



House of Representatives

General Assembly

File No. 332

February Session, 2024

House Bill No. 5424

House of Representatives, April 8, 2024

The Committee on Public Health reported through REP. MCCARTHY VAHEY of the 133rd Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

AN ACT PROHIBITING ADVERSE ACTIONS AGAINST HEALTH CARE PROVIDERS FOR PROVIDING CERTAIN HEALTH CARE SERVICES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective July 1, 2024*) As used in this section and
2 sections 2 and 3 of this act:

3 (1) "Gender-affirming health care services" means all medical care
4 relating to the treatment of (A) gender dysphoria, as set forth in the most
5 recent edition of the American Psychiatric Association's "Diagnostic and
6 Statistical Manual of Mental Disorders", and (B) gender incongruence,
7 as defined in the most recent revision of the "International Statistical
8 Classification of Diseases and Related Health Problems";

9 (2) "Health care entity" means an entity that supervises, controls,
10 grants privileges to, directs the practice of or directly, or indirectly,
11 restricts the practice of a health care provider;

12 (3) "Health care provider" means a person who (A) provides health

13 care services, (B) is licensed, certified or registered pursuant to title 20
14 of the general statutes, and (C) is employed by or acting on behalf of a
15 health care entity;

16 (4) "Medically accurate and appropriate information and counseling"
17 means information and counseling that is (A) supported by the weight
18 of current scientific evidence, (B) derived from research using accepted
19 scientific methods, (C) consistent with generally recognized scientific
20 theory, (D) published in peer-reviewed journals, as appropriate, and (E)
21 recognized as accurate, complete, objective and in accordance with the
22 accepted standard of care by professional organizations and agencies
23 with expertise in the relevant field; and

24 (5) "Reproductive health care services" means all medical, surgical,
25 counseling or referral services relating to the human reproductive
26 system, including, but not limited to, services relating to sexual health,
27 pregnancy, contraception or the termination of a pregnancy.

28 Sec. 2. (NEW) (*Effective July 1, 2024*) (a) Except as provided in
29 subsection (b) of this section, if a health care provider is acting in good
30 faith, within the health care provider's scope of practice, education,
31 training and experience, including the health care provider's specialty
32 areas of practice and board certification, and within the accepted
33 standard of care, a health care entity shall not limit the health care
34 provider's provision of the following with regard to reproductive health
35 care services and gender-affirming health care services:

36 (1) Comprehensive medically accurate and appropriate information
37 and counseling that conforms to the accepted standard of care to an
38 individual patient regarding that patient's health status, including, but
39 not limited to, diagnosis, prognosis, recommended treatment, treatment
40 alternatives and any potential risks to the patient's health or life; and

41 (2) Comprehensive medically accurate and appropriate information
42 and counseling about available and relevant services and resources in
43 the community and how to access such services and resources to obtain
44 health care of the patient's choosing.

45 (b) Nothing in subsection (a) of this section shall be construed to
46 prohibit a health care entity that employs a health care provider from
47 performing relevant peer review of the health care provider, or from
48 requiring such health care provider to:

49 (1) Comply with preferred provider network or utilization review
50 requirements of any program or entity authorized by state or federal
51 law to provide insurance coverage for health care services to an enrollee;
52 or

53 (2) Meet established health care quality and patient safety guidelines
54 or rules.

55 (c) A health care entity shall not discharge, demote, suspend,
56 discipline or otherwise discriminate against a health care provider
57 solely for providing information or counseling as described in
58 subsection (a) of this section.

59 Sec. 3. (NEW) (*Effective July 1, 2024*) (a) Except as provided in
60 subsection (b) of this section, if a health care provider is acting in good
61 faith, within the health care provider's scope of practice, education,
62 training and experience and within the accepted standard of care, a
63 health care entity with an emergency department may not prohibit the
64 health care provider from providing any reproductive health care
65 service related to complications of pregnancy, including, but not limited
66 to, services related to miscarriage management and treatment for
67 ectopic pregnancies, (1) if the failure to provide such service would
68 violate the accepted standard of care, or (2) in cases in which there is a
69 serious risk to a patient's life or health.

70 (b) Nothing in subsection (a) of this section shall be construed to
71 prohibit a health care entity from limiting a health care provider's
72 practice for purposes of:

73 (1) Complying with preferred provider network or utilization review
74 requirements of any program or entity authorized by state or federal
75 law to provide insurance coverage for health care services to an enrollee;

76 or

77 (2) Ensuring quality of care and patient safety, including, but not
78 limited to, when quality control or patient safety issues are identified
79 pursuant to peer review.

80 (c) A health care entity may not discharge, demote, suspend, or
81 otherwise discriminate against a health care provider for providing a
82 reproductive health care service pursuant to the provisions of this
83 section.

84 (d) Nothing in this section shall be construed to alter a health care
85 entity's obligations under applicable federal laws and regulations,
86 including, 42 USC 1395dd, as amended from time to time.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2024	New section
Sec. 2	July 1, 2024	New section
Sec. 3	July 1, 2024	New section

PH Joint Favorable

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note**State Impact:** None**Municipal Impact:** None**Explanation**

The bill, which prevents health care entities from taking adverse actions against providers of certain reproductive and gender-affirming health care services, does not result in a fiscal impact to the state or municipalities.

The Out Years**State Impact:** None**Municipal Impact:** None

OLR Bill Analysis**HB 5424*****AN ACT PROHIBITING ADVERSE ACTIONS AGAINST HEALTH CARE PROVIDERS FOR PROVIDING CERTAIN HEALTH CARE SERVICES.*****SUMMARY**

This bill prohibits health care entities, under certain conditions and limitations, from doing the following:

1. limiting a health care provider's provision of comprehensive medically accurate information and counseling to patients on their health status regarding reproductive or gender-affirming health care services, or information about available and relevant community services and resources for these services;
2. prohibiting a health care provider, in an entity with an emergency department, from providing reproductive health care services related to pregnancy complications (e.g., miscarriage management and treatment for ectopic pregnancies), if failing to provide the service would violate the standard of care or present a serious risk to the patient; or
3. firing, demoting, suspending, or otherwise discriminating against a health care provider for providing this information or these services.

For these prohibitions to apply, the providers must be acting (1) in good faith; (2) within their professional scope of practice, education, training, and experience; and (3) within the accepted standard of care.

Under the bill, health care entities may still perform relevant peer review of their providers or require them to comply with (1) preferred

provider network or utilization review requirements for insurance purposes or (2) health care quality and patient safety guidelines.

Lastly, the bill specifies that it does not change health care entities' obligations under applicable federal laws and regulations, including the Emergency Medical Treatment and Labor Act (EMTALA, see BACKGROUND).

EFFECTIVE DATE: July 1, 2024

LIMITATIONS ON HEALTH CARE PROVIDERS

The bill prohibits health care entities from limiting health care providers' provision of comprehensive, medically accurate and appropriate information (e.g., information supported by current scientific evidence and published in peer-reviewed journals) to patients about:

1. their health status related to gender-affirming or reproductive health care services, including diagnosis, prognosis, treatment recommendations and alternatives, and any potential risk to their life or health, and
2. available and relevant community services and resources and how to access them to obtain the care they choose.

Under the bill, health care entities may still perform relevant peer reviews of health care providers they employ or require these providers to (1) comply with preferred provider network or utilization review requirements of any program or entity authorized by state or federal law to provide health insurance coverage to enrollees or (2) meet established health care quality and patient safety guidelines or rules.

The bill defines "reproductive health care services" as all medical, surgical, counseling, or referral services related to the reproductive system, including sexual health, pregnancy, contraception, and pregnancy termination.

"Gender-affirming health care services" include all medical care to

treat (1) gender dysphoria, as defined in the most recent edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (i.e., the DSM-V), and (2) gender incongruence, as defined in the most recent revision of the International Statistical Classification of Diseases and Related Health Problems.

EMERGENCY DEPARTMENTS

The bill prohibits health care entities with emergency departments from banning health care providers from providing reproductive health care services related to pregnancy complications, including miscarriage management and treatment for ectopic pregnancies, if (1) failing to provide the service would violate accepted standards of care or (2) there is a serious risk to the patient's life or health.

Under the bill, health care entities may still limit a provider's practice for the following purposes:

1. complying with preferred provider network or utilization review requirements for state- or federally-authorized health insurers or
2. ensuring quality of care and patient safety, including when a peer review identifies quality control or patient safety issues.

BACKGROUND

EMTALA

EMTALA requires every hospital with an emergency department that participates in Medicare to screen and treat patients with emergency medical conditions or arrange for their appropriate transfer if they are unable to do so. They must do this regardless of a person's income, insurance status, or other factors (e.g., immigration status, race, or religion). Hospitals and providers who fail to comply are subject to civil penalties and termination from Medicare or Medicaid (42 U.S.C. § 1395dd and 42 C.F.R. § 1003.500).

The law applies to emergency medical conditions that, if left untreated, could reasonably be expected to threaten the person's life or impose severe and long-lasting health effects. This includes pregnancy-

related conditions, such as miscarriage complications, ectopic pregnancy, or preeclampsia, which may require medically necessary abortions.

The federal Department of Health and Human Services, in compliance with a federal executive order, issued guidance in 2022 (QSO-22-22-Hospitals) and a comprehensive plan in 2024 to (1) specify that EMTALA requirements preempt state laws prohibiting or restricting access to abortion care and (2) educate patients and providers on their rights and obligations for emergency medical care.

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 28 Nay 9 (03/20/2024)