SB 483, An Act Promoting Patient Safety And Access To Provider Information By Extending The State Physician Profile To Certain Other Health Care Providers

The Connecticut Hospital Association (CHA) appreciates this opportunity to present testimony concerning SB 483, An Act Promoting Patient Safety And Access To Provider Information By Extending The State Physician Profile To Certain Other Health Care Providers. The bill, as constructed, contains some concerning elements that we wish to bring to your attention.

The current physician profile law requires a physician to report the names of hospitals and nursing homes that have granted him or her staff privileges. The change in SB 483 would extend this reporting to a much broader set of healthcare providers. Unfortunately, that extension would cause significant confusion. The federal regulations and accreditation standards relating to the process for granting medical staff privileges are very specific, and highly developed. These processes do not contemplate the addition of vast categories of non-physicians in the manner set forth in SB 483. The likely result of SB 483 would be improper reporting and corresponding confusion in reporting that would render the profiles incorrect and misleading.

To remedy this, we request that you leave subpart (b)(8) as is, and not amend it, leaving it only applicable to physicians. (This treatment is consistent with the approach taken for subpart (b)(9), which would still apply only to physicians.)

Subpart (b)(14) and subsection (c) raise significant concerns because it is unclear whether they refer only to healthcare providers against whom a claim is made personally, and could be misinterpreted to apply to providers who were involved in an untoward event or claim situation, but who would not be named defendants against whom a verdict or award would enter. It is essential that this confusion be removed from the bill. Otherwise, the integrity of the profile system, as well as the newly activated closed claims reporting system, will be damaged substantially. We recommend the following language to resolve this ambiguity:

(b)(14) For individuals who have been specifically named as defendants or in the case of arbitration as respondents, [T]o the extent available, [and] consistent with the provisions of subsection (c) of this section, all [medical] professional court judgments and all [medical] professional malpractice arbitration awards against the [physician] health care provider in which a payment was awarded to a complaining party during the last ten years, and all settlements of [medical] professional malpractice claims against the [physician] health care provider in which a payment was made to a complaining party within the last ten years;

Thank you for your consideration of our position.

For additional information, contact CHA Government Relations at (203) 294-7310.