



House of Representatives

General Assembly

File No. 9

January Session, 2009

House Bill No. 5023

House of Representatives, February 24, 2009

The Committee on Insurance and Real Estate reported through REP. FONTANA, S. of the 87th Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR WOUND CARE FOR INDIVIDUALS WITH EPIDERMOLYSIS BULLOSA.

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

1 Section 1. (NEW) (*Effective January 1, 2010*) Each individual health
2 insurance policy providing coverage of the type specified in
3 subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general
4 statutes that is delivered, issued for delivery, renewed, amended or
5 continued in this state on or after January 1, 2010, shall provide
6 coverage for wound-care supplies that are medically necessary for the
7 treatment of epidermolysis bullosa and are administered under the
8 direction of a physician.

9 Sec. 2. (NEW) (*Effective January 1, 2010*) Each group health insurance
10 policy providing coverage of the type specified in subdivisions (1), (2),
11 (4), (11) and (12) of section 38a-469 of the general statutes that is
12 delivered, issued for delivery, renewed, amended or continued in this
13 state on or after January 1, 2010, shall provide coverage for wound-
14 care supplies that are medically necessary for the treatment of

15 epidermolysis bullosa and are administered under the direction of a
16 physician.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>January 1, 2010</i>	New section
Sec. 2	<i>January 1, 2010</i>	New section

INS *Joint Favorable*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact:

Municipalities	Effect	FY 10 \$	FY 11 \$
Various Municipalities	STATE MANDATE - Cost	Potential	Potential

Explanation

The bill mandates coverage for wound care supplies that are medically necessary for the treatment of insured individuals diagnosed with Epidermolysis Bullosa. There are no anticipated costs to the state health plans since the state plans currently provide this coverage.

The bill's provisions may increase costs to certain fully insured municipal plans that currently do not provide the coverage mandated. The coverage requirements may result in increased premium costs when municipalities enter into new health insurance contracts. Due to federal law, municipalities with self-insured health plans are exempt from state health insurance benefit mandates.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

Sources: Office of the State Comptroller, Municipal Employees Health Insurance Plan (MEHIP) Schedule of Benefits, State Employee Health Plan Subscriber Agreement.

OLR Bill Analysis**HB 5023*****AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR WOUND CARE FOR INDIVIDUALS WITH EPIDERMOLYSIS BULLOSA.*****SUMMARY:**

This bill requires certain insurance policies to cover wound care supplies administered under a physician's direction for the medically necessary treatment of epidermolysis bullosa.

EFFECTIVE DATE: January 1, 2010

APPLICABILITY

The bill applies to individual and group health insurance policies delivered, issued, renewed, amended, or continued in Connecticut on and after January 1, 2010 that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; and (4) hospital or medical services, including coverage under an HMO plan.

Due to federal law (ERISA), state insurance benefit mandates do not apply to self-insured benefit plans.

BACKGROUND***Epidermolysis Bullosa***

Epidermolysis bullosa (EB) refers to a group of rare skin diseases characterized by recurring painful blisters and open sores, in response to minor injury, heat, or friction, as a result of the unusually fragile nature of the person's skin. Some severe forms may involve the eyes, tongue, and esophagus, and some may produce scarring and disabling musculoskeletal deformities.

There is no cure for EB. Treatment often is focused on wound care

to minimize pain, infection, and other complications.

Medically Necessary

The law defines “medically necessary” as health care services that a physician, exercising prudent clinical judgment, would provide to a patient to prevent, evaluate, diagnose, or treat an illness, injury, disease, or its symptoms, and that are:

1. in accordance with generally accepted standards of medical practice;
2. clinically appropriate, in terms of type, frequency, extent, site, and duration and considered effective for the patient’s illness, injury, or disease; and
3. not primarily for the convenience of the patient, physician, or other health care provider and not more costly than an alternative service or sequence of services at least as likely to produce equivalent therapeutic or diagnostic results.

“Generally accepted standards of medical practice” means standards that are (1) based on credible scientific evidence published in peer-reviewed medical literature generally recognized by the relevant medical community or (2) otherwise consistent with the standards set forth in policy issues involving clinical judgment (CGS §§ 38a-482a and 38a-513c).

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable

Yea 17 Nay 2 (02/10/2009)