

General Assembly

Raised Bill No. 1507

January Session, 2025

LCO No. 6266



Referred to Committee on PUBLIC HEALTH

Introduced by: (PH)

AN ACT PROHIBITING PRIVATE EQUITY OWNERSHIP AND CONTROL OF CERTAIN HEALTH CARE INSTITUTIONS AND THE CONTROLLING OF OR INTERFERENCE WITH THE PROFESSIONAL JUDGMENT AND CLINICAL DECISIONS OF CERTAIN HEALTH CARE PROVIDERS AND REQUIRING AN EVALUATION OF THE APPOINTMENT OF A RECEIVER TO MANAGER HOSPITALS IN FINANCIAL DISTRESS.

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

- 1 Section 1. (NEW) (*Effective July 1, 2025*) (a) As used in this section:
- 2 (1) "Group practice" means two or more physicians, legally organized
- 3 in a partnership, professional corporation, limited liability company
- 4 formed to render professional services, medical foundation, not-for-
- 5 profit corporation, faculty practice plan or other similar entity (A) in
- 6 which each physician who is a member of the group provides
- 7 substantially the full range of services that the physician routinely
- 8 provides, including, but not limited to, medical care, consultation,
- 9 diagnosis or treatment, through the joint use of shared office space,
- 10 facilities, equipment or personnel; (B) for which substantially all of the
- 11 services of the physicians who are members of the group are provided

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- 12 through the group and are billed in the name of the group practice and 13 amounts received from such bills are treated as receipts of the group; or 14 (C) in which the overhead expenses of, and the income from, the group 15 are distributed in accordance with methods previously determined by 16 members of the group. An entity that otherwise meets the definition of 17 group practice under this section shall be considered a group practice 18 although its shareholders, partners or owners of the group practice 19 include single-physician professional corporations, limited liability 20 companies formed to render professional services or other entities in 21 which beneficial owners are individual physicians;
 - (2) "Health system" means: (A) A parent corporation of one or more hospitals and any entity affiliated with such parent corporation through ownership, governance, membership or other means; or (B) a hospital or any entity affiliated with such hospital through ownership, governance, membership or other means;

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- 27 (3) "Hospital" means a facility licensed as a hospital under chapter 28 368v of the general statutes;
 - (4) "Indirect ownership interest" means an ownership interest in an entity that has an ownership interest in a group practice, hospital or health system;
 - (5) "Operational control" means to: (A) Influence or direct the actions or policies of any part of a group practice, hospital or health system; or (B) choose, appoint or terminate a member of the board, manager, managing member, senior employee, consultant or other individual or entity that participates in the operational oversight of a group practice, hospital or health system;
 - (6) "Ownership interest" means possession of equity in capital, stock or profits of a group practice, hospital or health system, or ownership of real estate on which a group practice, hospital or health system operates;
 - (7) "Private equity company" means a publicly traded or nonpublicly

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- 42 traded entity that collects capital investments from individuals or 43 entities; and
- 44 (8) "Real estate investment trust" has the same meaning as provided 45 in 26 USC 856, as amended from time to time.
- 46 (b) On and after October 1, 2025, no private equity company or real 47 estate investment trust shall (1) acquire (A) any direct or indirect 48 ownership interest in a group practice, hospital or health system, or (B) 49 any operational or financial control over a group practice, hospital or 50 health system; or (2) increase (A) any direct or indirect ownership 51 interest that the private equity company or real estate investment trust 52 has in a group practice, hospital or health system, or (B) any operational 53 or financial control that the private equity company or real estate 54 investment trust has over a group practice, hospital or health care 55 system.
- Sec. 2. (NEW) (Effective July 1, 2025) (a) As used in this section:

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- 57 (1) "Advanced practice registered nurse" means an advanced practice 58 registered nurse licensed pursuant to chapter 378 of the general statutes;
 - (2) "Clinician with independent practice authority" means a physician, an advanced practice registered nurse or any other health care provider who has the authority to engage in the independent practice of such provider's profession pursuant to title 20 of the general statutes;
 - (3) "Health care practice" means a business, regardless of form, through which a licensed health care provider offers health care services. "Health care practice" does not include any entity that holds a license to operate a facility issued by the Department of Public Health or the Department of Mental Health and Addiction Services;
- 69 (4) "Health system" means: (A) A parent corporation of one or more 70 hospitals and any entity affiliated with such parent corporation through

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ownership, governance, membership or other means; or (B) a hospital and any entity affiliated with such hospital through ownership, governance, membership or other means;

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- (5) "Management services organization" means a business that provides management or administrative services to a health care provider or an organization of health care providers, including, but not limited to, a health care practice, for compensation; and
- 78 (6) "Physician" means a physician licensed pursuant to chapter 370 of 79 the general statutes.
 - (b) No health care facility or entity that holds a license issued by the Department of Public Health or the Department of Mental Health and Addiction Services and no management services organization shall directly or indirectly interfere with, control or otherwise direct the professional judgment or clinical decisions of a health care practice or a clinician with independent practice authority who provides health care services at or through such facility or entity or at or through a health care practice.
 - (c) Conduct prohibited under subsection (b) of this section shall include, but need not be limited to, controlling, either directly or punishment, indirectly, through discipline, threats, adverse employment actions, coercion, retaliation or excessive pressure any of the following: (1) The amount of time spent with patients or the number of patients seen in a given time period, including, but not limited to, the time permitted to triage patients in the emergency department or evaluate admitted patients; (2) the time period within which a patient must be discharged; (3) decisions involving the patient's clinical status, including, but not limited to, whether the patient should be kept in observation status, whether the patient should receive palliative care and where the patient should be placed upon discharge; (4) the diagnosis, diagnostic terminology or codes that are entered into the medical record; (5) the appropriate diagnostic test for medical

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conditions; or (6) any other conduct the Department of Public Health determines would interfere with, control or otherwise direct the professional judgment or clinical decision of a clinician with independent practice authority.

- (d) Any nondisclosure or nondisparagement agreement entered into, amended or renewed on or after July 1, 2025, regarding any provision of subdivisions (1) to (6), inclusive, of subsection (c) of this section, to which a clinician with independent practice authority is a party shall be void and unenforceable.
- (e) Any policy or contract entered into, amended or renewed on or after July 1, 2025, that has the effect of violating any provision of this section shall be void and unenforceable. If a court of competent jurisdiction finds that a policy, contract or contract provision is void and unenforceable pursuant to this subsection, the court shall award the plaintiff reasonable attorney's fees and costs.
 - (f) The Department of Public Health may adopt regulations, in accordance with the provisions of chapter 54 of the general statutes, to implement the provisions of this section.
 - Sec. 3. (*Effective from passage*) The Commissioner of Health Strategy shall evaluate whether the Attorney General should be authorized to petition the Superior Court for the appointment of a receiver to manage hospitals in financial distress or operational crisis. Not later than October 1, 2026, the commissioner shall 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.

This act shall take effect as follows and shall amend the following sections:			
Section 1	July 1, 2025	New section	
Sec. 2	July 1, 2025	New section	

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Sec. 3	from passage	New section

Statement of Purpose:

To prohibit private equity ownership and control of certain health care institutions and the controlling of or interference with the professional judgment and clinical decisions of certain health care providers.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

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