
By: **Delegates Pendergrass, Hubbard, Ramirez, Barkley, Conroy, Donoghue, Dumais, Glassman, Goldwater, Gordon, Gutierrez, Heller, Kaiser, Krysiak, Lee, Love, Malone, Mandel, Menes, Montgomery, Oaks, Ross, and Sossi 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**

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Assigned to: Health and Government Operations

Committee Report: Favorable with amendments
House action: Adopted
Read second time: March 15, 2005

CHAPTER _____

1 AN ACT concerning

2 **Hospital Infections Disclosure Act**
3 **Hospitals - Comparable Evaluation System - Healthcare-Associated**
4 **Infection Information**

5 FOR the purpose of requiring a certain comparable evaluation system established by
6 the Maryland Health Care Commission to collect data on hospital acquired
7 infection rates from hospitals; requiring the Maryland Health Care Commission
8 to adopt certain regulations governing submission of hospital acquired infection
9 rate data; requiring the Maryland Health Care Commission to publish
10 hospital acquired infection rate data; requiring the Maryland Health Care
11 Commission to publish an annual report concerning hospital acquired infection
12 rates; requiring hospitals to collect and disclose certain data regarding
13 hospital acquired infections to the Maryland Health Care Commission;
14 establishing certain penalties; defining certain terms; and generally relating to
15 disclosure of hospital acquired infections include healthcare-associated
16 infection information from hospitals; requiring the system to adhere, to the
17 extent possible, to certain recommendations regarding public reporting of
18 healthcare-associated infections; and generally relating to the inclusion of
19 healthcare-associated infection information from hospitals in a certain
20 comparable evaluation system.

21 BY ~~adding to~~ repealing and reenacting, with amendments,

1 Article - Health - General
2 Section ~~19-138 and 19-319(i)~~ 19-134(e)
3 Annotated Code of Maryland
4 (2000 Replacement Volume and 2004 Supplement)

5 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
6 MARYLAND, That the Laws of Maryland read as follows:

7 **Article - Health - General**

8 ~~19-138.~~

9 (A) ~~IN THIS SECTION, "HOSPITAL ACQUIRED INFECTION" MEANS AN~~
10 ~~INFECTION THAT:~~

11 (1) ~~MEETS THE CURRENT STATISTICAL EPIDEMIOLOGIC DEFINITION OF~~
12 ~~A NOSOCOMIAL INFECTION, AS STANDARDIZED BY THE FEDERAL CENTERS FOR~~
13 ~~DISEASE CONTROL AND PREVENTION'S NATIONAL NOSOCOMIAL INFECTIONS~~
14 ~~SURVEILLANCE SYSTEM, OR ITS SUCCESSOR;~~

15 (2) ~~IS ACQUIRED BY A PATIENT DURING HOSPITAL CARE; AND~~

16 (3) ~~IS NOT DETECTED AS PRESENT OR INCUBATING AT THE TIME OF A~~
17 ~~PATIENT'S ADMISSION TO A HOSPITAL.~~

18 (B) ~~THE COMMISSION SHALL COLLECT DATA ON HOSPITAL ACQUIRED~~
19 ~~INFECTIONS FROM EACH HOSPITAL IN THE STATE IN ACCORDANCE WITH § 19-319 OF~~
20 ~~THIS ARTICLE.~~

21 (C) ~~THE COMMISSION SHALL ADOPT REGULATIONS THAT:~~

22 (1) ~~ESTABLISH THE TIMING, FORMAT, AND PROCESS OF SUBMISSION OF~~
23 ~~HOSPITAL DATA REPORTS TO THE COMMISSION;~~

24 (2) ~~IDENTIFY THE TYPES OF HOSPITAL ACQUIRED INFECTIONS ON~~
25 ~~WHICH THE HOSPITALS MUST COLLECT AND REPORT DATA, INCLUDING:~~

26 (I) ~~SURGICAL SITE INFECTIONS;~~

27 (II) ~~VENTILATOR ASSOCIATED PNEUMONIA;~~

28 (III) ~~CENTRAL LINE RELATED BLOODSTREAM INFECTIONS; AND~~

29 (IV) ~~URINARY TRACT INFECTIONS; AND~~

30 (3) ~~ESTABLISH PROCEDURES FOR ENSURING COMPLETE~~
31 ~~CONFIDENTIALITY OF PATIENTS, EMPLOYEES, AND LICENSED HEALTH CARE~~
32 ~~PROFESSIONALS IN THE REPORTS TO BE SUBMITTED BY HOSPITALS.~~

~~(D) (1) THE COMMISSION SHALL MAKE AVAILABLE TO THE PUBLIC THE
DATA COLLECTED FROM HOSPITALS ON HOSPITAL-ACQUIRED INFECTIONS
BEGINNING ON OR BEFORE SEPTEMBER 1, 2006.~~

~~(2) THE COMMISSION MAY MAKE THE HOSPITAL-ACQUIRED INFECTION
DATA AVAILABLE IN THE HOSPITAL EVALUATION SYSTEM AUTHORIZED UNDER §
19-134(E) OF THIS SUBTITLE.~~

~~(E) (1) THE COMMISSION SHALL PUBLISH AN ANNUAL REPORT
SUMMARIZING THE HOSPITAL-ACQUIRED INFECTION DATA SUBMITTED BY THE
HOSPITALS.~~

~~(2) THE ANNUAL REPORT SHALL:~~

~~(I) COMPARE RISK-ADJUSTED HOSPITAL-ACQUIRED INFECTION
RATES FOR EACH HOSPITAL IN THE STATE; AND~~

~~(II) DISCUSS ANY FINDINGS AND TRENDS CONCERNING
HOSPITAL-ACQUIRED INFECTIONS STATEWIDE, INCLUDING COMPARISONS TO PRIOR
YEARS.~~

~~(3) THE COMMISSION SHALL PUBLISH THE FIRST ANNUAL REPORT
REQUIRED UNDER THIS SUBSECTION ON OR BEFORE DECEMBER 1, 2006.~~

~~19-319.~~

~~(F) (1) IN THIS SUBSECTION, "HOSPITAL-ACQUIRED INFECTION" MEANS AN
INFECTION THAT:~~

~~(I) MEETS THE CURRENT STATISTICAL EPIDEMIOLOGIC
DEFINITION OF A NOSOCOMIAL INFECTION, AS STANDARDIZED BY THE FEDERAL
CENTERS FOR DISEASE CONTROL AND PREVENTION'S NATIONAL NOSOCOMIAL
INFECTIONS SURVEILLANCE SYSTEM, OR ITS SUCCESSOR;~~

~~(II) IS ACQUIRED BY A PATIENT DURING HOSPITAL CARE; AND~~

~~(III) IS NOT DETECTED AS PRESENT OR INCUBATING AT THE TIME
OF A PATIENT'S ADMISSION TO A HOSPITAL.~~

~~(2) AS A CONDITION OF LICENSURE, EACH HOSPITAL SHALL, IN
ACCORDANCE WITH THE REGULATIONS ADOPTED BY THE MARYLAND HEALTH CARE
COMMISSION UNDER § 19-138 OF THIS TITLE:~~

~~(I) COLLECT DATA ON HOSPITAL-ACQUIRED INFECTIONS; AND~~

~~(II) SUBMIT THE DATA ON THE HOSPITAL'S HOSPITAL-ACQUIRED
INFECTION RATES TO THE MARYLAND HEALTH CARE COMMISSION.~~

~~(3) IF A HOSPITAL FAILS TO COLLECT OR REPORT THE DATA ON
HOSPITAL-ACQUIRED INFECTIONS REQUIRED UNDER THIS SUBSECTION IN~~

~~1 ACCORDANCE WITH REGULATIONS ESTABLISHED BY THE MARYLAND HEALTH CARE
2 COMMISSION, THE SECRETARY MAY IMPOSE THE FOLLOWING PENALTIES:~~

~~3 (I) DELICENSURE OF THE HOSPITAL; OR~~

~~4 (II) A FINE OF UP TO \$1,000 PER DAY PER VIOLATION FOR EACH DAY
5 A VIOLATION CONTINUES.~~

6 19-134.

7 (e) (1) The Commission may:

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

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

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

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

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

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

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

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

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

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

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

4 (6) (I) THE COMPARABLE EVALUATION SYSTEM ESTABLISHED UNDER
5 THIS SUBSECTION SHALL INCLUDE HEALTHCARE-ASSOCIATED INFECTION
6 INFORMATION FROM HOSPITALS.

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

12 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
13 July 1, 2005.