

By: Senator(s) Tollison

To: Public Health and
Welfare; Appropriations

SENATE BILL NO. 2285

1 AN ACT ENTITLED THE HOSPITAL INFECTIONS DISCLOSURE ACT TO
2 DIRECT HOSPITALS TO COLLECT DATA ON HOSPITAL-ACQUIRED INFECTION
3 RATES FOR CERTAIN CLINICAL PROCEDURES; TO PROVIDE FOR THE
4 APPOINTMENT OF AN ADVISORY COUNCIL TO DEVELOP A METHOD FOR
5 COLLECTING SUCH DATA; TO PROVIDE FOR ANNUAL REPORTS; TO PROVIDE
6 FOR CONFIDENTIALITY; TO PROVIDE CIVIL PENALTIES FOR NONCOMPLIANCE;
7 TO AMEND SECTIONS 41-9-15 AND 41-9-17, MISSISSIPPI CODE OF 1972,
8 TO PROVIDE THAT COMPLIANCE WITH INFECTIONS DISCLOSURE REQUIREMENT
9 IS A CONDITION FOR ISSUANCE AND RENEWAL OF A HOSPITAL'S LICENSE;
10 AND FOR RELATED PURPOSES.

11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

12 **SECTION 1.** (1) This act may be cited as the Hospital
13 Infections Disclosure Act.

14 (2) For purposes of this act:

15 (a) "Department" means the Mississippi State Department
16 of Health.

17 (b) "Hospital" means an acute care health care facility
18 licensed under Section 41-9-1 et seq.

19 (c) "Hospital-acquired infection" means a localized or
20 systemic condition (i) that results from adverse reaction to the
21 presence of an infectious agent(s) or its toxin(s), and (ii) that
22 was not present or incubating at the time of admission to the
23 hospital.

24 (3) (a) Individual hospitals shall collect data on
25 hospital-acquired infection rates for the specific clinical
26 procedures determined by the department by regulation, including
27 the following categories:

- 28 (i) Surgical site infections;
- 29 (ii) Ventilator-associated pneumonia;
- 30 (iii) Central line-related bloodstream infections;
- 31 (iv) Urinary tract infections; and

32 (v) Other categories as provided under subsection
33 (4) of this section.

34 (b) Hospitals shall submit quarterly reports on their
35 hospital-acquired infection rates to the department. Quarterly
36 reports shall be submitted, in a format set forth in regulations
37 adopted by the department, to the department by April 30, July 31,
38 October 31 and January 31 each year for the previous quarter.
39 Data in quarterly reports must cover a period ending not earlier
40 than one (1) month prior to submission of the report. Quarterly
41 reports shall be made available to the public at each hospital and
42 through the department. The first quarterly report shall be due
43 in 2007. If the hospital is a division or subsidiary of another
44 entity that owns or operates other hospitals or related
45 organizations, the quarterly report shall be for the specific
46 division or subsidiary and not for the other entity.

47 (4) The Executive Director of the Mississippi State
48 Department of Health shall appoint an advisory committee,
49 including representatives from public and private hospitals,
50 hospital infection control departments, direct care nursing staff,
51 physicians, epidemiologists with expertise in hospital-acquired
52 infections, academic researchers, consumer organizations, health
53 insurers, health maintenance organizations, organized labor and
54 purchasers of health insurance, such as employers. The advisory
55 committee shall have a majority of members representing interests
56 other than hospitals. The advisory committee shall assist the
57 department in the development of all aspects of the department's
58 methodology for collecting, analyzing and disclosing the
59 information collected under this act, including collection
60 methods, formatting and methods and means for release and
61 dissemination. In developing the methodology for collecting and
62 analyzing the infection rate data, the department and advisory
63 committee shall consider existing methodologies and systems for
64 data collection, such as the Centers for Disease Control's

65 National Nosocomial Infection Surveillance Program, or its
66 successor; however, the department's discretion to adopt a
67 methodology shall not be limited or restricted to any existing
68 methodology or system. The data collection and analysis
69 methodology shall be disclosed to the public prior to any public
70 disclosure of hospital-acquired infection rates. The department
71 and the advisory committee shall evaluate on a regular basis the
72 quality and accuracy of hospital information reported under this
73 act and the data collection, analysis and dissemination
74 methodologies. The department may, after consultation with the
75 advisory committee, require hospitals to collect data on
76 hospital-acquired infection rates in categories additional to
77 those set forth in subsection (3).

78 (5) The department shall annually submit to the Legislature
79 a report summarizing the hospital quarterly reports and shall
80 publish the annual report on its Web site. The first annual
81 report shall be submitted and published in 2007. The department
82 may issue quarterly informational bulletins, at its discretion,
83 summarizing all or part of the information submitted in the
84 hospital quarterly reports. All reports issued by the department
85 shall be risk adjusted. The annual report shall compare the
86 risk-adjusted hospital-acquired infection rates, collected under
87 Section 1 of this act, for each individual hospital in the state.
88 The department, in consultation with the advisory committee, shall
89 make this comparison as easy to comprehend as possible. The
90 report shall also include an executive summary, written in plain
91 language, that shall include, but not be limited to, a discussion
92 of findings, conclusions and trends concerning the overall state
93 of hospital-acquired infections in the state, including a
94 comparison to prior years. The report may include policy
95 recommendations as appropriate. The department shall publicize
96 the report and its availability as widely as practicable to
97 interested parties, including, but not limited to, hospitals,

98 providers, media organizations, health insurers, health
99 maintenance organizations, purchasers of health insurance,
100 organized labor, consumer or patient advocacy groups and
101 individual consumers. The annual report shall be made available
102 to any person upon request.

103 (6) No hospital report or department disclosure may contain
104 information identifying a patient, employee or licensed health
105 care professional in connection with a specific infection
106 incident. It is the intent of the Legislature that a patient's
107 right of confidentiality shall not be violated in any manner.
108 Patient social security numbers and any other information that
109 could be used to identify an individual patient shall not be
110 released notwithstanding any other provision of law.

111 (7) A determination that a hospital has violated the
112 provisions of this section may result in any of the following:

113 (a) Termination of licensure or other sanctions
114 relating to licensure under Section 41-9-15.

115 (b) A civil penalty of up to One Thousand Dollars
116 (\$1,000.00) per day per violation for each day the hospital is in
117 violation of the act, to be imposed by the department.

118 (8) The department shall be responsible for ensuring
119 compliance with this section as a condition of licensure and shall
120 enforce such compliance.

121 **SECTION 2.** Section 41-9-15, Mississippi Code of 1972, is
122 amended as follows:

123 41-9-15. The licensing agency, after notice and opportunity
124 for hearing to the applicant or licensee, is authorized to deny,
125 suspend or revoke a license in any case in which it finds that
126 there has been a substantial failure to comply with the
127 requirements established under Sections 41-9-1 through 41-9-35.

128 Such notice shall be effected by registered mail, or by
129 personal service, setting forth the particular reasons for the
130 proposed action and a fixing date not less than thirty (30) days

131 from the date of such mailing or service, at which the applicant
132 or licensee shall be given an opportunity for a prompt and fair
133 hearing. On the basis of any such hearing, or upon default of the
134 applicant or licensee, the licensing agency shall make a
135 determination specifying its findings of fact and conclusions of
136 law. A copy of such determination shall be sent by registered
137 mail or served personally upon the applicant or licensee. The
138 decision revoking, suspending or denying the license or
139 application shall become final thirty (30) days after it is so
140 mailed or served, unless the applicant or licensee, within such
141 thirty-day period, appeals the decision, pursuant to Section
142 41-9-31.

143 The procedure governing hearings authorized by this section
144 shall be in accordance with rules promulgated by the licensing
145 agency. A full and complete record shall be kept of all
146 proceedings, and all testimony shall be reported but need not be
147 transcribed unless the decision is appealed pursuant to Section
148 41-9-31. Witnesses may be subpoenaed by either party.
149 Compensation shall be allowed to witnesses as in cases in the
150 chancery court. Each party shall pay the expense of his own
151 witnesses. The cost of the record shall be paid by the licensing
152 agency. Any other party desiring a copy of the transcript shall
153 pay therefor the reasonable cost of preparing the same.

154 The licensing agency shall be responsible for ensuring
155 compliance with hospital-acquired infections disclosure
156 requirements in Section 1 of Senate Bill No. 2285, 2007 Regular
157 Session, and may impose a civil penalty of One Thousand Dollars
158 (\$1,000.00) per day per violation for each day the hospital is in
159 violation of such requirements.

160 **SECTION 3.** Section 41-9-17, Mississippi Code of 1972, is
161 amended as follows:

162 41-9-17. The licensing agency shall adopt, amend, promulgate
163 and enforce such rules, regulations and standards with respect to

164 all hospitals to be licensed under Section 41-9-11 as may be
165 designed to further the accomplishment of the purposes of Sections
166 41-9-1 through 41-9-35 in promoting safe and adequate treatment of
167 individuals in hospitals in the interest of public health, safety
168 and welfare. Any rule, regulation or standard adopted hereunder
169 shall be considered as promulgated and effective from and after
170 the time the same is recorded and indexed in a book to be
171 maintained by the licensing agency in its main office in the State
172 of Mississippi, entitled "Minimum Standard of Operation for
173 Mississippi Hospitals." Said book shall be open and available to
174 all hospitals and the public generally at all reasonable times.
175 Upon the adoption of any such rule, regulation or standard, the
176 licensing agency shall mail copies thereof to all hospitals in the
177 state which have filed with said agency their names and addresses
178 for this purpose, but the failure to mail the same or the failure
179 of the hospital to receive the same shall in nowise affect the
180 validity thereof. No such rules, regulations or standards shall
181 be adopted or enforced which would have the effect of denying a
182 license to a hospital or other institution required to be
183 licensed, solely by reason of the school or system of practice
184 employed or permitted to be employed therein.

185 In addition, the licensing agency shall ensure compliance
186 with the hospital-acquired infection disclosure requirements of
187 Section 1 of Senate Bill No. 2285, 2007 Regular Session, as a
188 condition of licensure under this chapter.

189 **SECTION 4.** This act shall take effect and be in force from
190 and after July 1, 2007.