1	STATE OF OKLAHOMA
2	2nd Session of the 54th Legislature (2014)
3	SENATE BILL 1217 By: Brecheen
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6	AS INTRODUCED
7	An Act relating to health care facilities; amending 63 O.S. 2011, Section 1-116, which relates to
8	definitions; modifying definitions; amending 63 O.S. 2011, Section 1-118, which relates to the Division of
9	Health Care Information within the Oklahoma State Department of Health; broadening authority for collection of certain information; requiring public
11	disclosure of certain information; prohibiting certain use of information for certain purposes;
12	requiring development of certain rules by the State Board of Health; exempting certain facilities from
13	certain requirements; amending 63 O.S. 2011, Section 1-706, which relates to licensure of hospitals;
14	broadening conditions for revocation of licensure; and providing an effective date.
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17	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
18	SECTION 1. AMENDATORY 63 O.S. 2011, Section 1-116, is
19	amended to read as follows:
20	Section 1-116. When used in the Oklahoma Health Care
21	Information System Act:
22	1. "Ambulatory surgical center" means a facility as defined in
23	Section 2657 of this title;
24	2. "Board" means the State Board of Health;

- 1 | 2. 3. "Commissioner" means the State Commissioner of Health;
- 2 3. 4. "Department" means the State Department of Health;
  - 4. 5. "Diagnosis-Related Group (DRG)" means a statistical system of classifying inpatient admissions into groups for the purposes of payment, as defined by the Centers for Medicare and
- 6 <u>Medicaid Services;</u>

- 6. "Health care providers" means a hospital or related institution licensed pursuant to Section 1-702 of this title, ambulatory surgical centers licensed pursuant to Section 2660 of this title, nursing facilities licensed pursuant to Section 1-1903 of this title, physicians as specified in paragraphs 1 through 7 of subsection A of Section 725.2 of Title 59 of the Oklahoma Statutes, physical therapists, physician assistants, pharmacists, nurses and home health care providers licensed pursuant to the laws of this state;
- 5. 7. "Hospital" means a facility licensed pursuant to the provisions of Section 1-701 of this title;
- 8. "Third-party payor" means any entity, other than a purchaser, which is responsible for payment either to the purchaser or the health care provider for health care services rendered by the health care provider;
- 22 6. 9. "Public-supported provider" means any public or private
  23 entity supported in whole or in part by federal or state funds, or

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any health care provider contracting with the state for providing health care services including, but not limited to, Medicaid;
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- 7. 10. "Identifying information" means a program identifying number assigned for purposes of statistical and data analysis, which protects and maintains patient and physician anonymity. Identifying information shall remain confidential as provided in Section 1-120 of this title;
- 8. 11. "Information providers" means and includes health care providers, third-party payors or public-supported providers required to report or submit information to the Division of Health Care Information pursuant to the Oklahoma Health Care Information System Act;
- 13 9. 12. "Division" means the Division of Health Care
  14 Information; and
  - 10. 13. "Health care information system" means the system for receipt, collection, analysis, evaluation, processing, utilization and dissemination of health care data established and maintained by the Division of Health Care Information pursuant to the Oklahoma Health Care Information System Act.
- 20 SECTION 2. AMENDATORY 63 O.S. 2011, Section 1-118, is 21 amended to read as follows:
- Section 1-118. A. The Division of Health Care Information is hereby created within the State Department of Health.

B. The Division shall:

1. Collect from providers health care information for which the Division has established a defined purpose and a demonstrated utility that is consistent with the intent of the provisions of Section 1-117 et seq. of this title;

- 2. Establish and maintain a uniform health care information system;
- 3. Analyze health care data submitted including, but not limited to, geographic mapping of disease entities;
- 4. Provide for dissemination of health care data to users and consumers;
- 5. Provide for the training and education of information providers regarding processing and maintenance and methods of reporting required information;
- 6. Be authorized to access all state agency health-related data sets, and information submitted by hospitals and ambulatory surgical centers, and shall develop mechanisms for the receipt of health care data to the Division or its agent; provided, however, all provisions for confidentiality shall remain in place;
- 7. Provide for the exchange of information with <u>citizens of</u>
  this state, other agencies or political subdivisions of this state,
  the federal government or other states, or agencies thereof. The
  Division shall collaborate with county health departments, including
  the Oklahoma City-County Health Department and the Tulsa City-County

Health Department, <a href="hospitals">hospitals</a>, and ambulatory surgical centers in developing city-county based health data sets;

- 8. Contract with other public or private entities for the purpose of collecting, processing or disseminating health care data; and
  - 9. Build and maintain the data base.

- C. 1. The State Board of Health shall adopt rules governing the acquisition, compilation and dissemination of all data collected pursuant to the Oklahoma Health Care Information System Act.
  - 2. The rules shall include, but not be limited to:
    - a. adequate measures to provide system security for all data and information acquired pursuant to the Oklahoma Health Care Information System Act,
    - b. adequate procedures to ensure confidentiality of patient records,
    - c. charges for users for the cost of data preparation for information that is beyond the routine data disseminated by the office, and
    - d. time limits for the submission of data by information providers.
- D. The Division shall adopt standard nationally recognized coding systems to ensure quality in receiving and processing data.
- E. The Division shall implement mechanisms to encrypt all personal identifiers contained in any health care data upon

- transmission to the State Department of Health, and all such data
  shall remain encrypted while maintained in the Department's database
  or while used by a contractor.
  - F. The Division may contract with an organization for the purpose of data analysis. Any contract or renewal thereof shall be based on the need for, and the feasibility, cost and performance of, services provided by the organization. The Division shall require any data analyzer at a minimum to:
    - 1. Analyze the information;

- 2. Prepare policy-related and other analytical reports as determined necessary for purposes of this act; and
  - 3. Protect the encryption and confidentiality of the data.
- G. The Board shall have the authority to set fees and charges with regard to the collection and compilation of data requested for special reports, and for the dissemination of data. These funds shall be deposited in the Oklahoma Health Care Information System Revolving Fund account.
- H. The Division may accept grants or charitable contributions for use in carrying out the functions set forth in the Oklahoma

  Health Care Information System Act from any source. These funds shall be deposited in the Oklahoma Health Care Information System Revolving Fund.
- I. The Department shall make available to the public on its internet website the most current price information it receives from

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1 hospitals and ambulatory surgical centers as defined by Section 1-
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- 2 | 116 of this title. Any data disclosed to the Department by a
- 3 | hospital or ambulatory surgical center shall be the sole property of
- 4 the facility submitting the data. Information published by the
- 5 Department shall contain:
- 6 1. Information for each hospital, as defined by Section 1-701
- 7 of this title, listed separately and categorized by specialty; and
- 8 2. Information for each ambulatory surgical center, as defined
- 9 by Section 2657 of this title, shall be listed separately and
- 10 categorized by specialty.
- J. Any data or product derived from the data disclosed pursuant
- 12 to this act, including a consolidation or analysis of the data,
- 13 | shall be and will remain the sole property of the State of Oklahoma.
- 14 | The Department shall be prohibited from allowing proprietary
- 15 information it receives pursuant to this act to be used by any
- 16 person or entity for commercial purposes.
- 17 K. Beginning with the quarter ending June 30, 2014, and
- 18 | quarterly thereafter, each hospital and ambulatory surgical center
- 19 | in this state shall provide to the Department, utilizing electronic
- 20 health records software, the following information about the one
- 21 | hundred (100) most frequently reported inpatient admissions, by
- 22 Diagnosis-Related Group, to their facilities:

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1. The amount that will be charged to a patient for each

Diagnosis-Related Group if all charges are paid in full without a

public or private third party paying for any portion of the charges;

- 2. The average negotiated settlement between hospitals or ambulatory surgical centers and any private third party on the amount that will be charged to a patient;
- 3. The amount of Medicaid reimbursement for each Diagnosis-Related Group, including claims and pro rata supplemental payments;
- 4. The amount of Medicare reimbursement for each Diagnosis-Related Group; and
- 5. For the five largest health insurers providing payment to the hospital on behalf of insured persons, the range and the average amount of the payment made for each Diagnosis-Related Group. Prior to submitting information to the Department, each hospital and ambulatory surgical center shall redact the names of the health insurers and any other information that would otherwise identify participating health insurers.
- L. Beginning with the quarter ending June 30, 2014, and quarterly thereafter, each hospital and ambulatory surgical center in this state shall provide to the Department, utilizing electronic health records software, the following information about the total costs for the twenty (20) most frequently reported surgical procedures and twenty (20) most common imaging procedures, by Diagnosis-Related Group, to their facilities. Hospitals and

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1   ambulatory surgical centers shall provide information in the same
2   manner as required by paragraphs 1 through 5 of subsection K of this
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- 3 <u>section.</u>
- M. A hospital or ambulatory surgical center shall not be
- 5 required to report the information required by this act when the
- 6 | information would be in violation of the Federal Health Insurance
- 7 Portability and Accountability Act of 1996, or any other federal
- 8 law.
- 9 N. The Board shall adopt rules on or before March 1, 2014, to
- 10 ensure that the provisions of this act are fully implemented.
- 11 O. The provisions of this act shall not apply to hospitals or
- 12 | ambulatory surgical centers who do not accept Medicaid or Medicare
- 13 funds for the provision of medical services.
- 14 | SECTION 3. AMENDATORY 63 O.S. 2011, Section 1-706, is
- 15 amended to read as follows:
- 16 Section 1-706. A. The State Commissioner of Health shall issue
- 17 licenses for the operation of hospitals or ambulatory surgical
- 18 | centers found to comply with the provisions of this article title
- 19 and rules and standards of the State Board of Health.
- B. The Commissioner may suspend or revoke any such license on
- 21 any of the following grounds:
- 22 1. Violation of any of the provisions of this article, or rules
- 23 or standards promulgated pursuant thereto;

- 2. Permitting, aiding or abetting the commission of any illegal act in the licensed hospital or institution;  $\frac{\partial \mathbf{r}}{\partial \mathbf{r}}$
- 3. Conduct or practices deemed by the Commissioner to be detrimental to the welfare of the patients of the hospital or institution; or
  - 4. Violations of Section 1-118 of this title.
- 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.
- 13 | SECTION 4. This act shall become effective November 1, 2014.

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