



General Assembly

Amendment

January Session, 2009

LCO No. 8431

SB0104808431SD0

Offered by:
SEN. HARRIS, 5th Dist.

To: Subst. Senate Bill No. 1048 File No. 545 Cal. No. 378

(As Amended by Senate Schedule "A")

"AN ACT CONCERNING BULK PURCHASING OF PRESCRIPTION DRUGS."

1 Strike line 24 in its entirety and substitute the following in lieu
2 thereof:

3 "health and human services,"

4 In line 25, strike "agencies,"

5 After the last section, add the following and renumber sections and
6 internal references accordingly:

7 "Sec. 501. Subsection (e) of section 19a-127n of the general statutes is
8 repealed and the following is substituted in lieu thereof (*Effective from*
9 *passage*):

10 (e) Information collected pursuant to this section shall not be
11 disclosed pursuant to subsection (a) of section 1-210 at any time, and

12 information collected pursuant to this section shall not be subject to
13 subpoena or discovery or introduced into evidence in any judicial or
14 administrative proceeding except as otherwise specifically provided by
15 law. Nothing in this section shall be construed to: ~~limit~~ (1) Limit
16 access to or disclosure of investigative files, including any adverse
17 event report contained in such files, maintained by the department as
18 otherwise provided in section 19a-499; or (2) prohibit the
19 commissioner from sharing information collected pursuant to this
20 section with the Department of Social Services.

21 Sec. 502. (NEW) (*Effective January 1, 2010*) (a) As used in this section:

22 (1) "Hospital" means an acute care hospital that is subject to the
23 federal inpatient prospective payment system described in 42 CFR 412;
24 and

25 (2) "Outpatient surgical facility" has the same meaning as provided
26 in section 19a-493b of the general statutes.

27 (b) No hospital or outpatient surgical facility shall seek payment for
28 any increased costs that are incurred as the direct result of a hospital-
29 acquired condition, identified as nonpayable by Medicare pursuant to
30 Section 5001(c) of the Deficit Reduction Act of 2005. Except as
31 otherwise provided by federal law or section 8 of public act 09-2, the
32 provisions of this section shall apply irrespective of the patient's
33 insurance status or source of payment, including self-pay status.

34 Sec. 503. Section 8 of public act 09-2 is repealed and the following is
35 substituted in lieu thereof (*Effective from passage*):

36 The Commissioner of Social Services shall amend the Medicaid state
37 plan to indicate that [approved inpatient hospital rates are not
38 applicable to] when reimbursement for inpatient hospital care includes
39 hospital-acquired conditions, [that are] identified as nonpayable by
40 Medicare pursuant to Section 5001(c) of the Deficit Reduction Act of
41 2005, [so that hospitals are not paid for such hospital-acquired
42 conditions] such reimbursement shall be limited to the amount that

43 would have been paid had the hospital-acquired condition not been
44 present.

45 Sec. 504. (NEW) (*Effective October 1, 2009*) (a) A practitioner of the
46 healing arts, as defined in section 20-1 of the general statutes, shall not
47 charge, bill or otherwise solicit payment from any patient, client,
48 customer or responsible third-party payor for performance of the
49 technical component of computerized axial tomography, positron
50 emission tomography or magnetic resonance imaging diagnostic
51 imaging services if such services were not actually rendered by such
52 practitioner of the healing arts or a person under his or her direct
53 supervision. For purposes of this section, "responsible third-party
54 payor" means any person or entity who is responsible for payment of
55 computerized axial tomography, positron emission tomography or
56 magnetic resonance imaging diagnostic imaging services provided to a
57 patient.

58 (b) Radiological facilities or imaging centers performing the
59 technical component of computerized axial tomography, positron
60 emission tomography or magnetic resonance imaging diagnostic
61 imaging services shall directly bill either the patient or the responsible
62 third-party payor for such services. Radiological facilities or imaging
63 centers shall not bill a practitioner of the healing arts who requests
64 such services."