Amend SB 872 on third reading by adding appropriately numbered sections to the bill to read as follows and renumbering the other sections of the bill accordingly:

SECTION \_\_\_. Subtitle D, Title 2, Health and Safety Code, is amended by adding Chapter 96 to read as follows:

### CHAPTER 96. HEALTH CARE ASSOCIATED INFECTION RATE

#### AND PROCESS MEASURE REPORTING

# SUBCHAPTER A. GENERAL PROVISIONS

# Sec. 96.001. DEFINITIONS. (a) In this chapter:

- (1) "Advisory panel" means the Advisory Panel on Health Care Associated Infections.
- (2) "Commissioner" means the commissioner of state health services.
- (3) "Department" means the Department of State Health Services.
- (4) "Health care associated infection" means a localized or symptomatic condition resulting from an adverse reaction to an infectious agent or its toxins to which a patient is exposed in the course of health care delivery.
- (5) "Health care facility" means a hospital licensed under Chapter 241 or an ambulatory surgical center licensed under Chapter 243.
- (6) "Infection rate" means the number of health care associated infections at a health care facility divided by a numerical measure over time of the population at risk for contracting the infection.
- (7) "Process measure" means a measure of a health care facility's compliance with recommended infection control practices.
- (b) The advisory panel may modify or define the term "infection rate" as necessary to accomplish the purposes of this chapter.
- Sec. 96.002. APPLICABILITY OF OTHER LAW. Chapter 2110,

  Government Code, does not apply to the advisory panel created under

  Subchapter B.
- Sec. 96.003. EXPIRATION. This chapter expires January 1, 2007.

# [Sections 96.004-96.050 reserved for expansion]

### SUBCHAPTER B. ADVISORY PANEL ON

# HEALTH CARE ASSOCIATED INFECTIONS

- Sec. 96.051. ESTABLISHMENT. The commissioner shall establish the Advisory Panel on Health Care Associated Infections within the regulatory licensing unit of the health care quality section of the department.
- Sec. 96.052. MEMBERSHIP. The advisory panel is composed of 14 members as follows:
  - (1) two infection control practitioner members who:
- (A) are certified by the Certification Board of Infection Control and Epidemiology; and
- (B) are practicing in hospitals in this state, at least one of which must be a rural hospital;
  - (2) two infection control practitioner members who:
- (A) are certified by the Certification Board of Infection Control and Epidemiology; and
- (B) are nurses licensed to engage in professional nursing under Chapter 301, Occupations Code;
- (3) three board-certified or board-eligible physician members who:
- (A) are licensed to practice medicine in this state under Chapter 155, Occupations Code, at least two of whom have active medical staff privileges at a hospital in this state;
- (B) are active members of the Society for Healthcare Epidemiology of America; and
- (C) have demonstrated expertise in infection control in health care facilities;
- (4) one member who is a chief executive officer of a hospital licensed under Chapter 241;
- (5) one member who is a chief executive officer of an ambulatory surgical center licensed under Chapter 243;
  - (6) three members who:
- (A) are department employees representing the department in epidemiology and the licensing of hospitals or ambulatory surgical centers; and
  - (B) serve as nonvoting members of the advisory

# panel; and

- (7) two members who represent the public as consumers.
- Sec. 96.053. MEMBER ELIGIBILITY. A person may not be a member of the advisory panel if the person is required to register as a lobbyist under Chapter 305, Government Code, because of the person's activities for compensation on behalf of a profession related to health care.
- Sec. 96.054. OFFICERS. The members of the advisory panel shall elect a presiding officer and an assistant presiding officer from among the members.
- Sec. 96.055. COMPENSATION; EXPENSES. (a) Except as provided by Subsection (b), a member of the advisory panel is not entitled to compensation for service on the advisory panel and is not entitled to reimbursement for travel expenses.
- (b) A member who is a representative of a state agency shall be reimbursed for travel expenses incurred while conducting the business of the advisory panel from the funds of the agency the person represents in accordance with the General Appropriations Act.
- Sec. 96.056. VACANCY. A vacancy on the advisory panel shall be filled by the commissioner.
- Sec. 96.057. ABOLISHED. The Advisory Panel on Health Care
  Associated Infections is abolished January 1, 2007.

[Sections 96.058-96.100 reserved for expansion]

SUBCHAPTER C. POWERS AND DUTIES OF ADVISORY PANEL

- Sec. 96.101. GENERAL POWERS AND DUTIES. (a) The advisory panel, using nationally accepted measures, shall study and recommend definitions and methodologies for collecting and reporting evidence-based data on:
  - (1) infection rates;
  - (2) process measures; or
  - (3) both infection rates and process measures.
- (b) In developing the recommendations described in Subsection (a), the advisory panel shall consider:
- (1) adjusting the reported infection rates to account for the differences in patient populations and for factors outside the control of the health care facility;

- (2) standardizing data collection methodology and reporting;
- (3) reviewing data collection and reporting systems of other entities related to infection rates, such as the National Nosocomial Infections Surveillance System of the federal Centers for Disease Control and Prevention;
- (4) reviewing data collection and reporting systems of other entities related to process measures, such as the Joint Commission on Accreditation of Healthcare Organizations or the Centers for Medicare and Medicaid Services;
- (5) maximizing the efficient use of the resources required for health care facilities to conduct required surveillance and reporting;
- (6) recognizing the potential unintended consequences of public reporting that is poorly designed or executed and that may diminish the overall quality of this state's health care or mislead or fail to protect health care consumers who use the data; and
- (7) providing additional benefits to health care consumers.
- Sec. 96.102. REPORT TO LEGISLATURE. (a) Not later than November 1, 2006, the commissioner shall file a report with the presiding officer of each house of the legislature on the advisory panel's recommendations for legislation regarding the collection and reporting of infection rates, process measures, or both.
- (b) The report shall include a recommendation that the legislation set September 1, 2007, as the date for hospitals and ambulatory surgical centers to comply with the legislation.
- (c) Nothing shall preclude the reporting of deaths from infection by hospitals and niche hospitals as included in this legislation.

SECTION \_\_\_. As soon as practicable after the effective date of this Act, the commissioner of the Department of State Health Services shall appoint members to the Advisory Panel on Health Care Associated Infections as required by Chapter 96, Health and Safety Code, as added by this Act.