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Connecticut Expands Transparency Reporting Obligation to APRNs

Recently, Governor Dannel Malloy of Connecticut signed into law Public Act 14-12 (the “Act”). The Act was notable and drew considerable media attention because it allows for independent practice by advanced practice registered nurses (“APRNs”) in Connecticut provided that certain prerequisites are satisfied. Lost to many in the noise surrounding the independence practice issue was another significant change to Connecticut law which will likely have repercussions both in Connecticut and nationwide. Specifically, the Act expands upon the requirements applicable to life science and medical products companies under the federal Physician Payment Sunshine Act and imposes, for the first time, transparency reporting obligations with respect to APRNs.

The Act requires manufacturers of drugs, devices, biological products or medical supplies that are reimbursable under Medicare, Medicaid or the Children’s Health Insurance Program to report on a quarterly basis payments or other transfers of value to APRNs practicing in Connecticut. The Act requires these manufacturers to report, with respect to APRNs, the same information as required with respect to physicians by the Physician Payment Sunshine Act. Manufacturers must submit their first report no later than July 1, 2015 to the State of Connecticut Department of Consumer Protection (“DCP”). DCP may then make the information reported available to the public in a manner similar to how CMS plans to make publically available information reported to it pursuant to the Physician Payment Sunshine Act. Entities that fail to report the required information in a timely manner may be subject to fines and penalties.

The Act leaves many questions regarding how manufacturers will comply with the reporting obligations and we hope and anticipate that DCP will provide guidance in the future. For example, the Act does not incorporate the numerous exceptions to reporting present in the Physician Payment Sunshine Act, and thus manufacturers may be required to report payments made to APRNs but not similar payments made to physicians. Further, the Act does not incorporate the Physician Payment Sunshine Act’s 10% revenue threshold for the law to apply, meaning certain manufacturers will need to report payments to APRNs practicing in Connecticut but not report payments to physicians. In addition, the Act does not include an exception for hospitals or hospital-based pharmacies that manufacture



products solely for their own use, nor does it include an exception for payments made to APRNs who may be employed by the manufacturer. These are only a few of dozens of inconsistencies between the Act and the Physician Payment Sunshine Act that manufacturers will need to address. Given these discrepancies between the reporting requirements under Connecticut law and the reporting requirements under the Physician Payment Sunshine Act, manufacturers may consider implementing a policy that prohibits conferring any remuneration to APRNs in Connecticut.

If you have any questions regarding this Act, please contact a member of Shipman & Goodwin's [Health Law Practice Group](#).

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