

STATE OF OKLAHOMA

1st Session of the 50th Legislature (2005)

SENATE BILL 1017

By: Nichols

AS INTRODUCED

An Act relating to public health and safety; creating the Hospital Infections Disclosure Act; providing short title; defining terms; specifying certain duties of individual hospitals, Commissioner of Health and State Department of Health; requiring certain reports; requiring Commissioner of Health to appoint advisory committee; providing for membership and duties thereof; granting certain discretion to Department; specifying requirement for certain reports; providing for availability of report; prohibiting disclosure of certain information; stating legislative intent; providing penalties; providing for enforcement; amending 63 O.S. 2001, Section 1-706, which relates to hospitals; modifying grounds for suspension or revocation of certain licenses; providing for codification; and providing an effective date.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-710.1 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. This Act shall be known and may be cited as the "Hospital Infections Disclosure Act".

B. As used in the Hospital Infectious Disclosure Act:

1. "Department" means the State Department of Health;

2. "Hospital" has the same meaning as defined in Section 1-701 of Title 63 of the Oklahoma Statutes;

3. "Hospital-acquired infection" means a localized or systemic condition that:

a. results from adverse reaction to the preservation infectious agent or its toxin, and

b. was not present or incubating at the time of admission to the hospital.

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-710.2 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. Individual hospitals shall collect data on hospital-acquired infection rates for the specific clinical procedures determined by the State Department of Health by rule, including the following categories:

1. Surgical site infections;
2. Ventilator-associated pneumonia;
3. Central line-related bloodstream infections;
4. Urinary tract infections; and
5. Other categories as provided under subsection D of this

section.

B. 1. Hospitals shall submit quarterly reports on their hospital-acquired infection rates to the Department. Quarterly reports shall be submitted, in a format set forth in regulations adopted by the Department, to the Department by April 30, July 31, October 31 and January 31 of each year for the previous quarter. Data in quarterly reports must cover a period ending not earlier than one month prior to submission of the report.

2. If the hospital is a division or subsidiary of another entity that owns or operates other hospitals or related organizations, the quarterly report shall be for the specific division or subsidiary and not for the other entity.

C. 1. The Commissioner of Health shall appoint an advisory committee, including representatives from public and private hospitals, including from hospital infection control departments, direct care nursing staff, physicians, epidemiologists with expertise in hospital-acquired infections, academic researchers, consumer organizations, health insurers, health maintenance

organizations, organized labor, and purchasers of health insurance, such as employers. The advisory committee shall have majority of members representing interests other than hospitals.

2. The advisory committee shall assist the Department in the development of all aspects of the Department's methodology collecting, analyzing, and disclosing the information collected under this act, including collection methods, formatting, and methods and means for release and dissemination.

3. In developing the methodology for collecting and analyzing the infection rate data, the Department and advisory committee shall consider existing methodologies and systems for data collection, such as the Centers for Disease Control's National Nosocomial Infection Surveillance Program, or its successor; provided, the Department's discretion to adopt a methodology not be limited or restricted to any existing methodology or system. The data collection and analysis methodology shall be disclosed to the public prior to any public disclosure of hospital-acquired infection rates.

4. The Department and the advisory committee shall evaluate on a regular basis the quality and accuracy of hospital information reported under this act and the data collection, analysis, and dissemination methodologies.

D. The Department may, after consultation with the advisory committee, require hospitals to collect data on hospital-acquired infection rates in categories additional to those set forth in subsection A of this section.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-710.3 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. The State Department of Health shall annually submit to the Legislature a report summarizing the hospital quarterly reports and shall put the annual report on its website. The first annual report shall be submitted and published in 2007. The Department may issue

quarterly informational bulletins at its discretion, summarizing all or part of the information submitted in the hospital quarterly reports.

B. All reports issued by the department shall be risk adjusted.

C. The annual report shall compare the risk-adjusted hospital-acquired infection rates, collected under Section 3 of this act, of each individual hospital in the state. The Department, in consultation with the advisory committee, shall make this comparison as easy to comprehend as possible. The report shall also include an executive summary, written in plain language, that shall include, but not be limited to, a discussion of findings, conclusions, and trends concerning the overall state of hospital-acquired infections in the state, including a comparison to prior years. The report may include policy recommendations, as appropriate.

D. The Department shall publicize the report and its availability as widely as practical to interested parties, including, but not limited to, hospitals, providers, media organizations, health insurers, health maintenance organizations, purchasers of health insurance, organized labor, consumer or patient advocacy groups, and individual consumers. The annual report shall be made available to any person upon request.

E. No hospital report or Department disclosure may contain information identifying a patient, employee, or licensed health professional in connection with a specific infection incident.

SECTION 4. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-710.4 of Title 63, unless there is created a duplication in numbering, reads as follows:

It is the expressed intent of the Legislature that a patient's right of confidentiality shall not be violated in any manner. Patient security numbers and any other information that could be used to identify an individual patient shall not be released notwithstanding any other provision of law.

SECTION 5. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-710.5 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. determination that a hospital has violated the provisions of this act may result in any of the following:

1. Termination of licensure or other sanctions relating to licensure under Section 1-701 et seq. of Title 63 of the Oklahoma Statutes;

2. A civil penalty of up to One Thousand Dollars (\$1,000.00) per day per violation for each day the hospital is in violation of the act.

SECTION 6. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-710.6 of Title 63, unless there is created a duplication in numbering, reads as follows:

The State Department of Health shall be responsible for ensuring compliance with this act as a condition of licensure under Section 1-701 et seq. of Title 63 of the Oklahoma Statutes and shall enforce such compliance according to the provisions of Section 1-701 et seq. of Title 63 of the Oklahoma Statutes.

SECTION 7. AMENDATORY 63 O.S. 2001, Section 1-706, is amended to read as follows:

Section 1-706. A. The State Commissioner of Health shall issue licenses for the operation of hospitals found to comply with the provisions of this article and rules and standards of the State Board of Health.

B. The Commissioner may suspend or revoke any such license on any of the following grounds:

1. Violation of any of the provisions of this article, or rules or standards promulgated pursuant thereto;

2. Permitting, aiding or abetting the commission of any illegal act in the licensed hospital or institution; ~~or~~

3. Conduct or practices deemed by the Commissioner to be detrimental to the welfare of the patients of the hospital or institution; or

4. Violation of any provision of the Hospital Infections Disclosure Act.

C. If a license is revoked, a new application for license shall be considered by the Commissioner on receipt of evidence that the conditions upon which revocation was based have been corrected. A new license may then be granted after proper inspection has been made and all provisions of this article and rules and standards of the State Board of Health have been satisfied.

SECTION 8. This act shall become effective November 1, 2005.

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