



General Assembly

January Session, 2009

Amendment

LCO No. 8909

HB0660008909SRO

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) Notwithstanding any provision of the general statutes, there
22 shall be no monetary liability on the part of, and no cause of action for
23 damages shall arise against, a participating provider for a Sustinet
24 Plan member's injury caused by such provider's provision of care
25 when such care was consistent with guidelines approved by the board.
26 The board shall establish and implement a process for providing a
27 member with no-fault compensation for injuries sustained by such
28 member notwithstanding the fact that the provider's provision of care
29 was consistent with guidelines approved by the board. Exemption
30 from liability shall not apply to injuries that result from: (1) A mistaken
31 determination by the provider that a particular guideline applied to a
32 particular patient, where such mistaken determination is caused by the
33 provider's negligence or intentional misconduct, or (2) a failure to
34 properly follow a particular guideline where such failure is caused by
35 the provider's negligence or intentional misconduct.

36 (d) The board, in consultation with the health care provider
37 committee, shall approve quality of care standards for the care of
38 particular medical conditions. Such standards may reflect outcomes
39 over the entire care cycle for each health care condition, adjusted for
40 patient risk and general consistency of care with approved guidelines
41 as well as other factors. Providers who meet or exceed quality of care
42 standards for a particular medical condition shall be publicly
43 recognized by the board in such manner as the board determines
44 appropriate. Such recognition shall be effectively communicated to
45 Sustinet Plan members, including those who have been diagnosed
46 with the particular medical condition for which recognition has been
47 extended. Such communication to members shall be in multiple forms
48 and reflect consideration of diversity in primary language, general and

49 health literacy levels, past health-information-seeking behaviors, and
50 computer and Internet use among members.

51 (e) The board shall develop procedures that require hospitals and
52 their medical staffs, physicians, nurse practitioners, and other
53 participating health care providers to engage in periodic reviews of
54 their quality of care. The purpose of such reviews shall be to develop
55 plans for quality improvement. Such reviews shall include the
56 identification of potential problems manifesting as adverse events or
57 events that could have resulted in negative patient outcomes. As
58 appropriate, such reviews shall incorporate confidential consultation
59 with peers and colleagues, opportunities for continuing medical
60 education, and other interventions and supports to improve
61 performance. To the maximum extent permissible, such reviews shall
62 incorporate existing peer review mechanisms. Any review conducted
63 in accordance with the provisions of this subsection shall be subject to
64 the protections afforded by section 19a-17b of the general statutes.

65 (f) The board, in consultation with those hospitals serving SustiNet
66 Plan members, shall develop hospital safety standards that shall be
67 implemented in such hospitals. The board shall establish monitoring
68 procedures and sanctions that ensure compliance by each participating
69 hospital with such safety standards and may establish performance
70 incentives to encourage hospitals to exceed such safety standards.

71 (g) The board may provide participating providers with information
72 about prescription drugs, medical devices, and other goods and
73 services used in the delivery of health care. Such information may
74 address emerging trends that involve utilization of goods and services
75 that, in judgment of the board, are less than optimally cost effective.
76 The board may furnish participating providers with free samples of
77 generic or other prescription drugs.

78 (h) The board may develop and implement procedures and
79 incentives that encourage participating providers to furnish and
80 SustiNet Plan members to obtain appropriate evidenced-based health

81 care."