

AMENDMENTS TO HOUSE BILL NO. 1552

Sponsor: REPRESENTATIVE BOYD

Printer's No. 1972

1 Amend Table of Contents, page 2, line 1, by striking out all
2 of said line and inserting

3 Section 11. Payments.
4 Section 12. Incentive payments.
5 Section 13. Machinery and Equipment Loan Fund eligibility.
6 Section 14. Expiration.
7 Section 15. Effective date.

8 Amend Sec. 2, page 2, by inserting between lines 17 and 18

9 "Best practices." Nationally recognized standards developed
10 by organizations specializing in the control of infectious
11 diseases such as the Society for Healthcare Epidemiology of
12 America (SHEA), the Association for Infection Control and
13 Epidemiology and the Infectious Diseases Society of America and
14 the professionals in methods recommendations and guidelines
15 developed by the Centers for Disease Control and Prevention and
16 its National Healthcare Safety Network that should be used by
17 health care providers to reduce the risk of harm to patients.

18 Amend Sec. 2, page 4, line 16, by inserting after

19 ""facility."

20 For the purposes of reporting, the term shall only apply to
21 hospitals and nursing homes.

22 Amend Sec. 2, page 4, by inserting between lines 16 and 17

23 "Health payor." An individual or entity providing a group or
24 individual health, sickness or accident policy, subscriber
25 contract or program issued or provided by an entity subject to
26 any one of the following:

27 (1) The act of June 2, 1915 (P.L.736, No.338), known as
28 the Workers' Compensation Act.

29 (2) Section 630 of the act of May 17, 1921 (P.L.682,
30 No.284), known as The Insurance Company Law of 1921.

31 (3) The act of December 29, 1972 (P.L.1701, No.364),
32 known as the Health Maintenance Organization Act.

33 (4) The act of May 18, 1976 (P.L.123, No.54), known as
34 the Individual Accident and Sickness Insurance Minimum
35 Standards Act.

1 (5) 40 Pa.C.S. Ch. 61 (relating to hospital plan
2 corporations) or 63 (relating to professional health services
3 plan corporations).

4 Amend Sec. 2, page 4, by inserting between lines 19 and 20

5 "Medicaid." The program established under Title XIX of the
6 Social Security Act (49 Stat. 620, 42 U.S.C. § 1396 et seq.).

7 Amend Sec. 2, page 4, lines 26 through 28, by striking out
8 all of said lines

9 Amend Sec. 3, page 5, by inserting after line 30

10 (ix) One individual from a list of two recommended
11 by the Pennsylvania Chamber of Business and Industry
12 chosen from the business community representatives
13 appointed to the council under section 4(b)(4) of the act
14 of July 8, 1986 (P.L.408, No.89), known as the Health
15 Care Cost Containment Act.

16 (x) One individual from a list of two recommended by
17 the Pennsylvania AFL-CIO chosen from the organized labor
18 representatives appointed to the council under section
19 4(b)(5) of the Health Care Cost Containment Act.

20 Amend Sec. 3, page 6, lines 12 and 13, by striking out "and
21 promoting those" and inserting
22 which include implementing nationally recognized
23 standards that promote

24 Amend Sec. 3, page 6, line 13, by striking out "that" and
25 inserting
26 to

27 Amend Sec. 3, page 6, line 29, by inserting a period after
28 "MDROO"

29 Amend Sec. 3, page 6, lines 29 and 30; page 7, lines 1
30 through 14, by striking out "upon" in line 29 and all of line
31 30, page 6 and all of lines 1 through 14, page 7 and inserting

32 (7) Recommend a methodology and a defined process using
33 nationally recognized standards for determining and assessing
34 the rate of health care-associated infections that occur in
35 health care facilities in this Commonwealth. The process
36 shall include establishment of benchmarks to measure health
37 care facilities' management of health care-associated
38 infections, which the department may use during licensure or
39 inspection of a health care facility. Methodology, process
40 and benchmarks shall be reviewed and updated annually.

41 Amend Sec. 3, page 7, by inserting between lines 20 and 21

(11) Recommend system requirements and elements for health care-associated infection electronic surveillance systems to be used by health care facilities. Consideration should be given to elements which provide:

(i) Extraction of existing electronic clinical data from health care facilities systems on an ongoing basis.

(ii) Translation of nonstandardized laboratory, pharmacy and/or radiology data into uniform information that can be analyzed on a population-wide basis.

(iii) Clinical support, educational tools and training to ensure that information provided under this subsection will lead to change.

(iv) Clinical improvement measurement and the structure to provide ongoing positive and negative feedback to health care facilities staff who implement change.

(12) Recommend uniform reporting requirements for health care facilities to report health care-associated infections to the department, the council and the authority. The recommendation shall include the form and content of the required reports.

Amend Sec. 4, page 7, line 22, by striking out "shall" and inserting

may

Amend Sec. 4, page 8, line 21, by inserting after "on" methodology, process and

Amend Sec. 4, page 9, by inserting between lines 1 and 2

(10) Publish a notice in the Pennsylvania Bulletin stating the uniform reporting requirements, including both form and content, for health care-associated infections based on recommendations made by the committee. The uniform reporting requirements shall apply and be utilized for reports made to the department, the council and the authority. The effective date for the commencement of required reporting by health care facilities consistent with this act, at a minimum, shall begin no later than 120 days after publication of the notice. Reporting requirements contained in section 6 of the act of July 8, 1986 (P.L.408, No.89), known as the Health Care Cost Containment Act, as they relate to health care-associated infections shall remain in effect until 120 days after publication of the notice.

Amend Sec. 6, page 10, line 17, by inserting after "following"

if applicable to that particular health care facility

Amend Sec. 6, page 10, line 29, by striking out all of said line and inserting

1 (2) Health care facilities shall adopt:

2 Amend Sec. 6, page 11, line 12, by inserting after

3 "facilities"

4 based on recommendations made by the committee

5 Amend Sec. 6, page 11, lines 29 and 30, by striking out all

6 of said lines

7 Amend Sec. 8, page 13, line 7, by striking out all of said

8 line and inserting

9 (a) Reporting.--

10 (1) Nursing homes shall report to the council

11 Amend Sec. 8, page 13, by inserting between lines 15 and 16

12 (2) No later than 120 days following the date the

13 department publishes the uniform reporting requirements in

14 the Pennsylvania Bulletin, pursuant to section 7(a)(1),

15 nursing homes shall report information pertaining to

16 hospital-associated infections to the authority in the form

17 so required by the authority. For the purposes of the

18 reporting requirements contained in this section, the

19 confidentiality protections contained in section 311 of the

20 act of March 20, 2002 (P.L.154, No.13), known as the Medical

21 Care Availability and Reduction of Error (Mcare) Act, shall

22 apply to nursing homes.

23 Amend Sec. 8, page 13, line 17, by striking out "board" and

24 inserting

25 committee

26 Amend Sec. 8, page 13, lines 20 through 22, by striking out

27 all of said lines and inserting

28 to the department, the council and the authority by nursing

29 homes.

30 Amend Sec. 8, page 14, by inserting between lines 8 and 9

31 (2) The annual assessment amount paid by a nursing

32 facility shall be a reimbursable cost under the medical

33 assistance program. The Department of Public Welfare shall

34 pay each nursing facility, as a separate, pass-through

35 payment, an amount equal to the assessment paid by a nursing

36 facility multiplied by the facility's medical assistance

37 occupancy as reported in its annual cost report.

38 Amend Sec. 8, page 14, line 9, by striking out "(2)" and

39 inserting

1 (3)

2 Amend Sec. 8, page 14, line 11, by striking out "(3)" and
3 inserting

4 (4)

5 Amend Sec. 8, page 14, line 17, by striking out "(4)" and
6 inserting

7 (5)

8 Amend Sec. 9, page 14, line 23, by inserting after "shall"
9 , based on recommendations of the committee,

10 Amend Sec. 9, page 14, line 24, by striking out "systems" and
11 inserting

12 system components and elements

13 Amend Sec. 9, page 14, line 25, by inserting a period after
14 "2008"

15 Amend Sec. 9, page 14, lines 25 through 30; page 15, lines 1
16 through 27, by striking out "to report health care-associated
17 infections to the" in line 25 and all of lines 26 through 30,
18 page 14 and all of lines 1 through 27, page 15

19 Amend Sec. 9, page 15, line 28, by striking out "(c)" and
20 inserting

21 (b)

22 Amend Sec. 9, page 15, lines 28 through 30, by striking out
23 "The department shall establish reasonable" in line 28 and all
24 of line 29 and "facilities to reduce health care-associated
25 infections." in line 30

26 Amend Sec. 9, page 15, line 30, by inserting after "All"
27 health care

28 Amend Sec. 9, page 16, line 1, by inserting after
29 "benchmarks"

30 established by the department pursuant to

recommendations of the committee

Amend Bill, page 17, by inserting between lines 2 and 3

Section 11. Payments.

(a) Payment for performing routine cultures and screenings in hospitals.--The cost of routine cultures and screenings performed on patients in hospitals in compliance with the health care facility's infection control plan shall be considered a reimbursable cost to be paid by health payors and Medicaid, subject to any copayment, coinsurance or deductible amounts imposed in any applicable policy or benefit issued by a health payor or provided by Medicaid and to any agreements between a health care facility and a payor or Medicaid.

(b) Payment for performing routine cultures and screenings in nursing homes.--The full cost of routine cultures and screenings performed on patients in nursing homes in compliance with a health care facility's infection control plan shall be paid by health payors and Medicaid.

Section 12. Incentive payments.

(a) General rule.--Commencing January 1, 2009, a health care facility that exceeds the benchmark published by the department shall be eligible for an incentive payment. For calendar year 2010 and thereafter, the Department of Public Welfare shall consult with the department to establish appropriate percentage benchmarks for the reduction of health care-associated infections in health care facilities.

(b) Distribution of funds.--Funds for the purpose of implementing this section shall be appropriated to the Department of Public Welfare and distributed to eligible health care facilities as set forth in this section. Incentive payments to health care facilities shall be limited to funds available for this purpose.

(c) Funds separate.--Funds appropriated for incentive payments shall be separate from and not otherwise utilize, rely on or diminish funds necessary for payments to be made to long-term care facilities for the provision of nursing facility services and shall be paid in addition to such other payments.

Section 13. Machinery and Equipment Loan Fund eligibility.

(a) Funds available.--Up to \$25,000,000 of the funds appropriated by the General Assembly for the Machinery and Equipment Loan Fund shall be made available for loan to health care facilities to assist in acquiring systems or technologies that assist the facility in reducing health care-associated infections. Loans shall not exceed 50% of a health care facility's cost, which shall be approved by the Department of Community and Economic Development.

(b) Criteria.--The Department of Community and Economic Development shall develop criteria for evaluating applications for loans that consider the fiscal condition of the health care facility, the ability of the health care facility to implement the technology and the potential savings through avoided costs and reduced health care facility-acquired infection rates. The criteria shall be forwarded by the Department of Community and Economic Development to the Legislative Reference Bureau for publication as a notice in the Pennsylvania Bulletin.

(c) Eligibility.--Additionally, to be eligible for a loan, a health care facility must be in compliance with health care-associated infection reporting requirements contained in this

1 act, the act of March 20, 2002 (P.L.154, No.13), known as the
2 Medical Care Availability and Reduction of Error (Mcare) Act,
3 and the act of July 8, 1986 (P.L.408, No.89), known as the
4 Health Care Cost Containment Act.
5 Section 14. Expiration.
6 This act expires December 31, 2012.

7 Amend Sec. 11, page 17, line 3, by striking out "11" and
8 inserting

9 15