
SENATE CONCURRENT RESOLUTION

REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL
EFFECTS OF REQUIRING HEALTH INSURERS TO PROVIDE COVERAGE
FOR THE USE OF HOSPITAL BED MONITORING TECHNOLOGY.

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

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

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

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

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22 WHEREAS, in the same pilot project, the Hawaii Employer-
23 Union Health Benefits Trust Fund also found an 18.5 percent
24 reduction in intensive care unit transfers and a forty-one
25 percent reduction in fall rates on the medical surgical ward;
26 and

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28 WHEREAS, the medical-surgical units and nursing stations of
29 a typical acute care hospital are where most patients receive
30 non-critical care, generally involving regularly scheduled
31 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
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4 WHEREAS, although rapid response teams are being promoted
5 as a solution to address acute clinical events, there are no
6 systems focused on the medical-surgical wards of acute care
7 hospitals, where nearly seventy-five percent of patients
8 typically receive care, to identify and track patients in
9 distress; and
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11 WHEREAS, technology solutions have been advocated to
12 augment patient safety on the medical-surgical wards of acute
13 care hospitals; and
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15 WHEREAS, hospital bed monitoring technology, such as the
16 automated early alert system called the LIFE BED Intelligent
17 Medical Vigilance System or LIFE BED, identifies at-risk patients
18 with an invisible, non-contact device that provides accurate and
19 continuous observations of heart and respiratory rates - the two
20 most critical vital signs - while the patient is in bed, and
21 notifies nursing staff immediately upon detecting a life-
22 threatening condition; and
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24 WHEREAS, hospital bed monitoring technology also has the
25 capability to detect a patient's unauthorized bed exit, a
26 leading cause of injurious and expensive patient falls; and
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28 WHEREAS, hospital bed monitoring technology has been
29 developed, tested, and validated in clinical settings and
30 certain systems have received United States Food and Drug
31 Administration authorization specifically for medical-surgical
32 applications in acute care hospitals; and
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34 WHEREAS, hospital bed monitoring technology can provide
35 non-contact physiological measurements, eliminating the need for
36 cumbersome direct patient connections, such as electrodes,
37 cuffs, or cannulae, immediately notifying nursing personnel of
38 important information for at-risk patients, which allows
39 proactive responses, before an unexpected event becomes serious
40 or fatal; and
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42 WHEREAS, hospital bed monitoring technology enables more
43 efficient use of resources and staff, permitting nursing staff



1 to be aware of, and respond to, precipitous patient
2 deterioration; and

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4 WHEREAS, as a virtual additional set of eyes, hospital bed
5 monitoring technology monitors a patient constantly and calls
6 the nurses for help only if the patient is at serious risk; and

7 WHEREAS, this critical capability may enable hospital bed
8 monitoring technology to become a standard of care for medical-
9 surgical units in acute care hospitals; and

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11 WHEREAS, because of the absence of health insurance coverage
12 for the use of certain forms of hospital bed monitoring
13 technology, many hospitals may be reluctant to provide these
14 systems to their patients; and

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

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26 WHEREAS, section 23-51, Hawaii Revised Statutes, further
27 provides that "[t]he concurrent resolutions shall designate a
28 specific legislative bill that:

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30 (1) Has been introduced in the legislature; and

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32 (2) Includes, at a minimum, information identifying the:

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34 (A) Specific health service, disease, or provider
35 that would be covered;

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37 (B) Extent of the coverage;

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39 (C) Target groups that would be covered;

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41 (D) Limits on utilization, if any; and

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43 (E) Standards of care.

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1 For purposes of this part, mandated health insurance coverage
2 shall not include mandated optionals"; and

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

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9 WHEREAS, H.B. No. 854 (2011) mandates coverage of the use
10 of the LIFE BED Intelligent Medical Vigilance System for all
11 policies and contracts, hospital and medical service plan
12 contracts, medical service corporation contracts, and health
13 maintenance organization plans and contracts issued on or after
14 December 31, 2011; and

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16 WHEREAS, notwithstanding the specificity of H.B. No. 854
17 (2011), the Legislature believes that mandatory health insurance
18 coverage for the use of hospital bed monitoring technology will
19 substantially reduce illnesses and injuries and assist in the
20 maintenance of good health for the people of this State; now,
21 therefore,

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23 BE IT RESOLVED by the Senate of the Twenty-sixth
24 Legislature of the State of Hawaii, Regular Session of 2011, the
25 House of Representatives concurring, that the Auditor is
26 requested to conduct an impact assessment report, pursuant to
27 sections 23-51 and 23-52, Hawaii Revised Statutes, of the social
28 and financial impacts of mandating coverage of the use of
29 hospital bed monitoring technology for all policies and
30 contracts, hospital and medical service plan contracts, medical
31 service corporation contracts, and health maintenance
32 organization plans and contracts issued on or after December 31,
33 2011; and

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35 BE IT FURTHER RESOLVED that the Auditor is requested to
36 submit findings and recommendations to the Legislature,
37 including any necessary implementing legislation, no later than
38 twenty days prior to the convening of the Regular Session of
39 2012; and

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41 BE IT FURTHER RESOLVED that certified copies of this
42 Concurrent Resolution be transmitted to the Auditor and to the
43 Insurance Commissioner, who in turn is requested to transmit



- 1 copies to each insurer in the State that issues health insurance
- 2 policies.
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