



General Assembly

Amendment

January Session, 2009

LCO No. 8900

HB0660008900SRO

Offered by:
SEN. RORABACK, 30th Dist.

To: Subst. House Bill No. 6600 File No. 996 Cal. No. 674

**"AN ACT CONCERNING THE ESTABLISHMENT OF THE
SUSTINET PLAN."**

1 After the last section, add the following and renumber sections and
2 internal references accordingly:

3 "Sec. 501. (NEW) (*Effective July 1, 2009*) (a) The board shall establish
4 a health care provider committee that shall develop recommended
5 clinical care and safety guidelines for use by participating health care
6 providers. The committee shall choose from nationally and
7 internationally recognized guidelines for the provision of care,
8 including guidelines for hospital safety and the inpatient and
9 outpatient treatment of particular conditions. The committee shall
10 continually assess the quality of evidence relevant to the costs, risks
11 and benefits of treatments described in such guidelines. The health
12 care provider committee shall forward their recommended clinical care
13 and safety guidelines to the board in accordance with such time and
14 format requirements as may be prescribed by the board. The health
15 care provider committee shall include both health care consumers and

16 health care providers.

17 (b) Health care providers participating in the Sustinet Plan shall
18 receive confidential reports comparing their practice patterns with
19 those of their peers. Such reports shall provide information about
20 opportunities for appropriate continuing medical education.

21 (c) The board, in consultation with the health care provider
22 committee, shall approve quality of care standards for the care of
23 particular medical conditions. Such standards may reflect outcomes
24 over the entire care cycle for each health care condition, adjusted for
25 patient risk and general consistency of care with approved guidelines
26 as well as other factors. Providers who meet or exceed quality of care
27 standards for a particular medical condition shall be publicly
28 recognized by the board in such manner as the board determines
29 appropriate. Such recognition shall be effectively communicated to
30 Sustinet Plan members, including those who have been diagnosed
31 with the particular medical condition for which recognition has been
32 extended. Such communication to members shall be in multiple forms
33 and reflect consideration of diversity in primary language, general and
34 health literacy levels, past health-information-seeking behaviors, and
35 computer and Internet use among members.

36 (d) The board shall develop procedures that require hospitals and
37 their medical staffs, physicians, nurse practitioners, and other
38 participating health care providers to engage in periodic reviews of
39 their quality of care. The purpose of such reviews shall be to develop
40 plans for quality improvement. Such reviews shall include the
41 identification of potential problems manifesting as adverse events or
42 events that could have resulted in negative patient outcomes. As
43 appropriate, such reviews shall incorporate confidential consultation
44 with peers and colleagues, opportunities for continuing medical
45 education, and other interventions and supports to improve
46 performance. To the maximum extent permissible, such reviews shall
47 incorporate existing peer review mechanisms. Any review conducted
48 in accordance with the provisions of this subsection shall be subject to

49 the protections afforded by section 19a-17b of the general statutes.

50 (e) The board, in consultation with those hospitals serving Sustinet
51 Plan members, shall develop hospital safety standards that shall be
52 implemented in such hospitals. The board shall establish monitoring
53 procedures and sanctions that ensure compliance by each participating
54 hospital with such safety standards and may establish performance
55 incentives to encourage hospitals to exceed such safety standards.

56 (f) The board may provide participating providers with information
57 about prescription drugs, medical devices, and other goods and
58 services used in the delivery of health care. Such information may
59 address emerging trends that involve utilization of goods and services
60 that, in judgment of the board, are less than optimally cost effective.
61 The board may furnish participating providers with free samples of
62 generic or other prescription drugs.

63 (g) The board may develop and implement procedures and
64 incentives that encourage participating providers to furnish and
65 Sustinet Plan members to obtain appropriate evidenced-based health
66 care."