to General Statutes § 19a-634 (b). The comments, ideas and suggestions of the members of the Advisory Committee have been integral in the development of the questionnaire. Lisa Winkler, Connecticut Ambulatory Association of Surgical Centers ("CAASC"), and James Iacobellis, Vice President of Government Relations for the Connecticut Hospital Association ("CHA"), are members of the advisory committee and have graciously agreed to electronically distribute this letter to the members of CAASC and CHA.

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# Office of Health Care Access Outpatient Surgery Questionnaire

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Office of Health Care Access
Department of Public Health
410 Capitol Avenue
MS#13HCA
Hartford, CT\_06134-0308
Attn: Brian Carney

Questions regarding the above can either be filtered through Ms. Winkler or Mr. Iacobellis or emailed directly to Brian Carney at <a href="mailed-directly-to-brian-carney@ct.gov">brian.carney@ct.gov</a> or Karen Roberts at <a href="mailed-karen.roberts@ct.gov">karen.roberts@ct.gov</a>.

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Kimberly Martone

Director of Operations

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Office of Health Care Access

KM:kr