

# SENATE BILL 765

J3, J2

8lr2716  
CF 8lr2595

---

By: **Senator Conway (By Request)**

Introduced and read first time: February 1, 2008

Assigned to: Finance and Education, Health, and Environmental Affairs

---

## A BILL ENTITLED

1 AN ACT concerning

2 **Hospitals – Nursing Care Committees, Staffing Plans, and Commission on**  
3 **Nursing Acuity**

4 FOR the purpose of requiring certain facilities to provide the Health Services Cost  
5 Review Commission with certain information; requiring hospitals to create a  
6 nursing care committee that performs certain duties; requiring the nursing care  
7 committee to include a certain percentage of certain registered nurses; requiring  
8 hospitals to adopt and implement a certain written staffing plan; requiring a  
9 hospital to give consideration to certain factors when adopting and  
10 implementing the staffing plan; requiring the written staffing plan to be posted  
11 in a certain location; establishing the Commission on Nursing Acuity; providing  
12 for the membership of the Commission; requiring the Governor to designate the  
13 chair of the Commission; requiring the Commission to meet a certain number of  
14 times a year; providing for the staffing of the Commission; providing that a  
15 member of the Commission may not receive a certain compensation but is  
16 entitled to a certain reimbursement; providing for the duties of the Commission;  
17 requiring the Commission to submit a certain annual report to certain  
18 committees of the General Assembly; and generally relating to hospitals and  
19 nursing care committees, staffing plans, and the Commission on Nursing  
20 Acuity.

21 BY repealing and reenacting, with amendments,  
22 Article – Health – General  
23 Section 19–218(a)  
24 Annotated Code of Maryland  
25 (2005 Replacement Volume and 2007 Supplement)

26 BY adding to  
27 Article – Health – General  
28 Section 19–310.2 and 19–310.3  
29 Annotated Code of Maryland

---

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (2005 Replacement Volume and 2007 Supplement)

2 BY adding to

3 Article – Health Occupations

4 Section 8–7C–01 through 8–7C–06 to be under the new subtitle “Subtitle 7C.

5 Commission on Nursing Acuity”

6 Annotated Code of Maryland

7 (2005 Replacement Volume and 2007 Supplement)

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

10 **Article – Health – General**

11 19–218.

12 (a) The Commission shall require each facility to give the Commission  
13 information that:

14 (1) Concerns the total financial needs of the facility;

15 (2) Concerns its current and expected resources to meet its total  
16 financial needs;

17 (3) Includes the effect of any proposal made, under Subtitle 1 of this  
18 title, on comprehensive health planning; [and]

19 (4) Includes physician information sufficient to identify practice  
20 patterns of individual physicians across all facilities; **AND**

21 (5) **INCLUDES THE NURSING WORKLOAD IN EACH UNIT OF THE**  
22 **FACILITY.**

23 **19–310.2.**

24 (A) **EACH HOSPITAL SHALL CREATE A NURSING CARE COMMITTEE**  
25 **THAT:**

26 (1) **PROVIDES FOR THE MINIMUM DIRECT CARE PROFESSIONAL**  
27 **REGISTERED NURSE–TO–PATIENT STAFFING NEEDS OF EACH INPATIENT CARE**  
28 **UNIT;**

29 (2) **RECOMMENDS WRITTEN HOSPITAL–WIDE STAFFING PLANS;**

30 (3) **SELECTS, IMPLEMENTS, AND EVALUATES MINIMUM STAFFING**  
31 **LEVELS FOR INPATIENT CARE UNITS;**

1           (4)   **SELECTS, IMPLEMENTS, AND EVALUATES AN ACUITY MODEL**  
2 **THAT PROVIDES STAFFING FLEXIBILITY AND ALIGNS CHANGING PATIENT**  
3 **ACUITY WITH THE REQUIRED NURSING SKILLS;**

4           (5)   **REVIEWS NURSE-TO-PATIENT STAFFING GUIDELINES FOR**  
5 **ALL INPATIENT UNITS AND THE ACUITY TOOLS AND MEASURES THAT ARE USED**  
6 **BY THE HOSPITAL; AND**

7           (6)   **COLLECTS DATA REGARDING HOSPITAL NURSE VACANCY**  
8 **RATES.**

9           **(B) THE NURSING CARE COMMITTEE SHALL CONDUCT THE SELECTION,**  
10 **IMPLEMENTATION, EVALUATION, AND REVIEW REQUIRED BY SUBSECTION**  
11 **(A)(3), (4), AND (5) OF THIS SECTION AT LEAST TWO TIMES A YEAR.**

12           **(C) AT LEAST 50% OF THE MEMBERS OF THE NURSING CARE**  
13 **COMMITTEE SHALL BE PROFESSIONAL REGISTERED NURSES WHO PROVIDE**  
14 **DIRECT PATIENT CARE.**

15 **19-310.3.**

16           **(A) EACH HOSPITAL SHALL ADOPT AND IMPLEMENT A HOSPITAL-WIDE**  
17 **WRITTEN STAFFING PLAN.**

18           **(B) (1) IN ADOPTING AND IMPLEMENTING THE WRITTEN STAFFING**  
19 **PLAN, A HOSPITAL SHALL GIVE SIGNIFICANT CONSIDERATION TO THE**  
20 **RECOMMENDATIONS OF THE NURSING CARE COMMITTEE.**

21           **(2) IN ADOPTING AND IMPLEMENTING A WRITTEN STAFFING**  
22 **PLAN, A HOSPITAL SHALL CONSIDER:**

23                   **(I) THE COMPLEXITY OF COMPLETE CARE;**

24                   **(II) ASSESSMENTS ON PATIENT ADMISSION;**

25                   **(III) THE NUMBER OF PATIENT ADMISSIONS;**

26                   **(IV) THE NUMBER OF PATIENT DISCHARGES AND**  
27 **TRANSFERS;**

28                   **(V) AN EVALUATION OF THE PROGRESSION OF PROBLEMS**  
29 **EXPERIENCED BY A PATIENT;**

1 (VI) THE NEED FOR ONGOING PHYSICAL ASSESSMENTS OF A  
2 PATIENT;

3 (VII) THE PLANNING REQUIRED FOR THE DISCHARGE OF A  
4 PATIENT;

5 (VIII) THE NEED FOR AN ASSESSMENT AFTER A CHANGE IN  
6 PATIENT CONDITION;

7 (IX) THE NEED FOR PATIENT REFERRALS;

8 (X) THE COMPLEXITY OF CLINICAL PROFESSIONAL  
9 NURSING JUDGMENT NEEDED TO DESIGN AND IMPLEMENT THE NURSING CARE  
10 PLAN OF A PATIENT;

11 (XI) THE NEED FOR SPECIALIZED EQUIPMENT AND  
12 TECHNOLOGY;

13 (XII) THE SKILL MIX OF OTHER PERSONNEL PROVIDING OR  
14 SUPPORTING DIRECT PATIENT CARE, INCLUDING THE PERSONNEL'S:

15 1. INVOLVEMENT IN QUALITY IMPROVEMENT  
16 ACTIVITIES;

17 2. PROFESSIONAL PREPARATION; AND

18 3. EXPERIENCE;

19 (XIII) PATIENT ACUITY AND THE NUMBER OF PATIENTS FOR  
20 WHOM CARE IS BEING PROVIDED; AND

21 (XIV) NURSING VACANCY RATES.

22 (C) THE WRITTEN STAFFING PLAN SHALL REQUIRE:

23 (1) THE UNIT NURSE MANAGER OR AN INDIVIDUAL DESIGNATED  
24 BY THE UNIT NURSE MANAGER TO CONDUCT AN ONGOING ASSESSMENT OF THE  
25 PATIENT ACUITY LEVELS ON A UNIT AND THE NURSING STAFF THAT IS NEEDED;  
26 AND

27 (2) THE IDENTIFICATION OF ADDITIONAL REGISTERED NURSES  
28 NEEDED FOR SAFE STAFFING TO DELIVER DIRECT PATIENT CARE WHEN THE  
29 UNEXPECTED NEEDS OF A PATIENT EXCEED THE PLANNED WORKLOAD FOR  
30 DIRECT CARE STAFF.



1 (IV) ONE REPRESENTATIVE OF THE OFFICE OF HEALTH  
2 CARE QUALITY;

3 (V) TWO PROFESSORS OF NURSING;

4 (VI) TWO BEDSIDE NURSES;

5 (VII) TWO NURSE EXECUTIVES;

6 (VIII) TWO REPRESENTATIVES OF THE SERVICE EMPLOYEES  
7 INTERNATIONAL UNION;

8 (IX) TWO REPRESENTATIVES OF THE MARYLAND NURSES  
9 COALITION; AND

10 (X) TWO REPRESENTATIVES OF THE MARYLAND NURSES  
11 ASSOCIATION.

12 **8-7C-04.**

13 (A) THE GOVERNOR SHALL DESIGNATE THE CHAIR OF THE  
14 COMMISSION.

15 (B) THE COMMISSION SHALL MEET AT LEAST FOUR TIMES A YEAR.

16 (C) THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE SHALL  
17 PROVIDE STAFF SUPPORT FOR THE COMMISSION.

18 (D) A MEMBER OF THE COMMISSION:

19 (1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE  
20 COMMISSION; BUT

21 (2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE  
22 STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE  
23 BUDGET.

24 **8-7C-05.**

25 THE COMMISSION SHALL:

26 (1) REVIEW THE METHODOLOGY USED IN THE STATE TO COST  
27 AND BILL FOR NURSING SERVICES PROVIDED IN A HOSPITAL;

1           (2)   **COMPARE COSTING AND BILLING METHODS USED BY**  
2 **HOSPITALS IN THE STATE FOR NURSING SERVICES TO THE COSTING AND**  
3 **BILLING SYSTEMS USED IN OTHER STATES, INCLUDING NEW YORK, ILLINOIS,**  
4 **AND COLORADO;**

5           (3)   **DETERMINE THE HOURS OF CARE AND DIRECT AND INDIRECT**  
6 **COSTS OF NURSING CARE PROVIDED IN HOSPITALS FOR INDIVIDUAL PATIENTS**  
7 **AND BY DIAGNOSIS;**

8           (4)   **IDENTIFY METHODS TO ALLOCATE NURSING CARE HOURS**  
9 **AND COSTS TO ADJUST REIMBURSEMENT TO HOSPITALS FOR PATIENT CARE;**

10          (5)   **ESTABLISH A MECHANISM FOR HOSPITALS TO RECORD AND**  
11 **REPORT NURSING HOURS AND CHARGES ON THE BILL OF THE PATIENT;**

12          (6)   **DEVELOP METHODS TO RECORD DAILY NURSING INPATIENT**  
13 **HOURS AND CHARGES USING A UNIQUE NURSING REVENUE CODE AND TO**  
14 **COLLECT THE DATA IN THE APPROPRIATE BILLING ABSTRACT;**

15          (7)   **ESTABLISH A UNIQUE NURSING COST CENTER AT EACH**  
16 **FACILITY TO RECORD THE DIRECT AND INDIRECT NURSING COSTS AND TOTAL**  
17 **NURSING EMPLOYEE HOURS FOR REGISTERED NURSES AND LICENSED**  
18 **PRACTICAL NURSES;**

19          (8)   **CREATE A METHOD TO COLLECT NURSING COST CENTER**  
20 **DATA FROM EACH HOSPITAL FROM THE HEALTH SERVICES COST REVIEW**  
21 **COMMISSION AND TO REPORT PUBLICLY A COMPARISON OF NURSING DIRECT**  
22 **AND INDIRECT COSTS, REGISTERED NURSE AND LICENSED PRACTICAL NURSE**  
23 **EMPLOYEE HOURS, AND STANDARDIZED VACANCY RATES AMONG HOSPITALS;**

24          (9)   **EVALUATE NURSING PERFORMANCE;**

25          (10) **REQUIRE THE HEALTH SERVICES COST REVIEW**  
26 **COMMISSION TO:**

27                (I)   **ESTABLISH A MECHANISM FOR HOSPITALS TO COLLECT**  
28 **DATA ON NURSING COSTS, CHARGES, AND HOURS OF CARE EXPENDED FOR**  
29 **INDIVIDUAL PATIENTS; AND**

30                (II) **REPORT PUBLICLY A COMPARISON OF THE DATA BY**  
31 **PATIENT DIAGNOSIS AMONG HOSPITALS;**

1           **(11) DEVELOP A PUBLIC REPORTING MECHANISM TO TRACK**  
2 **TRENDS IN NURSING CARE COSTS, VACANCY RATES, HOURS OF CARE, STAFFING**  
3 **PATTERNS, AND NURSING CARE QUALITY OVER TIME AND ACROSS HOSPITALS;**

4           **(12) DEVELOP A METHOD TO IDENTIFY THE TOP-PERFORMING**  
5 **AND LOWEST-PERFORMING HOSPITALS WITH REGARD TO NURSING CARE AND**  
6 **TO REQUIRE LOW-PERFORMING HOSPITALS TO DEVELOP AND REPORT A**  
7 **REMEDIATION PLAN FOR IMPROVEMENT; AND**

8           **(13) CREATE A MECHANISM FOR TOP-PERFORMING HOSPITALS TO**  
9 **RECEIVE A FINANCIAL INCENTIVE WITHIN THE INPATIENT PAYMENT SYSTEM.**

10 **8-7C-06.**

11           **ON OR BEFORE JANUARY 1 OF EACH YEAR, THE COMMISSION SHALL**  
12 **REPORT TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2-1246 OF THE**  
13 **STATE GOVERNMENT ARTICLE, THE SENATE BUDGET AND TAXATION**  
14 **COMMITTEE, THE SENATE FINANCE COMMITTEE, THE SENATE EDUCATION,**  
15 **HEALTH, AND ENVIRONMENTAL AFFAIRS COMMITTEE, THE HOUSE**  
16 **APPROPRIATIONS COMMITTEE, AND THE HOUSE HEALTH AND GOVERNMENT**  
17 **OPERATIONS COMMITTEE ON THE IMPLEMENTATION OF THIS SUBTITLE.**

18           **SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect**  
19 **October 1, 2008.**