

**COMMITTEE AMENDMENT**  
HOUSE OF REPRESENTATIVES  
State of Oklahoma

SPEAKER:

CHAIR:

I move to amend HB3644 \_\_\_\_\_  
Of the printed Bill  
Page \_\_\_\_\_ Section \_\_\_\_\_ Lines \_\_\_\_\_  
Of the Engrossed Bill

By deleting the content of the entire measure, and by inserting in lieu thereof the following language:

**AMEND TITLE TO CONFORM TO AMENDMENTS**

Adopted: \_\_\_\_\_  
Amendment submitted by: Preston Stinson \_\_\_\_\_

\_\_\_\_\_  
Reading Clerk

STATE OF OKLAHOMA

2nd Session of the 60th Legislature (2026)

PROPOSED SUBCOMMITTEE  
SUBSTITUTE  
FOR  
HOUSE BILL NO. 3644

By: Stinson

PROPOSED SUBCOMMITTEE SUBSTITUTE

An Act relating to venous thromboembolisms screening and treatment; creating the Blake Burgess Act; requiring certain hospitals to develop and implement policies and procedures regarding venous thromboembolisms; mandating training for the rendering of appropriate medical attention for persons at risk of forming venous thromboembolisms; requiring the State Department of Health to contract with a private entity to establish a statewide venous thromboembolism registry; providing requirements; requiring hospitals to report certain information regularly to the statewide venous thromboembolism registry; requiring the private entity to provide regular reports to the Department on such data; requiring the Department to provide to the Governor and the Legislature a specified report; providing requirements for report; providing applicability; amending 63 O.S. 2021, Section 1-890.2, which relates to definitions in the Continuum of Care and Assisted Living Act; adding definitions; amending 63 O.S. 2021, Section 1-890.3, as amended by Section 1, Chapter 357, O.S.L. 2025 (63 O.S. Supp. 2025, Section 1-890.3), which relates to promulgation of necessary rules, nursing care component, and adult daycare component; requiring assisted living facilities to provide a consumer information pamphlet containing specified information to residents; amending 63 O.S. 2021, Section 1-1951, which relates to power and duties of State Department of Health, certified nursing aides within the Nursing Home Care Act; requiring certain training for certified nursing

1 aides; providing for noncodification; providing for  
2 codification; providing an effective date; and  
3 declaring an emergency.  
4

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

6 SECTION 1. NEW LAW A new section of law not to be  
7 codified in the Oklahoma Statutes reads as follows:

8 This act shall be known and may be cited as the "Blake Burgess  
9 Act".

10 SECTION 2. NEW LAW A new section of law to be codified  
11 in the Oklahoma Statutes as Section 1-630 of Title 63, unless there  
12 is created a duplication in numbering, reads as follows:

13 Each hospital with an emergency department and each ambulatory  
14 surgical center shall:

15 1. Develop and implement policies and procedures for the  
16 rendering of appropriate medical attention for persons at risk of  
17 forming venous thromboembolisms which reflect evidence-based best  
18 practices relating to, at a minimum:

- 19 a. assessing patients for risk of venous thromboembolism  
20 using a nationally recognized risk assessment tool,  
21 and  
22 b. treatment options for a patient diagnosed with venous  
23 thromboembolism;  
24

1        2. Train all nonphysician personnel at least annually on the  
2 policies and procedures developed under this section. For purposes  
3 of this section, the term "nonphysician personnel" means all  
4 personnel of the licensed facility working in clinical areas and  
5 providing patient care, except those persons licensed as health care  
6 practitioners.

7        SECTION 3.        NEW LAW        A new section of law to be codified  
8 in the Oklahoma Statutes as Section 1-631 of Title 63, unless there  
9 is created a duplication in numbering, reads as follows:

10        A. The State Department of Health shall contract with the  
11 state-designated health information exchange to establish and  
12 maintain a statewide venous thromboembolism registry to ensure that  
13 the performance measures required to be submitted under subsection B  
14 of this section are maintained and available for use to improve or  
15 modify the venous thromboembolism care system, ensure compliance  
16 with nationally recognized guidelines, and monitor venous  
17 thromboembolism patient outcomes.

18        B. Beginning July 1, 2027, each hospital with an emergency  
19 department shall regularly report to the statewide venous  
20 thromboembolism registry information containing nationally  
21 recognized venous thromboembolism measures and data on the incidence  
22 and prevalence of venous thromboembolisms. Such data shall include  
23 the following information:

- 1        1. The number of venous thromboembolisms identified and  
2 diagnosed;
- 3        2. The age of the patient;
- 4        3. The ZIP code of the patient;
- 5        4. The sex of the patient;
- 6        5. Whether the patient is a resident of a licensed nursing or  
7 assisted living facility;
- 8        6. Whether the venous thromboembolism was fatal;
- 9        7. How the diagnosis was made, such as by using imaging  
10 modalities; and
- 11       8. The treatment that was recommended for the venous  
12 thromboembolism.

13       C. The Department shall require the state-designated health  
14 information exchange to use a nationally recognized platform to  
15 collect data from each hospital with an emergency department on the  
16 performance measures required under subsection B of this section.  
17 The state-designated health information exchange shall provide to  
18 the Department regular reports on the data collected.

19       D. By June 1, 2027, the Department shall submit to the  
20 Governor, the President Pro Tempore of the Oklahoma State Senate,  
21 and the Speaker of the Oklahoma House of Representatives a detailed  
22 report on the incidence of venous thromboembolism using inpatient  
23 and outpatient data for services provided between July 1, 2026, and  
24

1 June 30, 2027. The report shall provide analyses of all of the  
2 following:

3 1. Age category, initial primary diagnosis and procedure, and  
4 secondary diagnoses, readmission rates for inpatients, admission  
5 rates for venous thromboembolism for which the patient had an  
6 ambulatory surgery procedure, and emergency department visits for  
7 venous thromboembolism linked to any previous admission;

8 2. Whether the venous thromboembolism was present upon  
9 admission;

10 3. The incidence of venous thromboembolism procedures reported  
11 on the agency's website; and

12 4. The principal payor, the sex of the patient, and the  
13 patient's discharge status.

14 E. The state-designated health information exchange operating  
15 the registry shall only use or publish information from the registry  
16 for the purposes of advancing medical research or medical education  
17 in the interest of reducing morbidity or mortality.

18 SECTION 4. AMENDATORY 63 O.S. 2021, Section 1-890.2, is  
19 amended to read as follows:

20 Section 1-890.2. As used in the Continuum of Care and Assisted  
21 Living Act:

22 1. "Assisted living center" means any home or establishment  
23 offering, coordinating or providing services to two or more persons  
24 who:

- a. are domiciled therein,
- b. are unrelated to the operator,
- c. by choice or functional impairments, need assistance with personal care or nursing supervision,
- d. may need intermittent or unscheduled nursing care,
- e. may need medication assistance, and
- f. may need assistance with transfer and/or ambulation;

2. "Board" means the State Board of Health;

3. "Commissioner" means the Commissioner of Health;

4. "Continuum of care facility" means a home, establishment or institution providing nursing facility services as defined in Section 1-1902 of this title and one or both of the following:

- a. assisted living center services as defined in the Continuum of Care and Assisted Living Act, and
- b. adult day care center services as defined in Section 1-872 of this title; ~~and~~

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

6. "Pulmonary embolism (PE)" means a condition in which part of the clot breaks off and travels to the lungs, possibly causing death; and

7. "Venous thromboembolism (VTE)" means deep vein thrombosis (DVT), which is a blood clot located in a deep vein, usually in the leg or arm. The term can be used to refer to DVT, pulmonary embolism, or both.

1       SECTION 5.       AMENDATORY       63 O.S. 2021, Section 1-890.3, as  
2 amended by Section 1, Chapter 357, O.S.L. 2025 (63 O.S. Supp. 2025,  
3 Section 1-890.3), is amended to read as follows:

4       Section 1-890.3. A. The State Commissioner of Health shall  
5 promulgate rules necessary to implement the provisions of the  
6 Continuum of Care and Assisted Living Act. Such rules shall  
7 include, but shall not be limited to:

8       1. A uniform comprehensive resident screening instrument to  
9 measure the needs and capabilities of residents in all settings and  
10 to determine appropriate placements of residents;

11       2. Physical plant requirements meeting construction and life  
12 safety codes, with provisions accommodating resident privacy and  
13 independence in assisted living centers and in assisted living  
14 components of continuum of care facilities based on the variable  
15 capabilities of residents;

16       3. Staffing levels responsive to the variable needs of  
17 residents, with provisions for sharing of staff between components  
18 in a continuum of care facility;

19       4. Minimum standards for resident care including, but not  
20 limited to, standards pertaining to medical care and administration  
21 of medications. Standards pertaining to medication administration  
22 shall, at a minimum, require the assisted living center or continuum  
23 of care facility to:



- a. provide or arrange qualified staff to administer medications based on the needs of residents,
- b. follow medication administration orders from a qualified health care provider,
- c. ensure that medications are reviewed monthly by a Registered Nurse or pharmacist and quarterly by a consultant pharmacist,
- d. maintain medication administration records and document all medication administration in such records, and
- e. have medication storage and disposal policies;

5. Standards for measuring quality outcomes for residents;

6. Provisions for individualized services chosen by and designed for each resident;

7. Provisions to prohibit facility staff from disclosing a resident's financial information to third parties without written consent of the resident or the designated representative of the resident;

8. Procedures for inspections and investigations of licensed entities to ensure compliance with the Continuum of Care and Assisted Living Act and rules promulgated by the Commissioner;

9. Enumeration of resident rights and responsibilities to be observed by each facility and its staff. Such resident rights shall include the freedom of choice regarding any personal attending

1 physicians and all other providers of medical services and supplies,  
2 providing that the minimum standards are met by the provider  
3 pursuant to the Continuum of Care and Assisted Living Act, without a  
4 financial penalty or fee charged by the assisted living center;

5 10. Provisions for a surety bond or deposit from each applicant  
6 in an amount sufficient to guarantee that obligations to residents  
7 will be performed, with provisions for reduction or waiver of the  
8 surety bond or deposit when the assets of the applicant or its  
9 contracts with other persons are sufficient to reasonably ensure the  
10 performance of its obligations;

11 11. Assisted living facilities shall provide a consumer  
12 information pamphlet to residents upon admission. The pamphlet  
13 shall contain information about venous thromboembolism (VTE), risk  
14 factors, and how residents can recognize the signs and symptoms of  
15 VTE;

16 12. Provisions for the development of a consumer guide or  
17 similar resource to be posted on the Internet website of the State  
18 Department of Health to assist individuals and families in  
19 understanding the services provided by assisted living centers and  
20 to compare and select a facility;

21 ~~12.~~ 13. Provisions for posting results of routine inspections  
22 and any complaint investigations of each assisted living center on  
23 the Internet website of the Department. Such information shall be  
24 regularly updated to include the facility's plan of correction and

1 to indicate when a violation of a licensing regulation was corrected  
2 by the facility; and

3 ~~13.~~ 14. Provisions requiring execution of a plan of care and a  
4 resident service contract with the resident or resident's  
5 representative.

6 B. The nursing care service of a continuum of care facility  
7 shall be subject to the requirements, procedures and remedies set  
8 out in the Nursing Home Care Act, including provisions relating to  
9 resident rights.

10 C. The adult day care component of a continuum of care facility  
11 shall be subject to requirements and procedures specified under the  
12 Adult Day Care Act.

13 SECTION 6. AMENDATORY 63 O.S. 2021, Section 1-1951, is  
14 amended to read as follows:

15 Section 1-1951. A. The State Department of Health shall have  
16 the power and duty to:

17 1. Issue certificates of training and competency for nurse  
18 aides;

19 2. Approve training and competency programs including, but not  
20 limited to, education-based programs and employer-based programs,  
21 including those programs established pursuant to Section 223.1 of  
22 Title 72 of the Oklahoma Statutes;

23 3. Determine curricula and standards for training and  
24 competency programs. The Department shall require such training to

1 include a minimum of ten (10) hours of training in the care of  
2 Alzheimer's patients; and for direct care staff, recognizing signs  
3 and symptoms of venous thromboembolism (VTE) and techniques for  
4 providing an emergency response;

5 4. Establish and maintain a registry for certified nurse aides  
6 and for nurse aide trainees;

7 5. Establish categories and standards for nurse aide  
8 certification and registration, including feeding assistants as  
9 defined in 42 CFR Parts 483 and 488;

10 6. Exercise all incidental powers as necessary and proper to  
11 implement and enforce the provisions of this section; and

12 7. Suspend or revoke any certification issued to any nurse  
13 aide, if:

14 a. the nurse aide is found to meet any of the  
15 requirements contained in subsection D of Section 1-  
16 1947 of this title,

17 b. the nurse aide is found to meet any of the  
18 requirements contained in subsection C of Section 1-  
19 1950.1 of this title, or

20 c. the nurse aide is found to have committed abuse,  
21 neglect or exploitation of a resident or  
22 misappropriation of resident or client property  
23 pursuant to the requirements contained in paragraph 7  
24 of subsection ~~D~~ E of this section. The action to

1                   revoke or suspend may be included with the filing of  
2                   any action pursuant to the requirements of paragraph 7  
3                   of subsection D of this section.

4           B.   The State Board of Health shall promulgate rules to  
5   implement the provisions of this section and shall have power to  
6   assess fees.

7           1.   Each person certified as a nurse aide pursuant to the  
8   provisions of this section shall be required to pay certification  
9   and recertification fees in amounts to be determined by the State  
10   Board of Health, not to exceed Fifteen Dollars (\$15.00).

11          2.   In addition to the certification and recertification fees,  
12   the State Board of Health may impose fees for training or education  
13   programs conducted or approved by the Department, except for those  
14   programs operated by the Oklahoma Department of Veterans Affairs.

15          3.   All revenues collected as a result of fees authorized in  
16   this section and imposed by the Board shall be deposited into the  
17   Public Health Special Fund.

18          C.   Only a person who has qualified as a certified nurse aide  
19   and who holds a valid current nurse aide certificate for use in this  
20   state shall have the right and privilege of using the title  
21   Certified Nurse Aide and to use the abbreviation CNA after the name  
22   of such person. Any person who violates the provisions of this  
23   section shall be subject to a civil monetary penalty to be assessed  
24   by the Department.

1 D. A person qualified by the Department as a certified nurse  
2 aide shall be deemed to have met the requirements to work as a home  
3 health aide pursuant to the provisions of the Home Care Act and  
4 shall require no further licensure for performing services within  
5 the scope of practice of home health aides.

6 E. 1. The State Department of Health shall establish and  
7 maintain a certified nurse aide, nurse aide trainee and feeding  
8 assistant registry that:

9 a. is sufficiently accessible to promptly meet the needs  
10 of the public and employers, and

11 b. provides a process for notification and investigation  
12 of alleged abuse, exploitation or neglect of residents  
13 of a facility or home, clients of an agency or center,  
14 or of misappropriation of resident or client property.

15 2. The registry shall contain information as to whether a nurse  
16 aide has:

17 a. successfully completed a certified nurse aide training  
18 and competency examination,

19 b. met all the requirements for certification, or

20 c. received a waiver from the Board.

21 3. The registry shall include, but not be limited to, the  
22 following information on each certified nurse aide or nurse aide  
23 trainee:

24 a. the full name of the individual,

1           b.    information necessary to identify each individual.

2           Certified nurse aides and nurse aide trainees shall  
3           maintain with the registry current residential  
4           addresses and shall notify the registry, in writing,  
5           of any change of name. Notification of change of name  
6           shall require certified copies of any marriage license  
7           or other court document which reflects the change of  
8           name. Notice of change of address or telephone number  
9           shall be made within ten (10) days of the effected  
10          change. Notice shall not be accepted over the phone,

11          c.    the date the individual became eligible for placement  
12                in the registry, and

13          d.    information on any finding of the Department of abuse,  
14                neglect or exploitation by the certified nurse aide or  
15                nurse aide trainee, including:

16               (1) documentation of the Department's investigation,  
17                   including the nature of the allegation and the  
18                   evidence that led the Department to confirm the  
19                   allegation,

20               (2) the date of the hearing, if requested by the  
21                   certified nurse aide or nurse aide trainee, and

22               (3) statement by the individual disputing the finding  
23                   if the individual chooses to make one.  
24

1       4. The Department shall include the information specified in  
2 subparagraph d of paragraph 3 of this subsection in the registry  
3 within ten (10) working days of the substantiating finding and it  
4 shall remain in the registry, unless:

- 5           a. it has been determined by an administrative law judge,  
6               a district court or an appeal court that the finding  
7               was in error, or
- 8           b. the Board is notified of the death of the certified  
9               nurse aide or nurse aide trainee.

10       5. Upon receipt of an allegation of abuse, exploitation or  
11 neglect of a resident or client, or an allegation of  
12 misappropriation of resident or client property by a certified nurse  
13 aide or nurse aide trainee, the Department shall place a pending  
14 notation in the registry until a final determination has been made.  
15 If the investigation, or administrative hearing held to determine  
16 whether the certified nurse aide or nurse aide trainee is in  
17 violation of the law or rules promulgated pursuant thereto, reveals  
18 that the abuse, exploitation or neglect, or misappropriation of  
19 resident or client property was unsubstantiated, the pending  
20 notation shall be removed within twenty-four (24) hours of receipt  
21 of notice by the Department.

22       6. The Department shall, after notice to the individuals  
23 involved and a reasonable opportunity for a hearing, make a finding  
24 as to the accuracy of the allegations.



1        7. If the Department after notice and opportunity for hearing  
2 determines with clear and convincing evidence that abuse, neglect or  
3 exploitation, or misappropriation of resident or client property has  
4 occurred and the alleged perpetrator is the person who committed the  
5 prohibited act, notice of the findings shall be sent to the nurse  
6 aide and to the district attorney for the county where the abuse,  
7 neglect or exploitation, or misappropriation of resident or client  
8 property occurred and to the Medicaid Fraud Control Unit of the  
9 Attorney General's Office. Notice of ineligibility to work as a  
10 nurse aide in a long-term care facility, a residential care  
11 facility, assisted living facility, day care facility, or any entity  
12 that requires certification of nurse aides, and notice of any  
13 further appeal rights shall also be sent to the nurse aide.

14        8. In any proceeding in which the Department is required to  
15 serve notice or an order on an individual, the Department may send  
16 written correspondence to the address on file with the registry. If  
17 the correspondence is returned and a notation of the United States  
18 Postal Service indicates "unclaimed" or "moved" or "refused" or any  
19 other nondelivery markings and the records of the registry indicate  
20 that no change of address as required by this subsection has been  
21 received by the registry, the notice and any subsequent notices or  
22 orders shall be deemed by the court as having been legally served  
23 for all purposes.

1        9. The Department shall require that each facility check the  
2 nurse aide registry before hiring a person to work as a nurse aide.  
3 If the registry indicates that an individual has been found, as a  
4 result of a hearing, to be personally responsible for abuse, neglect  
5 or exploitation, that individual shall not be hired by the facility.

6        10. If the state finds that any other individual employed by  
7 the facility has neglected, abused, misappropriated property or  
8 exploited in a facility, the Department shall notify the appropriate  
9 licensing authority and the district attorney for the county where  
10 the abuse, neglect or exploitation, or misappropriation of resident  
11 or client property occurred.

12        11. Upon a written request by a certified nurse aide or nurse  
13 aide trainee, the Board shall provide within twenty (20) working  
14 days all information on the record of the certified nurse aide or  
15 nurse aide trainee when a finding of abuse, exploitation or neglect  
16 is confirmed and placed in the registry.

17        12. Upon request and except for the names of residents and  
18 clients, the Department shall disclose all of the information  
19 relating to the confirmed determination of abuse, exploitation and  
20 neglect by the certified nurse aide or nurse aide trainee to the  
21 person requesting such information, and may disclose additional  
22 information the Department determines necessary.

23        13. A person who has acted in good faith to comply with state  
24 reporting requirements and this section of law shall be immune from

1 liability for reporting allegations of abuse, neglect or  
2 exploitation.

3 F. Each nurse aide trainee shall wear a badge which clearly  
4 identifies the person as a nurse aide trainee. Such badge shall be  
5 furnished by the facility employing the trainee. The badge shall be  
6 nontransferable and shall include the first and last name of the  
7 trainee.

8 G. 1. For purposes of this section, "feeding assistant" means  
9 an individual who is paid to feed residents by a facility or who is  
10 used under an arrangement with another agency or organization and  
11 meets the requirements cited in 42 CFR Parts 483 and 488.

12 2. Each facility that employs or contracts employment of a  
13 feeding assistant shall maintain a record of all individuals, used  
14 by the facility as feeding assistants, who have successfully  
15 completed a training course approved by the state for paid feeding  
16 assistants.

17 SECTION 7. This act shall become effective July 1, 2026.

18 SECTION 8. It being immediately necessary for the preservation  
19 of the public peace, health or safety, an emergency is hereby  
20 declared to exist, by reason whereof this act shall take effect and  
21 be in full force from and after its passage and approval.

22  
23 60-2-16219 TJ 02/11/26  
24