H.C.R. NO. 284

HOUSE CONCURRENT RESOLUTION

REQUESTING THE AUDITOR TO STUDY THE SOCIAL AND FINANCIAL IMPACT OF MANDATORY HEALTH INSURANCE COVERAGE FOR USE OF THE LG1 INTELLIGENT MEDICAL VIGILANCE SYSTEM.

WHEREAS, thousands of patients die unnecessarily each year 1 in hospitals from unexpected accidents and errors; and 2 3 WHEREAS, reasons include insufficient staffing and 4 ineffective systems in place to identify acute care hospital 5 medical-surgical patients in distress; and 6 7 WHEREAS, in 1999, the Institute of Medicine issued a 8 clarion call with its report, "To Err Is Human" stating that 9 each year approximately 200,000 people die in the United States 10 hospitals from preventable errors and mistakes, of which nearly 11 20 percent of those deaths occur from "failure-to-rescue"; and 12 13 WHEREAS, a "Patient's Right to Safety" is an emerging legal 14 entitlement and national standard-of-care for every acute care 15 hospital patient; and 16 17 WHEREAS, medical-surgical units and nursing stations of a 18 typical acute care hospital are where most patients receive 19 noncritical care, generally involving regularly scheduled 20 nursing rounds every four to five hours; nevertheless, acute or 21 unexpected clinical events can go unnoticed for critical minutes 22 or hours, until the next visit by a physician or nurse; and 23 24 WHEREAS, although rapid response teams are being promoted, 25 there are no systems which focus on the medical-surgical ward of 26 27 the acute care hospital, where nearly 75 percent of patients typically receive care, for identifying and tracking patients in 28 distress: and 29



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WHEREAS, technological solutions have been advocated to 1 augment patient safety on the medical-surgical wards of acute 2 care hospitals; and 3 4 5 WHEREAS, an automated early alert system called the LG1 Intelligent Medical Vigilance System or "LG1," identifies at-6 risk patients with an invisible, noncontact "Star Trek-like" 7 device that provides accurate and continuous observation of 8 heart and respiratory rates -- the two most critical vital signs --9 while the patient is in bed, and immediately notifies nursing 10 staff upon detecting a life-threatening condition; and 11 12 WHEREAS, the LG1 has been developed, tested and validated 13 in clinical settings and specifically has federal Food and Drug 14 Administration authorization to provide the LG1 for medical-15 surgical applications in acute care hospitals; and 16 17 18 WHEREAS, the LG1 allows for noncontact physiological measurements, eliminating the need for cumbersome, direct 19 patient connections, such as electrodes, cuffs, or cannula, 20 whereby nursing personnel are immediately notified of patients 21 at-risk and can respond proactively before an unexpected event 22 becomes serious, or even fatal; and 23 24 25 WHEREAS, the LG1 enables more efficient use of resources and staff by enabling nursing staff to be aware of, and respond 26 to, precipitous patient deterioration, checks on the patient 27 28 constantly, and calls the nurses for help only if the patient is 29 at serious risk; and 30 WHEREAS, this critical capability will enable the LG1 to 31 become a standard-of-care for medical-surgical units in acute 32 33 care hospitals; and 34 35 WHEREAS, because of the absence of health insurance 36 coverage, hospitals may be reluctant to provide the LG1 to its 37 patients; and 38 WHEREAS, section 23-51, Hawaii Revised Statutes (HRS) 39 requires that "before any legislative measure that mandates 40 health insurance coverage for specific health services, specific 41 diseases, or certain providers of health care services as part 42 of individual or group health insurance policies, can be 43 considered, there shall be concurrent resolutions passed 44 HCR HMS 2007-3116





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    requesting the auditor to prepare and submit to the legislature
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    a report that assesses both the social and financial effects of
    the proposed mandated coverage"; and
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         WHEREAS, section 23-51, HRS, further provides that the
    concurrent resolutions shall designate a specific legislative
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    bill that:
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         (1) Has been introduced in the Legislature; and
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         (2)
              Includes, at a minimum, information identifying the:
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                   Specific health service, disease, or provider
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              (A)
                   that would be covered;
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              (B)
                   Extent of the coverage;
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              (C)
                   Target groups that would be covered;
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                   Limits on utilization, if any; and
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              (D)
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                   Standards of care;
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              (E)
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    and
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         WHEREAS, section 23-52, HRS, further specifies the minimum
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    information required for assessing the social and financial
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    impact of the proposed health coverage mandate in the Auditor's
    report; and
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         WHEREAS, _.B. No. ____ mandates coverage of the LG1 for all
   policies and contracts, hospital and medical service plan
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   contracts, medical service corporation contracts, and health
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   maintenance organization plans and contracts issued after
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   December 31, 2007; and
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         WHEREAS, the Legislature believes that mandatory health
   insurance coverage for the LG1, as provided in .B. No.
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    (2007) will substantially enhance patient safety and provide a
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   new standard of care for the people of this State; now,
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   therefore,
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BE IT RESOLVED by the House of Representatives of the 1 2 Twenty-fourth Legislature of the State of Hawaii, Regular Session of 2007, the Senate concurring, that the Auditor is 3 requested to conduct an impact assessment report, pursuant to 4 sections 23-51 and 23-52, HRS, of the social and financial 5 impacts of mandating coverage of the LG1 for all policies and 6 contracts, hospital and medical service plan contracts, medical 7 service corporation contracts, and health maintenance 8 organization plans and contracts issued after December 31, 2007, 9 10 as provided in _.B. No. ____ 2007; and 11 12 BE IT FURTHER RESOLVED that the Hawaii Health Systems Corporation (HHSC) is requested to conduct a pilot study to 13 14 determine the social and financial impact to the system; and 15 16 BE IT FURTHER RESOLVED that the Auditor and HHSC are requested to submit findings and recommendations to the 17 Legislature, including any necessary implementing legislation, 18 no later than 20 days prior to the convening of the Regular 19 Session of 2008; and 20 21 BE IT FURTHER RESOLVED that certified copies of this 22 23 Concurrent Resolution be transmitted to the Auditor, Director of Health, and Chief Executive Officer of HHSC. 24 25 26 27 OFFERED BY:

Jabben Tohn M.

MAR 1 4 2007

