



# Senate

General Assembly

**File No. 546**

January Session, 2009

Substitute Senate Bill No. 1050

*Senate, April 8, 2009*

The Committee on Public Health reported through SEN. HARRIS of the 5th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

***AN ACT CONCERNING THE ESTABLISHMENT OF AN ACADEMIC  
DETAILING PROGRAM.***

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

1 Section 1. (NEW) (*Effective July 1, 2011*) (a) The University of  
2 Connecticut Health Center shall, in consultation with the Yale  
3 University School of Medicine, develop, implement and promote an  
4 evidence-based outreach and education program concerning the  
5 therapeutic and cost-effective utilization of prescription drugs for the  
6 benefit of licensed physicians, pharmacists and other health care  
7 professionals authorized to prescribe and dispense prescription drugs.  
8 In developing such program, The University of Connecticut Health  
9 Center shall consider whether such program may be developed in  
10 coordination with, or as a part of, the Connecticut Area Health  
11 Education Center.

12 (b) The program established pursuant to subsection (a) of this  
13 section shall: (1) Arrange for licensed physicians, pharmacists and  
14 nurses to conduct in person educational visits with prescribing

15 practitioners, utilizing evidence-based materials, borrowing methods  
16 from behavioral science and educational theory and, when  
17 appropriate, utilizing pharmaceutical industry data and outreach  
18 techniques; (2) inform prescribing practitioners about drug marketing  
19 that is designed to prevent competition to brand name drugs from  
20 generic or other therapeutically-equivalent pharmaceutical alternatives  
21 or other evidence-based treatment options; and (3)  
22 provide outreach and education to licensed physicians and other  
23 health care practitioners who are participating providers in state-  
24 funded health care programs, including, but not limited to, Medicaid,  
25 the HUSKY Plan, Parts A and B, the state-administered general  
26 assistance program, the Charter Oak Health Plan, the ConnPACE  
27 program, the Department of Correction inmate health services  
28 program and the state employees' health insurance plan.

29 (c) The University of Connecticut Health Center shall, to the extent  
30 feasible, utilize or incorporate into the program other independent  
31 educational resources or models that are proven to be effective in  
32 disseminating high quality, evidenced-based, cost-effective  
33 information to prescribing practitioners regarding the effectiveness  
34 and safety of prescription drugs. Such other resources or models that  
35 The University of Connecticut Health Center reviews shall include: (1)  
36 The Pennsylvania PACE Independent Drug Information Service  
37 affiliated with the Harvard Medical School; (2) the Vermont Academic  
38 Detailing Program sponsored by the University of Vermont College of  
39 Medicine Office of Primary Care; and (3) the Drug Effectiveness  
40 Review project conducted by the Oregon Health and Science  
41 University Evidence-based Practice Center.

42 (d) The University of Connecticut Health Center shall collaborate  
43 with the Commissioner of Social Services to seek federal  
44 reimbursement utilizing Medicaid funds for the administration of the  
45 program. The University of Connecticut Health Center may seek  
46 funding from nongovernmental health access foundations for the  
47 program.

48 (e) The University of Connecticut Health Center shall develop the  
 49 program in a manner that permits participating physicians to apply  
 50 hours spent in the program towards the continuing medical education  
 51 contact hours requirements required pursuant to section 20-10b of the  
 52 general statutes, as amended by this act.

53 Sec. 2. Subsection (b) of section 20-10b of the general statutes is  
 54 repealed and the following is substituted in lieu thereof (*Effective*  
 55 *October 1, 2011*):

56 (b) Except as otherwise provided in subsections (d), (e) and (f) of  
 57 this section, for registration periods beginning on and after October 1,  
 58 2007, a licensee applying for license renewal shall earn a minimum of  
 59 fifty contact hours of continuing medical education within the  
 60 preceding twenty-four-month period. Such continuing medical  
 61 education shall (1) be in an area of the physician's practice; (2) reflect  
 62 the professional needs of the licensee in order to meet the health care  
 63 needs of the public; and (3) include at least one contact hour of training  
 64 or education in each of the following topics: (A) Infectious diseases,  
 65 including, but not limited to, acquired immune deficiency syndrome  
 66 and human immunodeficiency virus, (B) risk management, (C) sexual  
 67 assault, and (D) domestic violence. For purposes of this section,  
 68 qualifying continuing medical education activities include, but are not  
 69 limited to, (i) courses offered or approved by the American Medical  
 70 Association, American Osteopathic Medical Association, Connecticut  
 71 Hospital Association, Connecticut State Medical Society, county  
 72 medical societies or equivalent organizations in another jurisdiction,  
 73 (ii) educational offerings sponsored by a hospital or other health care  
 74 institution, [or] (iii) courses offered by a regionally accredited  
 75 academic institution or a state or local health department, or (iv)  
 76 participation in the program established pursuant to section 1 of this  
 77 act.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2011	New section

Sec. 2	October 1, 2011	20-10b(b)
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**PH**      *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

**OFA Fiscal Note**

**State Impact:**

Agency Affected	Fund-Effect
UConn Health Center	GF - Significant Cost
Various State Agencies	GF - Potential Savings

**Municipal Impact:** None

**Explanation**

This bill requires the University of Connecticut Health Center (UCHC) to develop and implement a pharmaceutical academic detailing program. This program would utilize licensed physicians, pharmacists and other health care professionals to conduct in-person educational visits with prescribing practitioners.

It is anticipated that UCHC would require 7.5 full time positions to establish and operate this program. Including start up and administrative costs, the program is expected to cost approximately \$700,000 in it first year of operation (FY 12), with annualized ongoing costs of \$1.2 million.

The bill specifies that the program specifically reach out to health care practitioners who are providers in the Department of Social Services medical programs, the Department of Corrections health services program and the state employees' health insurance plans. To the extent that the program leads to more cost efficient care in these programs, an indeterminate savings will result.

**The Out Years**

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

*Sources: Public Hearing Testimony, Agency Implementation Plan*

**OLR Bill Analysis****sSB 1050*****AN ACT CONCERNING THE ESTABLISHMENT OF AN ACADEMIC  
DETAILING PROGRAM.*****SUMMARY:**

This bill requires the University of Connecticut Health Center (UCHC), in consultation with the Yale School of Medicine, to develop, implement, and promote an evidence-based outreach and education program concerning the therapeutic and cost-effective use of prescription drugs. This type of program, known as “academic detailing,” is directed at licensed physicians, pharmacists, and other health care professionals authorized to prescribe and dispense prescription drugs.

The bill requires the UCHC to consider whether the program can be developed in coordination with, or as part of, the Connecticut Area Health Education Program, which it administers.

The bill specifies that physician participation in the academic detailing program qualifies for continuing education credit and requires the UCHC to develop the program so that it allows participating physicians to apply hours spent in the program towards their continuing education requirements. It also directs the UCHC, in collaboration with the Department of Social Services, to seek federal Medicaid reimbursement to administer the program. The UCHC may also seek funding from nongovernmental health access foundations.

EFFECTIVE DATE: July 1, 2011 for program development; October 1, 2011 for the provision that recognizes academic detailing in continuing education.

**ACADEMIC DETAILING PROGRAM**

The program must:

1. arrange for licensed physicians, pharmacists, and nurses to personally conduct educational visits with prescribing practitioners, using evidence-based materials, methods from behavioral science and educational theory, and when appropriate, pharmaceutical industry data and outreach techniques;
2. inform prescribing practitioners about drug marketing designed to prevent competition to brand name drugs from generics or other evidence-based treatment options; and
3. provide outreach and education to physicians and other practitioners participating in Medicaid, HUSKY A and B, State Administered General Assistance, Charter Oak Health Plan, ConnPACE, the state employees health insurance plan, and Department of Correction inmate health services.

The bill requires the UCHC, to the extent feasible, to use or incorporate into the program other independent educational resources or models proven effective in providing high quality, evidence-based, cost-effective information to prescribing practitioners on the effectiveness and safety of prescription drugs. These include the (1) Pennsylvania PACE Independent Drug Information Service, (2) Vermont Academic Detailing Program, and (3) the Oregon Drug Effectiveness Review Project.

### **COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute

Yea 31 Nay 0 (03/20/2009)