S T A T E O F N E W Y O R K

886

2009-2010 Regular Sessions

I N A S S E M B L Y

(PREFILED)

January 7, 2009

Introduced by M. of A. McDONOUGH, FINCH -- Multi-Sponsored by -- M. of A. BACALLES, THIELE, TOWNSEND -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to enacting the "hospital infections disclosure act"

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Short title. This act shall be known and may be cited as the "hospital infections disclosure act".

S 2. The public health law is amended by adding a new section 2805-t to read as follows:

S 2805-T. INFECTION REPORTING. 1. FOR THE PURPOSES OF THIS SECTION, "HOSPITAL-ACQUIRED INFECTION" SHALL MEAN ANY LOCALIZED OR SYSTEMIC PATIENT CONDITION THAT:

(A) RESULTS FROM AN ADVERSE REACTION TO THE PRESENCE OF AN INFECTIOUS AGENT OR AGENTS, OR ITS TOXIN OR TOXINS; AND

(B) WAS NOT PRESENT OR INCUBATING AT THE TIME OF THE PATIENT'S ADMISSION TO THE HOSPITAL.

2. ALL HOSPITALS SHALL COLLECT AND MAINTAIN RECORDS OF DATA ON HOSPITAL-ACQUIRED INFECTION RATES FOR SPECIFIC SURGICAL PROCEDURES AND/OR SURVEILLANCE IN CRITICAL CARE AND/OR INTENSIVE CARE UNITS PERFORMED BY THE HOSPITAL, AS DETERMINED BY THE COMMISSIONER, INCLUDING THE FOLLOWING TYPES OF INFECTIONS:

(A) SURGICAL SITE INFECTIONS;

(B) VENTILATOR ASSOCIATED PNEUMONIA;

(C) CENTRAL LINE RELATED BLOODSTREAM INFECTIONS;

(D) URINARY TRACT CATHETER INFECTIONS; AND

(E) SUCH OTHER TYPES OF INFECTIONS AS SHALL BE DETERMINED BY THE COMMISSIONER.

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets [ ] is old law to be omitted.

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3. EACH YEAR ON OR BEFORE APRIL THIRTIETH, JULY THIRTY-FIRST, OCTOBER THIRTY-FIRST AND JANUARY THIRTY-FIRST, EACH HOSPITAL SHALL REPORT ALL DATA COLLECTED ON HOSPITAL-ACQUIRED INFECTIONS IN SUCH HOSPITAL DURING THE IMMEDIATELY PRECEDING QUARTER.

4. EACH YEAR ON OR BEFORE MARCH FIRST, THE DEPARTMENT SHALL SUBMIT A REPORT TO THE GOVERNOR AND THE LEGISLATURE SUMMARIZING THE DATA INCLUDED IN THE HOSPITAL QUARTERLY REPORTS FOR THE PREVIOUS CALENDAR YEAR. IN ADDITION, SUCH REPORT SHALL BE AVAILABLE TO THE PUBLIC UPON REQUEST.

5. THE COMMISSIONER SHALL ESTABLISH AND APPOINT MEMBERS TO AN ADVISORY COMMITTEE. THE MEMBERS OF THE ADVISORY COMMITTEE SHALL INCLUDE REPRESENTATION OF INFECTION CONTROL DEPARTMENTS OF BOTH PUBLIC AND PRIVATE HOSPITALS, PHYSICIANS, EPIDEMIOLOGISTS WITH HOSPITAL ACQUIRED INFECTION EXPERTISE, ACADEMIC RESEARCHERS, HEALTH INSURERS, HEALTH MAINTENANCE ORGANIZATIONS, ORGANIZED LABOR, CONSUMER ORGANIZATIONS AND PURCHASERS OF INSURANCE, SUCH AS EMPLOYERS. THE MAJORITY OF THE MEMBERS OF THE ADVISORY COMMITTEE SHALL REPRESENT INTERESTS OTHER THAN HOSPITALS.

6. THE ADVISORY COMMITTEE SHALL WORK WITH THE COMMISSIONER AND THE DEPARTMENT TO ESTABLISH THE STANDARDS, RULES AND REGULATIONS NECESSARY TO IMPLEMENT THE PROVISIONS OF THIS SECTION. IN ADDITION, AS DIRECTED BY THE COMMISSIONER ON A REGULAR BASIS, THE DEPARTMENT AND THE ADVISORY COMMITTEE SHALL EVALUATE THE DATA COLLECTED FROM HOSPITALS PURSUANT TO THIS SECTION, AS WELL AS THE DATA COLLECTION, ANALYSIS AND DISSEMINATION METHODOLOGIES.

7. WHILE IT SHALL BE IN THE DEPARTMENT'S DISCRETION TO ADOPT A METHODOLOGY FOR THE COLLECTION AND ANALYSIS OF ALL INFECTION RATE DATA, IN DEVELOPING SUCH METHODOLOGY THE DEPARTMENT AND THE ADVISORY COMMITTEE SHALL CONSIDER THE EXISTING METHODOLOGIES AND SYSTEMS FOR DATA COLLECTION INCLUDING, BUT NOT LIMITED TO, THE CENTER FOR DISEASE CONTROL'S NATIONAL NOSOCOMIAL INFECTION SURVEILLANCE PROGRAM, OR ITS SUCCESSOR. THE DATA COLLECTION AND ANALYSIS METHODOLOGY SHALL BE DISCLOSED TO THE PUBLIC PRIOR TO ANY PUBLIC DISCLOSURE OF HOSPITAL-ACQUIRED INFECTION RATES.

S 3. This act shall take effect on the one hundred twentieth day after it shall have become a law; provided, however, that effective immediately, the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date are authorized and directed to be made and completed on or before such effective date; provided, further, that subdivisions 2, 3 and 4 of section 2805-t of the public health law, as added by section two of this act, shall take effect one year after the rules and regulations to implement the provisions of such section of the public health law are promulgated; provided, further, that the commissioner of health shall notify the legislative bill drafting commission upon the promulgation of the rules and regulations necessary to implement the provisions of section 2805-t of the public health law, as added by section two of this act, in order that such commission may maintain an accurate and timely effective data base of the official text of the laws of the state of New York in furtherance of effecting the provisions of section 44 of the legislative law and section 70-b of the public officers law.