

1-1 By: Nelson S.B. No. 620
1-2 (In the Senate - Filed February 11, 2011; February 17, 2011,
1-3 read first time and referred to Committee on Health and Human
1-4 Services; March 31, 2011, reported adversely, with favorable
1-5 Committee Substitute by the following vote: Yeas 9, Nays 0;
1-6 March 31, 2011, sent to printer.)

1-7 COMMITTEE SUBSTITUTE FOR S.B. No. 620 By: Nelson

1-8 A BILL TO BE ENTITLED
1-9 AN ACT

1-10 relating to the reporting of health care-associated infections and
1-11 preventable adverse events.

1-12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-13 SECTION 1. Subsection (c), Section 98.102, Health and
1-14 Safety Code, as added by Chapter 359 (S.B. 288), Acts of the 80th
1-15 Legislature, Regular Session, 2007, is amended to read as follows:

1-16 (c) The data reported by health care facilities to the
1-17 department must contain sufficient patient identifying information
1-18 to:

1-19 (1) avoid duplicate submission of records;

1-20 (2) allow the department to verify the accuracy and
1-21 completeness of the data reported; and

1-22 (3) for data reported under Section 98.103 [~~or~~
1-23 ~~98.104~~], allow the department to risk adjust the facilities'
1-24 infection rates.

1-25 SECTION 2. Section 98.103, Health and Safety Code, as added
1-26 by Chapter 359 (S.B. 288), Acts of the 80th Legislature, Regular
1-27 Session, 2007, is amended by amending Subsection (b) and adding
1-28 Subsection (d-1) to read as follows:

1-29 (b) A pediatric and adolescent hospital shall report the
1-30 incidence of surgical site infections, including the causative
1-31 pathogen if the infection is laboratory-confirmed, occurring in the
1-32 following procedures to the department:

1-33 (1) cardiac procedures, excluding thoracic cardiac
1-34 procedures;

1-35 (2) ventricular [~~ventriculoperitoneal~~] shunt
1-36 procedures; and

1-37 (3) spinal surgery with instrumentation.

1-38 (d-1) The executive commissioner by rule may designate the
1-39 federal Centers for Disease Control and Prevention's National
1-40 Healthcare Safety Network, or its successor, to receive reports of
1-41 health care-associated infections from health care facilities on
1-42 behalf of the department. A health care facility must file a report
1-43 required in accordance with a designation made under this
1-44 subsection in accordance with the National Healthcare Safety
1-45 Network's definitions, methods, requirements, and procedures. A
1-46 health care facility shall authorize the department to have access
1-47 to facility-specific data contained in a report filed with the
1-48 National Healthcare Safety Network in accordance with a designation
1-49 made under this subsection.

1-50 SECTION 3. Section 98.1045, Health and Safety Code, as
1-51 added by Chapter 359 (S.B. 288), Acts of the 80th Legislature,
1-52 Regular Session, 2007, is amended by adding Subsection (c) to read
1-53 as follows:

1-54 (c) The executive commissioner by rule may designate an
1-55 agency of the United States Department of Health and Human Services
1-56 to receive reports of preventable adverse events by health care
1-57 facilities on behalf of the department. A health care facility
1-58 shall authorize the department to have access to facility-specific
1-59 data contained in a report made in accordance with a designation
1-60 made under this subsection.

1-61 SECTION 4. Section 98.105, Health and Safety Code, as added
1-62 by Chapter 359 (S.B. 288), Acts of the 80th Legislature, Regular
1-63 Session, 2007, is amended to read as follows:

2-1 Sec. 98.105. REPORTING SYSTEM MODIFICATIONS. Based on the
 2-2 recommendations of the advisory panel, the executive commissioner
 2-3 by rule may modify in accordance with this chapter the list of
 2-4 procedures that are reportable under Section 98.103 [~~or~~
 2-5 ~~98.104~~]. The modifications must be based on changes in reporting
 2-6 guidelines and in definitions established by the federal Centers
 2-7 for Disease Control and Prevention.

2-8 SECTION 5. Subsections (a), (b), and (d), Section 98.106,
 2-9 Health and Safety Code, as added by Chapter 359 (S.B. 288), Acts of
 2-10 the 80th Legislature, Regular Session, 2007, are amended to read as
 2-11 follows:

2-12 (a) The department shall compile and make available to the
 2-13 public a summary, by health care facility, of:

2-14 (1) the infections reported by facilities under
 2-15 Section [Sections] 98.103 [and 98.104]; and

2-16 (2) the preventable adverse events reported by
 2-17 facilities under Section 98.1045.

2-18 (b) Information included in the departmental summary with
 2-19 respect to infections reported by facilities under Section
 2-20 [Sections] 98.103 [and 98.104] must be risk adjusted and include a
 2-21 comparison of the risk-adjusted infection rates for each health
 2-22 care facility in this state that is required to submit a report
 2-23 under Section [Sections] 98.103 [and 98.104].

2-24 (d) The department shall publish the departmental summary
 2-25 at least annually and may publish the summary more frequently as the
 2-26 department considers appropriate. Data made available to the
 2-27 public must include aggregate data covering a period of at least a
 2-28 full calendar quarter.

2-29 SECTION 6. Section 98.108, Health and Safety Code, as added
 2-30 by Chapter 359 (S.B. 288), Acts of the 80th Legislature, Regular
 2-31 Session, 2007, is amended to read as follows:

2-32 Sec. 98.108. FREQUENCY OF REPORTING. (a) In consultation
 2-33 with the advisory panel, the executive commissioner by rule shall
 2-34 establish the frequency of reporting by health care facilities
 2-35 required under Sections 98.103[~~, 98.104,~~] and 98.1045.

2-36 (b) Except as provided by Subsection (c), facilities
 2-37 [Facilities] may not be required to report more frequently than
 2-38 quarterly.

2-39 (c) The executive commissioner may adopt rules requiring
 2-40 reporting more frequently than quarterly if more frequent reporting
 2-41 is necessary to meet the requirements for participation in the
 2-42 federal Centers for Disease Control and Prevention's National
 2-43 Healthcare Safety Network.

2-44 SECTION 7. Section 98.110, Health and Safety Code, as added
 2-45 by Chapter 359 (S.B. 288), Acts of the 80th Legislature, Regular
 2-46 Session, 2007, is amended to read as follows:

2-47 Sec. 98.110. DISCLOSURE AMONG CERTAIN AGENCIES.

2-48 (a) Notwithstanding any other law, the department may disclose
 2-49 information reported by health care facilities under Section
 2-50 98.103[~~, 98.104,~~] or 98.1045 to other programs within the
 2-51 department, to the Health and Human Services Commission, [~~and~~]
 2-52 to other health and human services agencies, as defined by Section
 2-53 531.001, Government Code, and to the federal Centers for Disease
 2-54 Control and Prevention for public health research or analysis
 2-55 purposes only, provided that the research or analysis relates to
 2-56 health care-associated infections or preventable adverse events.
 2-57 The privilege and confidentiality provisions contained in this
 2-58 chapter apply to such disclosures.

2-59 (b) If the executive commissioner designates an agency of
 2-60 the United States Department of Health and Human Services to
 2-61 receive reports of health care-associated infections or
 2-62 preventable adverse events, that agency may use the information
 2-63 submitted for purposes allowed by federal law.

2-64 SECTION 8. Section 98.104, Health and Safety Code, as added
 2-65 by Chapter 359 (S.B. 288), Acts of the 80th Legislature, Regular
 2-66 Session, 2007, is repealed.

2-67 SECTION 9. This Act takes effect immediately if it receives
 2-68 a vote of two-thirds of all the members elected to each house, as
 2-69 provided by Section 39, Article III, Texas Constitution. If this

3-1 Act does not receive the vote necessary for immediate effect, this
3-2 Act takes effect September 1, 2011.

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