

IN THE SENATE

SENATE BILL NO. 1355, As Amended in the House

BY JUDICIARY AND RULES COMMITTEE

AN ACT

1 RELATING TO STANDARD OF MEDICAL CARE; AMENDING CHAPTER 10, TITLE 6, IDAHO  
2 CODE, BY THE ADDITION OF A NEW SECTION 6-1014, IDAHO CODE, TO PROVIDE  
3 THAT METRICS ESTABLISHED BY THE FEDERAL GOVERNMENT UNDER THE AFFORDABLE  
4 CARE ACT AND BY INSURERS DO NOT ESTABLISH THE STANDARD OF MEDICAL CARE IN  
5 IDAHO AND TO DEFINE TERMS.  
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7 Be It Enacted by the Legislature of the State of Idaho:

8 SECTION 1. That Chapter 10, Title 6, Idaho Code, be, and the same is  
9 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
10 ignated as Section 6-1014, Idaho Code, and to read as follows:

11 6-1014. PATIENT PROTECTION AND AFFORDABLE CARE ACT AND OTHER MET-  
12 RICS NOT USED TO ESTABLISH COMMUNITY STANDARD. (1) In determining whether  
13 a health care practitioner has met a standard of care under this chapter or  
14 under any other Idaho statute, no criteria, guideline, standard or other  
15 metric established or imposed by the patient protection and affordable care  
16 act (PPACA), P.L. 111-148, established or imposed by or pursuant to any other  
17 law or regulation of the United States or any entity or agency thereof and  
18 used for the purpose of determining reimbursement or a rate of reimbursement  
19 for the care provided, or established or imposed by another state or by a  
20 third party payor, shall be used as a basis for establishing an applicable  
21 community standard of care. The fact that a health care practitioner has  
22 met or failed to meet any such criteria, guideline, standard or other metric  
23 shall not be admissible or considered by a finder of fact in any proceeding  
24 or other action concerning a determination of liability of a health care  
25 practitioner to a patient or other party seeking damages on account of an  
26 injury to a patient or in any proceeding or other action of a state licensing  
27 or regulatory authority imposing professional discipline for failure of a  
28 health care practitioner to meet the applicable standard of care.

29 (2) Notwithstanding the provisions of subsection (1) of this section,  
30 nothing in this section shall prevent the consideration of facts that estab-  
31 lish compliance or lack of compliance with a community standard of care, so  
32 long as the facts considered do not include reference to any criteria, guide-  
33 line, standard or other metric imposed by the PPACA, established or imposed  
34 by or pursuant to any other law or regulation of the United States or any en-  
35 tity or agency thereof and used for the purpose of determining reimbursement  
36 or a rate of reimbursement for the care provided, or established or imposed  
37 by another state or by a third party payor.

38 (3) For the purposes of this section, the following definitions shall  
39 apply:

40 (a) "Health care practitioner" means a person licensed, registered or  
41 otherwise authorized under title 54, Idaho Code, to provide services

1 relating to the prevention, cure or treatment of illness, injury or dis-  
2 ease.

3 (b) "Third party payor" means any entity subject to the jurisdiction  
4 of the department of insurance under title 41, Idaho Code, and also  
5 includes any federal, state or local government entity and its contrac-  
6 tors making payments or administering any plan or program paying for  
7 health care services.