



## **Malloy in hospital debate**

**Governor says merger should provide full care for women**

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HARTFORD — Gov. Dannel P. Malloy said any new hospital in Waterbury should continue to provide a full array of women’s services, including tubal ligations and abortions.

The governor’s office offered its first public reaction to news that Texas-based LHP Hospital Group, Waterbury Hospital and Saint Mary’s Hospital are not planning to offer abortions, tubal ligations and other reproductive services at the new hospital they seek to build in the state’s fifth largest city.

“Gov. Malloy and members of this administration have been very forthright in dealing with all the stakeholders in this process, and the governor has been clear all along that he believes the issue of women’s health care rights is very, very important. He does not believe the result of this process should be one that in any way reduces the access women now have to health care services,” the governor’s office said in a statement in response to questions from the Republican-American. Malloy declined to expand on the statement when approached Thursday afternoon following a public appearance in Hartford.

It’s unclear how Malloy might hold up the merger.

Under state law, the state Office of Health Care Access must approve a certificate of need for LHP and the two hospitals to proceed with the merger and build a new hospital. Hospitals must also obtain OHCA approval to terminate any inpatient and outpatient services that hospitals provide.

Malloy appoints the head of OHCA. The office is a division of the Department of Public Health. The governor also appoints the DPH commissioner. Both appointments require the legislature’s confirmation.

State law permits OHCA to conduct hearings on any completed application for a certificate of need. The office must hold a hearing upon the petition of at least three individuals or an individual representing an entity of five or more people.

As part of the proposed joint venture between Saint Mary’s Hospital, Waterbury Hospital and LHP Hospital Group, a privately owned hospital management and development company based in Plano, Texas, the three parties agreed to adhere to Ethical and Religious Directives outlined by

the U.S. Conference of Catholic Bishops.

These directives prohibit abortions and tubal ligations, commonly referred to as a woman having her “tubes tied” so that she cannot have children. To circumvent these restrictions, Waterbury Hospital and LHP have proposed that a separate ambulatory surgery center be built to offer outpatient tubal ligations near the planned 800,000-square-foot \$400 million hospital.

### **THE CENTER WOULD BE OWNED SEPARATELY FROM**

the joint venture that includes Saint Mary’s. The center would not offer tubal ligations immediately after a baby is delivered by cesarean section, a practice done now at Waterbury Hospital, but not Saint Mary’s. There would also be no abortions or vasectomies done in the new hospital or in the separate facility.

When asked for comment on the governor’s statement Thursday, Chad Wable, President CEO of Saint Mary’s Health System issued the following statement: “The agreement among Saint Mary’s Hospital, Waterbury Hospital and LHP Hospital Group transforms health care in Greater Waterbury.

All parties have agreed to operate the new replacement hospital consistent with the Catholic Ethical and Religious Directives. We are aware that Waterbury Hospital and LHP are developing a plan to continue to provide reproductive services currently available at Waterbury Hospital. We believe our collective proposal ultimately addresses the long term sustainability and economic viability of our local health care delivery system.”

### **IT WAS ALSO DECIDED THURSDAY THAT THE BOARD**

of Aldermen in Waterbury would postpone a meeting scheduled for Monday during which the location of the proposed hospital and other details would be announced and discussed with representatives from LHP.

Malloy did not ask that an announcement be postponed, said Andrew Doba, his director of communications.

Waterbury Hospital spokesman Matthew Burgard said Thursday an announcement had been planned for Monday about the chosen site for the hospital from three possible locations, but that has been postponed due to a host of issues that are close to being resolved, but that those issues did not include women’s reproductive services.

Paul K. Pernerewski Jr., President of the city’s Board of Aldermen, said Thursday that the workshop will be rescheduled. “There are still some outstanding issues and they’re not going to be able to give us the whole picture at this time,” he said, adding that he expected the location of the proposed new hospital will be one of many things that will be discussed at the workshop when it takes place.

Pernerewski said he was not surprised by the governor’s statement about women’s services. He

said it was “consistent with what the governor’s position has been throughout the process.”

Burgard said there have been no changes to the plan for an ambulatory center, despite public outcry from women’s advocacy groups since last week’s announcement. Burgard said Darlene Stromstad, Waterbury Hospital President and CEO, met with Teresa Younger, executive director of the state’s Permanent Commission on the Status of Women, last week.

The commission has “concerns and we take them to heart, but we are committed to having a new hospital built in Waterbury and we are trying to work toward that objective,” Burgard said. Younger did not return several calls for comment Thursday.

Steve Schrag from the citizens group Waterbury Community United, a group that has raised concerns about the proposed merger, said he is not aware of diversions from the plan for the ambulatory center. “LHP refused to meet with us and they haven’t answered our questions,” Schrag said.

As for the governor’s statement, Schrag didn’t put much stock in it. “He can say that, but where is it written in the agreement with the hospitals?” Schrag asked. “I am a strong believer that contracts are signed.”

*Reporters Paul Hughes, Carrie MacMillan and Marc Silvestrini contributed to this report.*

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