1	AN ACT
2	relating to the pilot program for reporting of
3	methicillin-resistant Staphylococcus aureus infections.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Section 81.0445, Health and Safety Code, is
6	amended to read as follows:
7	Sec. 81.0445. MRSA REPORTING PROCEDURES PILOT PROGRAM. (a)
8	The executive commissioner of the Health and Human Services
9	Commission by rule shall develop and the department shall establish
10	a pilot program to research and implement procedures for reporting
11	cases of methicillin-resistant Staphylococcus aureus (MRSA)
12	infection. A health authority shall not be required to participate
13	in the pilot program.
14	(b) <u>A health authority that participates in the pilot</u>
15	program shall administer the program locally and report to the
16	department as required by this section. [The department shall
17	select to administer the program a health authority that:
18	[ <del>(1) demonstrates an interest in hosting the program;</del>
19	and
20	[ <del>(2) possesses adequate resources to administer the</del>
21	<pre>program successfully.</pre>
22	(c) The pilot program must:
23	(1) require all clinical laboratories, including
24	hospital laboratories and clinical reference laboratories, within

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the area served by <u>each</u> [the] health authority <u>participating in the</u> <u>pilot program</u> to report all <u>positive</u> cases of methicillin-resistant Staphylococcus aureus <u>infection</u>, <u>including infections contracted</u> <u>in a community setting</u>, <u>a health care facility</u>, <u>and any other</u> <u>setting</u>, to the <u>applicable health authority using automated and</u> <u>secure electronic data transmission</u> [<del>pilot program administrator</del>]; (2) track the prevalence of methicillin-resistant

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9 (3) <u>evaluate</u> [<del>study</del>] the cost and feasibility of 10 expanding the list of reportable diseases established under this 11 chapter to include methicillin-resistant Staphylococcus aureus 12 infections;

Staphylococcus aureus infections;

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13 (4) develop a methodology for the electronic <u>transfer</u> 14 [exchange] of information regarding [the occurrence of] 15 methicillin-resistant Staphylococcus aureus <u>infections</u> within the 16 area served by <u>each</u> [the] health authority <u>participating in the</u> 17 pilot program;

18 (5) collect data and analyze findings regarding the 19 <u>prevalence</u> [sources and possible prevention] of 20 methicillin-resistant Staphylococcus aureus <u>infections</u>;

(6) provide for the reporting to the public by the department of information regarding methicillin-resistant Staphylococcus aureus <u>infections</u>;

24 (7) compile and make available to the public a summary
25 <u>report</u>[<del>, by location, of the infections reported</del>]; and

26 (8) make recommendations to the department regarding27 Subdivisions (1) through (7).

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Not later than September 1, 2011 [2009], the department, 1 (d) in consultation with <u>each</u> [the] health authority participating in 2 3 [administering] the pilot program, shall submit to the legislature a report concerning the effectiveness of the pilot program [in 4 tracking and reducing the number of methicillin-resistant 5 Staphylococcus aureus infections within the area served 6 by the 7 health authority].

8 (d-1) A health care facility located in an area served by a health authority participating in the pilot program is not required 9 to report an incident of methicillin-resistant Staphylococcus 10 aureus infection to the Department of State Health Services under 11 12 Section 98.103, as added by Chapter 359 (S.B. 288), Acts of the 80th Legislature, Regular Session, 2007. The health authority shall 13 report each incident subject to Section 98.103 to the Department of 14 State Health Services. 15

16 (e) This section expires, and the pilot program is 17 abolished, September 1, <u>2011</u> [<del>2009</del>].

18 SECTION 2. Section 98.103, Health and Safety Code, as added 19 by Chapter 359 (S.B. 288), Acts of the 80th Legislature, Regular 20 Session, 2007, is amended by adding Subsection (e) to read as 21 follows:

(e) Effective September 1, 2009, this section does not apply
to the reporting of methicillin-resistant Staphylococcus aureus
infections by a health care facility located in an area served by a
health authority participating in the pilot program established
under Section 81.0445. This subsection expires September 1, 2011.
SECTION 3. (a) Except as provided by Subsection (b) of this

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section, this Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect on the 91st day after the last day of the legislative session.

7 (b) The change in law made by this Act to Section8 81.0445(d), Health and Safety Code, takes effect September 1, 2009.

President of the Senate

Speaker of the House

I certify that H.B. No. 1362 was passed by the House on May 4, 2009, by the following vote: Yeas 144, Nays 0, 1 present, not voting; and that the House concurred in Senate amendments to H.B. No. 1362 on May 23, 2009, by the following vote: Yeas 139, Nays 5, 1 present, not voting.

## Chief Clerk of the House

I certify that H.B. No. 1362 was passed by the Senate, with amendments, on May 21, 2009, by the following vote: Yeas 31, Nays O.

Secretary of the Senate

APPROVED: \_\_\_\_\_

Date

Governor