**BILL ANALYSIS**

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| Senate Research Center | S.B. 384 |
|  | By: Nelson |
|  | Health & Human Services |
|  | 6/3/2019 |
|  | Enrolled |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

In 2007, Texas became a leader by establishing the Texas Health Care-Associated Infections (HAIs) reporting requirements for health care facilities based on recommendations from an advisory panel composed of health care representatives and stakeholders. Subsequently, Centers for Medicare & Medicaid Services (CMS) rolled out their HAI reporting requirement for facilities wishing to receive full Medicare reimbursements. Facilities must report different infections to the state and CMS, causing confusion and inefficiency.

S.B. 384 aligns the state reporting requirements for health care-associated infections for health care facilities with those currently in place from CMS. (Original Author's/Sponsor's Statement of Intent)

S.B. 384 amends current law relating to the reporting of health care-associated infections and preventable adverse events at health care facilities.

**RULEMAKING AUTHORITY**

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission (executive commissioner) in SECTION 3 of this bill.

Rulemaking authority previously granted to the executive commissioner is rescinded in SECTION 2 (Section 98.105, Health and Human Services Commission) of this bill.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 98.103, Health and Safety Code, by amending Subsection (a) and adding Subsection (a-1), as follows:

(a) Requires a health care facility to report to the Department of State Health Services (DSHS) each health care-associated infection, including the causative pathogen if the infection is laboratory-confirmed, that occurs in the facility and that the federal Centers for Medicare and Medicaid Services requires a facility participating in the Medicare program to report through the federal Centers for Disease Control and Prevention's National Healthcare Safety Network, or its successor. Deletes existing text requiring a health care facility, other than a pediatric and adolescent hospital, to report to DSHS the incidence of surgical site infections, including the causative pathogen if the infection is laboratory-confirmed, occurring in certain listed procedures.

(a-1) Requires a health care facility to report each health care-associated infection to DSHS under this section (Reportable Infections) regardless of the facility's participation in Medicare.

SECTION 2. Repealer: Sections 98.001(10) (relating to defining "pediatric and adolescent hospital"), Health and Safety Code.

Repealers: Sections 98.103(b) (relating to the requirement that pediatric and adolescent hospitals report the incidence of surgical site infections) and (c) (relating to items a general hospital is required to report to DSHS), Health and Safety Code.

Repealer: Section 98.105 (Reporting System Modifications), Health and Safety Code.

SECTION 3. (a) Requires the executive commissioner of the Health and Human Services Commission (HHSC) to adopt rules as necessary to implement Section 98.103, Health and Safety Code, as amended by this Act, not later then January 1, 2020.

(b) Makes application of Section 98.103, Health and Safety Code, as amended by this Act, prospective to January 1, 2020.

SECTION 4. Provides that HHSC is required to implement a provision of this Act only if the legislature appropriates money specifically for that purpose. Authorizes, but does not require, HHSC, if the legislature does not appropriate money specifically for that purpose, to implement a provision of this Act using other appropriations available for that purpose.

SECTION 5. Effective date: September 1, 2019.