

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL NO. 199

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, after “Hubbard,” insert “Ramirez,”; in the same line, strike “and Sossi” and substitute “Sossi, F. Turner, DeBoy, Gilleland, Howard, Boutin, McComas, Benson, Bromwell, Costa, Elliott, Frank, Hammen, Hurson, Kach, Kullen, Morhaim, Murray, Nathan-Pulliam, Rudolph, V. Turner, and Weldon”; in line 2, strike “Hospital Infections Disclosure Act” and substitute “Hospitals - Comparable Evaluation System - Healthcare-Associated Infection Information”; in line 3, after “requiring” insert “a certain comparable evaluation system established by”; strike beginning with “collect” in line 3 down through “infections” in line 12 and substitute “include healthcare-associated infection information from hospitals; requiring the system to adhere, to the extent possible, to certain recommendations regarding public reporting of healthcare-associated infections; and generally relating to the inclusion of healthcare-associated infection information from hospitals in a certain comparable evaluation system”; in line 13, strike “adding to” and substitute “repealing and reenacting, with amendments,”; and in line 15, strike “19-138 and 19-319(i)” and substitute “19-134(e)”.

AMENDMENT NO. 2

On pages 1 through 3, strike in their entirety the lines beginning with line 21 on page 1 through line 25 on page 3, inclusive, and substitute:

“19-134.

(e) (1) The Commission may:

(i) On or before July 1, 2001, develop and implement a system to comparatively evaluate the quality of care outcomes and performance measurements of hospitals and ambulatory surgical facilities on an objective basis; and

(Over)

(ii) Annually publish the summary findings of the evaluation.

(2) (i) The purpose of a comparable performance measurement system established under this subsection is to improve the quality of care provided by hospitals and ambulatory surgical facilities by establishing a common set of performance measurements and disseminating the findings of the performance measurements to hospitals, ambulatory surgical facilities, consumers, and interested parties.

(ii) In developing the performance measurement system, the Commission shall consider the geographic location, urban or rural orientation, and teaching or nonteaching status of the hospital and the ambulatory surgical facilities, and the health status of the population served.

(3) The system, where appropriate, shall solicit performance information from consumers.

(4) (i) The Commission may adopt regulations to establish the system of evaluation provided under this subsection.

(ii) Before adopting regulations to implement an evaluation system under this subsection, the Commission shall:

1. Consider the performance measurements of appropriate accreditation organizations, State licensure regulations, Medicare certification regulations, the quality indicator project of the Association of Maryland Hospitals and Health Systems, and any other relevant performance measurements;

2. Evaluate the desirability and feasibility of developing a consumer clearinghouse on health care information using existing available data; and

3. On or before January 1, 2001, report to the General Assembly, subject to § 2-1246 of the State Government Article, on any performance evaluation developed under this subsection.

(5) The Commission may contract with a private entity to implement the system required under this subsection provided that the entity is not a hospital or an ambulatory surgical facility.

(6) (I) THE COMPARABLE EVALUATION SYSTEM ESTABLISHED

UNDER THIS SUBSECTION SHALL INCLUDE HEALTHCARE- ASSOCIATED INFECTION INFORMATION FROM HOSPITALS.

(II) THE COMPARABLE EVALUATION SYSTEM SHALL ADHERE, TO THE EXTENT POSSIBLE, TO THE CURRENT RECOMMENDATIONS OF THE FEDERAL CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) AND THE CDC HEALTHCARE INFECTION CONTROL PRACTICES ADVISORY COMMITTEE REGARDING PUBLIC REPORTING OF HEALTHCARE-ASSOCIATED INFECTIONS.”.