

FEB 07 2011

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# SENATE CONCURRENT RESOLUTION

REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL  
EFFECTS OF REQUIRING HEALTH INSURERS TO PROVIDE COVERAGE  
FOR USE OF THE LIFE BED INTELLIGENT MEDICAL VIGILANCE  
SYSTEM.

1           WHEREAS, thousands of patients die unnecessarily each year  
2 in hospitals from unexpected accidents and errors that include  
3 insufficient staffing and ineffective systems in place to  
4 identify acute care hospital medical-surgical patients in  
5 distress; and

6           WHEREAS, each year approximately two hundred thousand people  
7 die in hospitals in the United States from preventable errors  
8 and mistakes; nearly twenty per cent of those deaths occur from  
9 failure-to-rescue; and

10           WHEREAS, a Patient's Right to Safety is an emerging legal  
11 entitlement and national standard-of-care for every acute care  
12 hospital patient; and

13  
14           WHEREAS, the Hawaii Employer-Union Health Benefits Trust  
15 Fund conducted a two-year pilot project at the Queens Medical  
16 Center using the Intelligent Medical Vigilance technology and  
17 found a thirty-five per cent return on investment when a  
18 reimbursement of \$18.00 per day, per bed, was paid; and

19  
20           WHEREAS, in the same pilot project, the Hawaii Employer-  
21 Union Health Benefits Trust also found an 18.5 per cent  
22 reduction of intensive care unit transfers and a forty-one per  
23 cent reduction of fall rates on the medical surgical ward; and

24  
25           WHEREAS, the medical-surgical units and nursing stations of  
26 a typical acute care hospital are where most patients receive  
27 non-critical care, generally involving regularly scheduled  
28 nursing rounds every four to eight hours; however, acute or



1 unexpected clinical events may go unnoticed for critical minutes  
2 or hours until the next visit by a physician or nurse; and

3 WHEREAS, although rapid response teams are being promoted  
4 as a solution to address acute clinical events, there are no  
5 systems focused on the medical-surgical ward of the acute care  
6 hospital, where nearly seventy-five per cent of patients  
7 typically receive care, to identify and track patients in  
8 distress; and

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

12 WHEREAS, an automated early alert system called the LIFELED  
13 Intelligent Medical Vigilance System or LIFELED, identifies at-  
14 risk patients with an invisible, non-contact "Star Trek-like"  
15 device that provides accurate and continuous observations of  
16 heart and respiratory rates -- the two most critical vital signs  
17 -- while the patient is in bed, and notifies nursing staff  
18 immediately upon detecting a life-threatening condition; and

19 WHEREAS, LIFELED also detects a patient's unauthorized bed  
20 exit, a leading cause of injurious and expensive patient falls;  
21 and

22 WHEREAS, LIFELED has been developed, tested, and validated  
23 in clinical settings and has received United States Food and  
24 Drug Administration authorization specifically for medical-  
25 surgical applications in acute care hospitals; and

26  
27 WHEREAS, LIFELED provides non-contact physiological  
28 measurements, eliminating the need for cumbersome direct patient  
29 connections, such as electrodes, cuffs, or cannulae, immediately  
30 notifying nursing personnel of important information for at-risk  
31 patients, which allows proactive response before an unexpected  
32 event becomes serious or fatal; and

33 WHEREAS, LIFELED enables more efficient use of resources  
34 and staff, permitting nursing staff to be aware of, and respond  
35 to, precipitous patient deterioration. As a virtual additional  
36 set of eyes, LIFELED monitors a patient constantly and calls the  
37 nurses for help only if the patient is at serious risk; and



1 WHEREAS, this critical capability will enable LIFEDED to  
2 become a standard-of-care for medical-surgical units in acute  
3 care hospitals; and  
4

5 WHEREAS, because of the absence of health insurance coverage  
6 for the use of LIFEDED, many hospitals may be reluctant to  
7 provide LIFEDED to their patients; and  
8

9 WHEREAS, section 23-51, Hawaii Revised Statutes, requires  
10 that "[b]efore any legislative measure that mandates health  
11 insurance coverage for specific health services, specific  
12 diseases, or certain providers of health care services as part  
13 of individual or group health insurance policies, can be  
14 considered, there shall be concurrent resolutions passed  
15 requesting the auditor to prepare and submit to the legislature  
16 a report that assesses both the social and financial effects of  
17 the proposed mandated coverage"; and  
18

19 WHEREAS, section 23-51, Hawaii Revised Statutes, further  
20 provides that "[t]he concurrent resolutions shall designate a  
21 specific legislative bill that:  
22

- 23 (1) Has been introduced in the legislature; and  
24  
25 (2) Includes, at a minimum, information identifying the:  
26  
27 (A) Specific health service, disease, or provider  
28 that would be covered;  
29  
30 (B) Extent of the coverage;  
31  
32 (C) Target groups that would be covered;  
33  
34 (D) Limits on utilization, if any; and  
35  
36 (E) Standards of care.  
37

38 For purposes of this part, mandated health insurance coverage  
39 shall not include mandated optionals"; and  
40

41 WHEREAS, section 23-52, Hawaii Revised Statutes, further  
42 specifies the minimum information required for assessing the  
43 social and financial impact of the proposed health coverage  
44 mandate in the Auditor's report; and



1  
 2 WHEREAS, H.B. No. 854 (2011) mandates coverage of the use  
 3 of the LIFEVED Intelligent Medical Vigilance System for all  
 4 policies and contracts, hospital and medical service plan  
 5 contracts, medical service corporation contracts, and health  
 6 maintenance organization plans and contracts issued on or after  
 7 December 31, 2011; and

8  
 9 WHEREAS, the Legislature believes that mandatory health  
 10 insurance coverage for use of the LIFEVED Intelligent Medical  
 11 Vigilance System as provided in H.B. No. 854 (2011), would  
 12 substantially reduce illnesses and injuries and assist in the  
 13 maintenance of good health for the people of this State; now,  
 14 therefore,

15  
 16 BE IT RESOLVED by the Senate of the Twenty-sixth  
 17 Legislature of the State of Hawaii, Regular Session of 2011, the  
 18 House of Representatives concurring, that the Auditor is  
 19 requested to conduct an impact assessment report, pursuant to  
 20 sections 23-51 and 23-52, Hawaii Revised Statutes, of the social  
 21 and financial impacts of mandating coverage of the use of the  
 22 LIFEVED Intelligent Medical Vigilance System for all policies and  
 23 contracts, hospital and medical service plan contracts, medical  
 24 service corporation contracts, and health maintenance  
 25 organization plans and contracts issued on or after December 31,  
 26 2011, as provided in H.B. No. 854 (2011); and

27  
 28 BE IT FURTHER RESOLVED that the Auditor is requested to  
 29 submit findings and recommendations to the Legislature,  
 30 including any necessary implementing legislation, no later than  
 31 twenty days prior to the convening of the Regular Session of  
 32 2012; and

33  
 34 BE IT FURTHER RESOLVED that certified copies of this  
 35 Concurrent Resolution be transmitted to the Auditor and to the  
 36 Insurance Commissioner, who in turn is requested to transmit  
 37 copies to each insurer in the State that issues health insurance  
 38 policies.

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 41

OFFERED BY:         *Randy H. Bell*          
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