THE SENATE TWENTY-FOURTH LEGISLATURE, 2007 STATE OF HAWAII

S.C.R. NO. 209

MAR 1 4 2007

SENATE 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 the acute care hospital, where nearly 75 percent of patients 27 typically receive care, for identifying and tracking patients in 28 distress; and 29



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WHEREAS, technological solutions have been advocated to
 augment patient safety on the medical-surgical wards of acute
 care hospitals; and

5 WHEREAS, an automated early alert system called the LG1 6 Intelligent Medical Vigilance System or "LG1," identifies at-7 risk patients with an invisible, noncontact "Star Trek-like" 8 device that provides accurate and continuous observation of 9 heart and respiratory rates--the two most critical vital signs--10 while the patient is in bed, and immediately notifies nursing 11 staff upon detecting a life-threatening condition; and

13 WHEREAS, the LG1 has been developed, tested and validated 14 in clinical settings and specifically has federal Food and Drug 15 Administration authorization to provide the LG1 for medical-16 surgical applications in acute care hospitals; and

18 WHEREAS, the LG1 allows for noncontact physiological 19 measurements, eliminating the need for cumbersome, direct 20 patient connections, such as electrodes, cuffs, or cannula, 21 whereby nursing personnel are immediately notified of patients 22 at-risk and can respond proactively before an unexpected event 23 becomes serious, or even fatal; and

WHEREAS, the LG1 enables more efficient use of resources and staff by enabling nursing staff to be aware of, and respond to, precipitous patient deterioration, checks on the patient constantly, and calls the nurses for help only if the patient is at serious risk; and

WHEREAS, this critical capability will enable the LG1 to
 become a standard-of-care for medical-surgical units in acute
 care hospitals; and

WHEREAS, because of the absence of health insurance
coverage, hospitals may be reluctant to provide the LG1 to its
patients; and

39 WHEREAS, section 23-51, Hawaii Revised Statutes (HRS) 40 requires that "before any legislative measure that mandates 41 health insurance coverage for specific health services, specific 42 diseases, or certain providers of health care services as part 43 of individual or group health insurance policies, can be 44 considered, there shall be concurrent resolutions passed

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requesting the auditor to prepare and submit to the legislature 1 a report that assesses both the social and financial effects of 2 the proposed mandated coverage"; and 3 4 WHEREAS, section 23-51, HRS, further provides that the 5 concurrent resolutions shall designate a specific legislative 6 bill that: 7 8 9 (1)Has been introduced in the Legislature; and 10 Includes, at a minimum, information identifying the: (2)11 12 Specific health service, disease, or provider 13 (A) that would be covered; 14 15 (B) Extent of the coverage; 16 17 18 (C) Target groups that would be covered; 19 Limits on utilization, if any; and (D) 20 21 (E) Standards of care; 22 23 24 and 25 WHEREAS, section 23-52, HRS, further specifies the minimum 26 information required for assessing the social and financial 27 impact of the proposed health coverage mandate in the Auditor's 28 report; and 29 30 WHEREAS, _.B. No. ____ mandates coverage of the LG1 for all 31 policies and contracts, hospital and medical service plan 32 contracts, medical service corporation contracts, and health 33 maintenance organization plans and contracts issued after 34 December 31, 2007; and 35 36 37 WHEREAS, the Legislature believes that mandatory health insurance coverage for the LG1, as provided in .B. No. 38 (2007) will substantially enhance patient safety and provide a 39 new standard of care for the people of this State; now, 40 therefore, 41



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BE IT RESOLVED by the Senate of the Twenty-fourth 1 Legislature of the State of Hawaii, Regular Session of 2007, the 2 House of Representatives 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 as provided in .B. No. 2007; and 10 11 BE IT FURTHER RESOLVED that the Hawaii Health Systems 12 Corporation (HHSC) is requested to conduct a pilot study to 13 determine the social and financial impact to the system; and 14 15 BE IT FURTHER RESOLVED that the Auditor and HHSC are 16 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 Concurrent Resolution be transmitted to the Auditor, Director of 23 Health, and Chief Executive Officer of HHSC. 24 25 26 27

OFFERED BY: And YS

