MAINE STATE LEGISLATURE

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I	L.D. 1087
2	Date: $3/31/10$ (Filing No. H-8/0)
	Minority (Filling No. H-070)
3	HEALTH AND HUMAN SERVICES
4	Reproduced and distributed under the direction of the Clerk of the House.
5	STATE OF MAINE
6	HOUSE OF REPRESENTATIVES
7	124TH LEGISLATURE
8	SECOND REGULAR SESSION
9 10 11	COMMITTEE AMENDMENT "To H.P. 1188, L.D. 1687, "Resolve, To Define High-risk Populations for the Purposes of Hospital Surveillance for Methicillin-resistant Staphylococcus Aureus and To Implement Public Law 2009, chapter 346"
12	Amend the resolve by striking out all of sections 1 and 2 and inserting the following:
13 14 15	'Sec. 1. Implementation of law. Resolved: That, in order to implement the Maine Revised Statutes, Title 22, section 8761, the Maine Quality Forum shall by July 1, 2010:
16 17	1. Define high-risk populations for the purposes of surveillance for methicillin- resistant Staphylococcus aureus in all hospitals in this State as persons who:
18 19 20	A. Are all critical care patients in all specialties, categorized by level of care rather than location of care, immunocompromised patients, dialysis patients and all surgical patients who have or are getting implants;
21	B. Have had antibiotic therapy either repeatedly or within the recent past;
22	C. Have had frequent and repeated health care contacts within the last year;
23 24	D. Are long-term care patients, rehabilitation facility patients or nursing facility patients;
25 26	E. Have previously had methicillin-resistant Staphylococcus aureus or have been caregivers for such persons;
27	F. Have any open wound or lesion that appears to be infectious;
28 29	G. Have an indwelling catheter or other foreign body such as a feeding tube or central line;
30	H. Are transferred from a prison or jail;
31	I. Are homeless; or

J. Take drugs intravenously; and

COMMITTEE AMENDMENT " to H.P. 1188, L.D. 1687

2. Require screening by hospitals for all high-risk populations up to 10 days prior to 1 2 elective admission, upon admission or within 12 hours after admission and, for those 3 persons screened negative upon admission, require repeat screening: 4 A. One week after admission and weekly after that; 5 B. Upon transfer to a different critical care setting; and 6 C. Prior to discharge; and be it further 7 Sec. 2. Rulemaking. Resolved: That, by July 1, 2010, the Maine Health Data 8 Organization shall adopt rules pursuant to the Maine Revised Statutes, Title 22, section 8708-A and Resolve 2009, chapter 82 to require the reporting of the results of screening 9 and all other clinical cultures for methicillin-resistant Staphylococcus aureus by all 10 11 hospitals in the State. 12 1. The rules must require that hospitals report to the Maine Quality Forum working group on multidrug-resistant organisms, the Maine Health Data Organization and the 13 Department of Health and Human Services, Maine Center for Disease Control and 14 15 Prevention all positive tests for methicillin-resistant Staphylococcus aureus, including a designation of the infection as acquired in the community or hospital, based on a brief 16 patient interview and the timing of acquisition of the infection. 17 18 2. The rules must require reported infection data to be made available to the public 19 through a publicly accessible website. 20 3. The rules must enable reported test results to form the foundation for evaluating the progress of screening of high-risk populations and a new policy for the prevention of 2.1 22 epidemiologically significant organisms, including methicillin-resistant Staphylococcus 23 aureus. 24 4. Rules adopted pursuant to this section are routine technical rules as defined in 25 Title 5, chapter 375, subchapter 2-A; and be it further 26 Sec. 3. Appropriations and allocations. **Resolved:** That the following 27 appropriations and allocations are made. 28 CORRECTIONS, DEPARTMENT OF 29 **Correctional Medical Services Fund 0286** 30 Initiative: Provides funds for testing costs.

31 32 33	All Other	2009-10 \$0	\$2,219
34.	GENERAL FUND TOTAL	\$0	\$2,219
35	CORRECTIONS, DEPARTMENT OF		
36 37	DEPARTMENT TOTALS	2009-10	2010-11

COMMITTEE AMENDMENT " to H.P. 1188, L.D. 1687



1	GENERAL FUND	\$0	\$2,219
2 3	DEPARTMENT TOTAL - ALL FUNDS	\$0	\$2,219
4	CORRECTIONS, STATE BOARD OF		
5	State Board of Corrections Investment Fund Z087		
6	Initiative: Provides funds for testing costs.		
7 8	GENERAL FUND All Other	2009-10 \$0	2010-11 \$2,219
9	All Other	ΨΟ	Ψ2,217
10	GENERAL FUND TOTAL	* \$0	\$2,219
11	CORRECTIONS, STATE BOARD OF	2000 10	2010 11
12 13	DEPARTMENT TOTALS	2009-10	2010-11
14	GENERAL FUND	\$0	\$2,219
15 16	DEPARTMENT TOTAL - ALL FUNDS		\$2,219
17	HEALTH AND HUMAN SERVICES, DEPARTMENT	OF (FORMERI	Y BDS)
18	Dorothea Dix Psychiatric Center 0120		,
19	Initiative: Provides allocation for testing costs.		
20 21 22	OTHER SPECIAL REVENUE FUNDS All Other	2009-10 \$0	2010-11 \$25,650
23	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	\$25,650
24	Riverview Psychiatric Center 0105		
25	Initiative: Provides allocation for testing costs.		
26 27 28	OTHER SPECIAL REVENUE FUNDS All Other	2009-10 \$0	2010-11 \$107,577
29	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	\$107,577

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COMMITTEE AMENDMENT

COMMITTEE AMENDMENT " to H.P. 1188, L.D. 1687

1 2 3 4	HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY BDS) DEPARTMENT TOTALS	2009-10	2010-11
5	OTHER SPECIAL REVENUE FUNDS	\$0	\$133,227
6 7	DEPARTMENT TOTAL - ALL FUNDS	\$0	\$133,227
8 9	SECTION TOTALS	2009-10	2010-11
10	GENERAL FUND	\$0	\$4,438
11	OTHER SPECIAL REVENUE FUNDS	. \$0	\$133,227
12 13 14	SECTION TOTAL - ALL FUNDS	\$0	\$137,665
15	SUMMARY		
16 17 18 19 20 21 22 23 24	This amendment is the minority report of the committee. It requires the Maine Quality Forum to define high-risk populations for the purposes of surveillance for methicillin-resistant Staphylococcus aureus and provides the definition. It directs the Maine Quality Forum to require screening of all high-risk populations, with some rescreening. It requires the Maine Health Data Organization to adopt routine technical rules requiring that hospitals report the results of all screening and clinical cultures for methicillin-resistant Staphylococcus aureus. It specifies what additional information must be reported by the hospitals. The amendment also adds an appropriations and allocations section.		
25	FISCAL NOTE REQUIRED		
26	(See attached)		

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124th MAINE LEGISLATURE

LD 1687

LR 2198(02)

Resolve, To Define High-risk Populations for the Purposes of Hospital Surveillance for Methicillinresistant Staphylococcus Aureus and To Implement Public Law 2009, chapter 346

Fiscal Note for Bill as Amended by Committee Amendment "H"

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

	2009-10	2010-11	Projections 2011-12	Projections 2012-13
Net Cost (Savings)	2007 10	2010 11		
General Fund	\$0	\$4,438	\$4,438	\$4,438
ppropriations/Allocations				
General Fund	\$0	\$4,438	\$4,438	\$4,438
Other Special Revenue Funds	\$0	\$133,227	\$133,227	\$133,227

Fiscal Detail and Notes

This bill includes a General Fund appropriation of \$2,219 in fiscal year 2010-11 for the Department of Corrections and \$2,219 for the State Board of Corrections to support the additional cost to test certain prisoners. This bill also includes Other Special Revenue Funds allocations of \$25,650 for Dorothea Dix Psychiatric Center and \$107,577 for Riverview Psychiatric Center for the additional testing costs at the 2 state hospitals. The accounts receiving allocation already have sufficient funds to cover the allocations. Any additional costs to the Maine Health Data Organization and the Maine Quality Forum in the Dirigo Health Agency can be absorbed utilizing existing budgeted resources.