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| BILL ANALYSIS |

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| S.B. 384 |
| By: Nelson |
| Public Health |
| Committee Report (Unamended) |

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| **BACKGROUND AND PURPOSE** It has been noted that there may be confusion and possible inefficiencies regarding state reporting requirements for health care facilities relating to health care-associated infections and preventable adverse events at those facilities and federal reporting requirements due to facilities being required to report different types of infections at both the state and federal level. S.B. 384 seeks to promote the ongoing work to minimize health care-associated infections and protect patients and health care workers by aligning the state's reporting requirements for health care‑associated infections with the federal requirements.  |
| **CRIMINAL JUSTICE IMPACT**It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY** It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 3 of this bill. |
| **ANALYSIS** S.B. 384 amends the Health and Safety Code to replace the requirement for a health care facility, other than a pediatric and adolescent hospital, to report to the Department of State Health Services (DSHS) the incidence of surgical site infections, including the causative pathogen if the infection is laboratory-confirmed, occurring in certain specified procedures with a requirement for a health care facility to report to 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. The bill requires a health care facility to report each health care-associated infection to DSHS regardless of the facility's participation in Medicare. The bill repeals a requirement for a pediatric and adolescent hospital to report the incidence of surgical site infections and a requirement for a general hospital to report certain items to DSHS. S.B. 384 requires the executive commissioner of the Health and Human Services Commission (HHSC), not later than January 1, 2020, to adopt rules as necessary to implement the bill's provisions. The bill applies only to a report for a health care-associated infection occurring on or after January 1, 2020. The bill requires HHSC to implement a provision of the bill only if the legislature appropriates money specifically for that purpose. If the legislature does not appropriate money specifically for that purpose, HHSC may, but is not required to, implement a provision of the bill using other appropriations available for that purpose.S.B. 384 repeals the following provisions of the Health and Safety Code: * Section 98.001(10)
* Sections 98.103(b) and (c)
* Section 98.105
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| **EFFECTIVE DATE** September 1, 2019. |