



Senate

General Assembly

File No. 247

January Session, 2015

Senate Bill No. 417

Senate, March 26, 2015

The Committee on Insurance and Real Estate reported through SEN. CRISCO of the 17th Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.

AN ACT CONCERNING CONFERENCES BETWEEN HEALTH CARRIERS' CLINICAL PEERS AND HEALTH CARE PROFESSIONALS.

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

1 Section 1. Subdivision (3) of subsection (a) of section 38a-591d of the
2 general statutes is repealed and the following is substituted in lieu
3 thereof (*Effective October 1, 2015*):

4 (3) After a covered person, a covered person's authorized
5 representative or a covered person's health care professional is notified
6 of an initial adverse determination that was based, in whole or in part,
7 on medical necessity, of a concurrent or prospective utilization review
8 or of a benefit request, a health carrier [may] shall offer a covered
9 person's health care professional the opportunity to confer with a
10 clinical peer of such health carrier, provided such covered person,
11 covered person's authorized representative or covered person's health
12 care professional has not filed a grievance of such initial adverse
13 determination prior to such conference. Such conference shall not be

14 considered a grievance of such initial adverse determination.

This act shall take effect as follows and shall amend the following sections:		
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Section 1	<i>October 1, 2015</i>	38a-591d(a)(3)
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INS *Joint Favorable*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note**State Impact:** None**Municipal Impact:** None**Explanation****Explanation**

The bill requires, rather than allows, conferences with clinical peers. As the bill addresses the operations of private insurance companies, there is no state or municipal fiscal impact.

The Out Years**State Impact:** None**Municipal Impact:** None

OLR Bill Analysis**SB 417*****AN ACT CONCERNING CONFERENCES BETWEEN HEALTH CARRIERS' CLINICAL PEERS AND HEALTH CARE PROFESSIONALS.*****SUMMARY:**

This bill requires health carriers (e.g., insurers or HMOs) to offer a covered person's health care provider the opportunity to confer with the health carrier's clinical peer (see BACKGROUND) under certain circumstances. Current law allows, but does not require, health carriers to do so.

Under current law, such a conference may be offered:

1. after a covered person or his or her authorized representative or health care professional is notified of an initial adverse determination of a concurrent or prospective utilization review or benefit request, which was at least partially based on medical necessity and
2. as long as the covered person, representative, or health care professional has not already filed a grievance of the adverse determination.

By law, such conferences may not be considered grievances of the initial adverse determination.

EFFECTIVE DATE: October 1, 2015

BACKGROUND***Adverse Determination***

An adverse determination is a denial or reduction of coverage for a specific service. By law, if an insured challenges an adverse

determination, a clinical peer of the health carrier must review the case. The covered person or his or her authorized representative may then request an external review.

Clinical Peer

A “clinical peer” is generally a physician or other health care professional who holds a nonrestricted license in (1) a U.S. state and (2) the same or similar specialty as someone who typically manages the medical service under review. Clinical peers reviewing adverse determinations relating to substance use or certain mental disorders must meet additional qualifications.

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable

Yea 12 Nay 7 (03/12/2015)