



March 18, 2024

The Honorable Matthew D. Bradford Democratic Leader The Pennsylvania House of Representatives P.O. Box 202070 Harrisburg, PA 17120-2070

The Honorable Bryan Cutler Republican Leader The Pennsylvania House of Representatives P.O. Box 202100 Harrisburg, PA 17120-2100

Dear Leader Bradford and Leader Cutler:

On behalf of more than 230 members statewide, The Hospital and Healthsystem Association of Pennsylvania (HAP) expresses its support of House Bill 1956 as amended, sponsored by Representative Bridget Kosierowski. The legislation, which was amended and unanimously voted favorably from the House Health Committee on February 6, 2024, amends Act 112 of 2018, which considers diagnostic imaging services.

HAP has consistently been supportive of efforts that continue to protect patients' health and safety while making Act 112 of 2018 more meaningful.

The primary benefit of the law is clarifying communication with patients. We believe that HB 1956 will achieve better outcomes by:

- Removing ambiguous language related to "significant abnormality."
- Providing patients notice at the time of service that they will be receiving their test results in their electronic health record or that they can ask the provider to mail the results to them.
- Allowing providers to hold some potentially life-altering test results for one full business day prior to posting to a patient's electronic health record.

HAP supports removal of "significant abnormality" language. In practice, the provider of a diagnostic imaging service often does not know the patient and, thus, may not necessarily be able to interpret accurately a "significant abnormality" on a case-by-case basis. That determination is best made by the patient's medical provider, who ordered the test in the context of the patient's overall medical condition. What may be a "significant abnormality" in one patient may not, in fact, reflect any clinical change or concern in another.



Without such context, many imaging service providers have understandably established a low threshold to initiate the "significant findings" process. This can unintentionally cause needless anxiety to patients and their families when they receive a letter that suggests disturbing test results. In addition to fear and stress, such communication can also lead patients to seek additional, unnecessary, time-consuming, and expensive follow-up tests.

HAP also supports that written notice be provided to patients at the time of service. Patients should know that diagnostic service providers review and send results to the medical expert who ordered the test. Patients should be directed to call their doctor if they have not reviewed test results in their electronic health record or received a letter from the ordering expert's office. Providing this information at the time of service ensures that such notice is timely received by the patient and is not delayed by administrative, mailing, or other potential issues.

HAP supports allowing providers to choose to delay posting—for a short, defined period of time—potentially malignant results or those that could reveal genetic markers. The bill does allow providers to reveal such results sooner, if they choose, but the new language gives providers time to review potentially troubling results and reach out to a patient directly prior to having the patient see such results for the first time in their electronic health record. The short threshold does continue to ensure that timely patient access is assured.

On behalf of Pennsylvania hospitals, we respectfully ask that you please schedule House Bill 1956 for a floor vote and urge your caucuses to vote yes.

Thank you for all the ways you support your constituents' health and safety. We stand ready to assist you. If you have any questions, comments, or concerns, please contact me at <u>HTyler@HAPonline.org</u> or (717) 433-1997.

Sincerely,

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Heather Tyler Vice President, State Legislative Advocacy

CC: The Honorable Bridget Kosierowski