

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH  
Commissioner



Ned Lamont  
Governor  
Susan Bysiewicz  
Lt. Governor

### HEALTHCARE QUALITY AND SAFETY BRANCH

### BLAST FAX 2019-16

**TO:** Private Freestanding Facilities for the Care or Treatment of Substance Abusive or Dependent Persons

**FROM:** Barbara Cass, R.N., Branch Chief *BSC*  
Healthcare Quality and Safety Branch  
410 Capitol Avenue  
Hartford, Connecticut, 06134

**DATE:** August 29, 2019

**SUBJECT:** Waivers for the Regulations of the Connecticut State Agencies, Section 19a-495-570 (m) Service Operations (5) Physical Examinations.

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The Regulations of the Connecticut State Agencies, Section 19a-495-570(m)(5) directs the following:

- (i) Each client shall receive within twenty-four (24) hours of admission a medical history and physical examination, by a physician, physician's assistant or registered nurse practitioner. Any physical examination that is performed by a physician assistant or registered nurse practitioner shall be dated and countersigned by a physician within seventy-two (72) hours signifying his or her review of and concurrence with the findings, and
- (ii) Each client shall receive within 72 hours of admission, diagnostic tests as determined by the physician, in the case of a recently hospitalized patient being admitted to the facility, a comprehensive history and physical was conducted when hospitalized.



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We are aware that in some cases this regulation has impacted the ability for individuals to receive care for their substance use disorder in a timely manner and potentially impacting access to care and/or treatment outcomes.

Please be advised that Connecticut General Statutes, **Sec. 19a-495(c) provides**, “The commissioner may waive any provisions of the regulations affecting an institution, as defined in section 19a-490, if the commissioner determines that such waiver would not endanger the health, safety or welfare of any patient or resident. The commissioner may impose conditions, upon granting the waiver, that assure the health, safety and welfare of patients or residents, and may revoke the waiver upon a finding that the health, safety or welfare of any patient or resident has been jeopardized. The commissioner shall not grant a waiver that would result in a violation of the Fire Safety Code or State Building Code. The commissioner may adopt regulations, in accordance with chapter 54, establishing procedures for an application for a waiver pursuant to this subsection.”

Attached you will find a sample waiver request and includes considerations that are reviewed in the approval process. Should you be interested in submitting a waiver, please send it to the attention of:

Alice Martinez, R.N.  
Supervising Nurse Consultant  
State of Connecticut, Department of Public Health  
Facility Licensing and Investigations Section  
410 Capitol Avenue, MS #12 FLIS  
Hartford, Connecticut 06134

Should you have any questions, please do not hesitate to contact Alice Martinez at (860) 509-7948 or email at [alice.martinez@ct.gov](mailto:alice.martinez@ct.gov).

DATE

Alice Martinez, R.N.  
Supervising Nurse Consultant  
State of Connecticut, Department of Public Health  
410 Capitol Avenue  
Hartford, Connecticut 06134

Dear Ms. Martinez:

I am writing to you on behalf of [NAME OF FACILITY] to formally request a waiver in accordance with Connecticut General Statutes, Section 19a-495 (c) with regards to the Regulations of the Connecticut State Agencies, Section 19a-495-570 (m) Service Operations (5) Physical Examinations.

While the regulation directs the following: “Each client shall receive within 24 hours of admission a medical history and physical examination, by a physician, physician’s assistant or registered nurse practitioner. Any physical examination that is performed by a physician assistant or registered nurse practitioner shall be dated and countersigned by a physician within 72 hours signifying his or her review of and concurrence with the findings and (ii) Each client shall receive within 72 hours of admission, diagnostic tests as determined by the physician, in the case of a recently hospitalized patient being admitted to the facility, a comprehensive history and physical was conducted when hospitalized. Requesting a history and physical as directed by the Regulations of the Connecticut State Agencies, section 19a-495-570(m)(5) does not promote efficiencies nor is it cost effective. Additionally, a large number of patients/clients/individuals admitted to the program do not have a primary physician and/or a medical home This waiver request is specific to a client who has had a recent, within the last thirty (30) days, admission and discharge from an acute care hospital or a skilled nursing facility and during such admission had a comprehensive history and physical completed in the last thirty days which will be on file in the client’s clinical record at the facility. Should there be any reason to suggest there has been a change in condition from the history and physical recently completed, [NAME OF FACILITY] will ensure that appropriate referrals have been made to update the history and physical on file.

Please see the enclosed policy and procedures that reflect the process for obtaining history and physicals for individuals admitted to the program, which includes, but is not limited to individuals admitted after a recent hospitalization or admission to a skilled nursing facility and procedures regarding new clients who may have had a recent hospitalization/admission to a skilled nursing facility but present with a significant change that does not align with the history and physical on file.

Sincerely,

## PLEASE REVIEW THE FOLLOWING CONSIDERATIONS

The following information must be included in the waiver request:

- Specific section of the public health code you are requesting a waiver for
- Reason for the request, including the type and degree of hardship (on the resident/patient/client)
- Specific relief requested
- How you will meet the intent of the regulation and the needs of the clients/patients/residents
- Any documentation to support your request

The considerations regarding the approval will be as follows:

- Must apply in writing and include the specific regulations for which the waiver is requested;
- Reason for requesting the waiver;
- Impact to Health, Life and Safety;
- What measures will be taken to ensure that there is no impact to quality and/or the spirit of the regulatory requirement, for example, a history and physical had been completed during the recent hospital admission or admission to a skilled nursing facility and is consistent with the patient presentation; if the patient had been admitted to the hospital/skilled nursing facility with an infectious disease, DPH would need to see evidence that the patient had been treated and the issues had been resolved; and
- Documents provided, i.e. policy and procedures that will drive the process.