

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)

SMS
ROPS

L.D. 1212

Date: 5/31/11

(Filing No. H-410)

HEALTH AND HUMAN SERVICES

Reproduced and distributed under the direction of the Clerk of the House.

STATE OF MAINE
HOUSE OF REPRESENTATIVES
125TH LEGISLATURE
FIRST REGULAR SESSION

COMMITTEE AMENDMENT "A" to H.P. 903, L.D. 1212, Bill, "An Act To Improve Hospital Reporting of MRSA Data"

Amend the bill by striking out the title and substituting the following:

'An Act To Improve Hospital Reporting of MRSA and Clostridium difficile Data'

Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

'Sec. 1. 22 MRSA §8761, as enacted by PL 2009, c. 346, §1, is repealed and the following enacted in its place:

§8761. Methicillin-resistant Staphylococcus aureus and Clostridium difficile

All hospitals licensed under chapter 405 shall:

1. Enrollment. No later than October 1, 2011, enroll and shall maintain enrollment after that date in the National Healthcare Safety Network within the United States Department of Health and Human Services, Centers for Disease Control and Prevention, Division of Healthcare Quality Promotion, referred to in this section as "the network";

2. Submission of MRSA data. No later than October 1, 2011, submit to the network infection data for nosocomial methicillin-resistant Staphylococcus aureus, referred to in this section as "MRSA," for all inpatients on a monthly basis in accordance with the protocols defined by the United States Department of Health and Human Services, Centers for Disease Control and Prevention;

3. Access to MRSA data. No later than November 1, 2011, authorize, for public health surveillance purposes only, the Maine Center for Disease Control and Prevention's access to the facility-specific infection rates for nosocomial MRSA contained in the network database;

4. Authorization to Maine Health Data Organization regarding MRSA data. Upon completion of data validation by the Maine Center for Disease Control and Prevention in partnership with a statewide collaborative for infection prevention,

ROFS

authorize, for public reporting purposes only, the Maine Health Data Organization's access to the facility-specific infection rates for nosocomial MRSA contained in the network database;

5. **Submission of C. diff data.** Beginning January 1, 2012, submit to the network infection data for nosocomial Clostridium difficile, referred to in this section as "C. diff," for all inpatients on a monthly basis in accordance with the protocols defined by the United States Department of Health and Human Services, Centers for Disease Control and Prevention;

6. **Access to C. diff data.** No later than July 1, 2012, authorize, for public health surveillance purposes only, the Maine Center for Disease Control and Prevention's access to the facility-specific infection rates for nosocomial C. diff contained in the network database; and

7. **Authorization to Maine Health Data Organization regarding C. diff data.** Upon completion of data validation by the Maine Center for Disease Control and Prevention in partnership with a statewide collaborative for infection prevention, authorize, for public reporting purposes only, the Maine Health Data Organization's access to the facility-specific infection rates for nosocomial C. diff contained in the network database.

The Maine Health Data Organization shall adopt rules regarding public reporting of data reported to the United States Department of Health and Human Services, Centers for Disease Control and Prevention regarding MRSA and C. diff in accordance with this section. Rules adopted pursuant to this section are major substantive rules as defined in Title 5, chapter 375, subchapter 2-A.

Sec. 2. Rulemaking. The Department of Health and Human Services shall undertake the rulemaking required by the Maine Revised Statutes, Title 22, section 8761 and must provisionally adopt and submit to the Legislature the rules on public reporting of data reported to the United States Department of Health and Human Services, Centers for Disease Control and Prevention regarding methicillin-resistant Staphylococcus aureus and Clostridium difficile no later than January 15, 2012.

Sec. 3. Maine Revised Statutes headnote amended; revision clause. In the Maine Revised Statutes, Title 22, chapter 1684-A, in the chapter headnote, the words "screening for methicillin-resistant staphylococcus aureus" are amended to read "screening for methicillin-resistant staphylococcus aureus and clostridium difficile" and the Revisor of Statutes shall implement this revision when updating, publishing or republishing the statutes.'

SUMMARY

This amendment strikes the bill. It replaces the existing methicillin-resistant Staphylococcus aureus, or MRSA, screening protocol that was adopted in 2009, which focuses on the presence of MRSA in patients as they are admitted to a hospital, with a protocol that focuses on MRSA infections that occur in the patient population while at hospitals. The amendment adds a 2nd multidrug resistant organism, Clostridium difficile, to the data collection and public reporting system. The amendment also provides the Maine Center for Disease Control and Prevention time to validate the data that was

ROFS

COMMITTEE AMENDMENT "A" to H.P. 903, L.D. 1212

1
2

reported by the hospitals and requires the public reporting of that data following validation.

FISCAL NOTE REQUIRED
(See attached)

COMMITTEE AMENDMENT



R O F S

125th MAINE LEGISLATURE

LD 1212

LR 1239(02)

An Act To Improve Hospital Reporting of MRSA Data

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

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - General Fund

Minor cost increase - Other Special Revenue Funds

Fiscal Detail and Notes

Additional costs to the Maine Center for Disease Control and Prevention in the Department of Health and Human Services and to the Maine Health Data Organization can be absorbed within exiting budgeted resources.