



General Assembly

Amendment

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LCO No. 6476

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Offered by:

REP. RITTER E., 38th Dist.

SEN. GERRATANA, 6th Dist.

To: Subst. House Bill No. 6549

File No. 538

Cal. No. 323

"AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S OVERSIGHT RESPONSIBILITIES RELATING TO SCOPE OF PRACTICE DETERMINATIONS FOR HEALTH CARE PROFESSIONS."

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. (NEW) (*Effective July 1, 2011*) (a) Any person or entity,
4 acting on behalf of a health care profession that seeks a change to such
5 profession's scope of practice, shall submit a written scope of practice
6 request to the Department of Public Health not later than August
7 fifteenth of the year preceding the commencement of the next regular
8 session of the General Assembly.

9 (b) (1) Any written scope of practice request submitted to the
10 Department of Public Health pursuant to subsection (a) of this section
11 shall include the following information:

12 (A) A plain language description of the request;

13 (B) Public health and safety benefits that the requestor believes will
14 be achieved should the request be implemented and, if applicable, a
15 description of any harm to public health and safety should the request
16 not be implemented;

17 (C) The impact that the request will have on public access to health
18 care;

19 (D) A summary of state or federal laws that govern the health care
20 profession making the request;

21 (E) The state's current regulatory oversight of the health care
22 profession making the request;

23 (F) All current education and training requirements applicable to
24 the health care profession making the request;

25 (G) All scope of practice changes either requested or enacted
26 concerning the health care profession in the five-year period preceding
27 the date of the request;

28 (H) The number and types of substantiated professional disciplinary
29 actions brought against the health care profession in the five-year
30 period preceding the date of the request;

31 (I) The anticipated economic impact to the health care professions
32 affected by the request and the economic impact to the general public;

33 (J) Regional and national trends concerning licensure of the health
34 care profession making the request and a summary of relevant scope
35 of practice provisions enacted in other states; and

36 (K) Identification of any health care professions that can reasonably
37 be anticipated to be impacted by the request, the nature of the impact
38 and efforts made by the requestor to secure support for the request
39 from other health care professions, including identification of areas of
40 agreement between any affected health care professions.

41 (2) Any person or entity acting on behalf of a health care profession
42 may submit a request for an exemption from the processes described
43 in this section and section 2 of this act for reasons that include, but are
44 not limited to: (A) Exigent circumstances which necessitate an
45 immediate response to the scope of practice request, (B) the lack of any
46 dispute concerning the scope of practice request, or (C) any
47 outstanding issues among health care professions concerning the scope
48 of practice request can easily be resolved.

49 (c) In any year in which a scope of practice request is received
50 pursuant to this section, not later than September fifteenth of the year
51 preceding the commencement of the next regular session of the
52 General Assembly, the Department of Public Health shall: (1) Provide
53 written notification to the joint standing committee of the General
54 Assembly having cognizance of matters relating to public health of any
55 health care profession that has submitted a scope of practice request,
56 including any request for exemption, to the department pursuant to
57 this section; and (2) post any such request, including any request for
58 exemption, and the name and address of the requestor on the
59 department's web site.

60 (d) Any person or entity, acting on behalf of a health care profession
61 that may be impacted by a scope of practice request submitted
62 pursuant to this section, may submit to the department a written
63 statement identifying the nature of the impact not later than October
64 first of the year preceding the next regular session of the General
65 Assembly. Any such person or entity impacted by a scope of practice
66 request shall indicate the nature of the impact taking into
67 consideration the criteria set forth in subsection (b) of this section and
68 shall provide a copy of the written impact statement to the requestor.
69 Not later than October fifteenth of such year, the requestor shall
70 submit a written response to the department and any person or entity
71 that has provided a written impact statement. The requestor's written
72 response shall include a description of areas of agreement and
73 disagreement between the respective health care professions.

74 Sec. 2. (NEW) (*Effective July 1, 2011*) (a) On or before November first
75 of the year preceding the commencement of the next regular session of
76 the General Assembly, the Commissioner of Public Health shall
77 establish and appoint members to a scope of practice review
78 committee for each timely scope of practice request submitted to the
79 department pursuant to section 1 of this act. Committees established
80 pursuant to this section shall consist of the following members: (1)
81 Two members recommended by the requestor to represent the health
82 care profession making the scope of practice request; (2) two members
83 recommended by each person or entity that has submitted a written
84 impact statement pursuant to subsection (d) of section 1 of this act, to
85 represent the health care professions impacted by the scope of practice
86 request; and (3) the Commissioner of Public Health or the
87 commissioner's designee, who shall serve as an ex-officio, nonvoting
88 member of the committee. The Commissioner of Public Health or the
89 commissioner's designee shall serve as the chairperson of any such
90 committee. The Commissioner of Public Health may appoint
91 additional members to any committee established pursuant to this
92 section to include representatives from health care professions having
93 a proximate relationship to the underlying request if the commissioner
94 or the commissioner's designee determines that such expansion would
95 be beneficial to a resolution of the issues presented. Any member of
96 such committee shall serve without compensation.

97 (b) Any committee established pursuant to this section shall review
98 and evaluate the scope of practice request, subsequent written
99 responses to the request and any other information the committee
100 deems relevant to the scope of practice request. Such review and
101 evaluation shall include, but not be limited to, an assessment of any
102 public health and safety risks that may be associated with the request
103 and whether the request may enhance access to quality and affordable
104 health care. The committee, when carrying out the duties prescribed in
105 this section, may seek input on the scope of practice request from the
106 Department of Public Health and such other entities as the committee
107 determines necessary in order to provide its written findings as

108 described in subsection (c) of this section.

109 (c) The committee, upon concluding its review and evaluation of the
 110 scope of practice request, shall provide its findings to the joint
 111 standing committee of the General Assembly having cognizance of
 112 matters relating to public health. The committee shall provide the
 113 written findings to said joint standing committee not later than the
 114 February first following the date of the committee's establishment. The
 115 committee shall terminate on the date that it submits its written
 116 findings to said joint standing committee.

117 Sec. 3. (NEW) (*Effective July 1, 2011*) On or before January 1, 2013,
 118 the Commissioner of Public Health shall evaluate the processes
 119 implemented pursuant to sections 1 and 2 of this act and thereafter
 120 report to the joint standing committee of the General Assembly having
 121 cognizance of matters relating to public health, in accordance with the
 122 provisions of section 11-4a of the general statutes, on the effectiveness
 123 of such processes in addressing scope of practice requests."

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2011</i>	New section
Sec. 2	<i>July 1, 2011</i>	New section
Sec. 3	<i>July 1, 2011</i>	New section