FINAL BILL REPORT HB 1739

C 207 L 22

Synopsis as Enacted

Brief Description: Modernizing hospital policies related to pathogens of epidemiological concern.

Sponsors: Representatives Maycumber, Cody and Ramos.

House Committee on Health Care & Wellness Senate Committee on Health & Long Term Care

Background:

Staphylococcus aureus, or "staph," are bacteria that live on the skin and can cause infections ranging from pimples or boils to more serious infections of the internal organs. The majority of staph infections are minor and do not require treatment with antibiotics. More severe staph infections, however, are often treated with antibiotics. Methicillin-resistant staphylococcus aureus (MRSA) is a strain of staph that has become resistant to methicillin and other antibiotics.

Each licensed hospital in Washington is required to have a policy on MRSA. The policy must contain the following elements:

- a requirement that the hospital test any patient for MRSA who is a member of a
 patient population identified as appropriate based on the hospital's MRSA risk
 assessment;
- a requirement that a patient in the adult or pediatric ICU be tested for MRSA within 24 hours of admission unless the patient has already been tested during that hospital stay or has a previous history of MRSA;
- appropriate procedures for preventing a patient who tests positive for MRSA from transmitting MRSA to other patients, including isolation, notification, and cohorting; and
- a requirement that every patient with a MRSA infection receive oral and written instructions regarding aftercare and precautions against spreading the infection.

House Bill Report - 1 - HB 1739

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

A hospital that has identified a hospitalized patient with a MRSA diagnosis must report the infection to the Department of Health using the state's Comprehensive Hospital Abstract Reporting System. When making the report, the hospital must use codes used by the United States Centers for Medicare and Medicaid Services, when available.

Summary:

By January 1, 2023, each licensed hospital in Washington must broaden its methicillin-resistant staphylococcus aureus (MRSA) policy to include the prevention and control of the transmission of pathogens of epidemiological concern, instead of only MRSA. The elements of the policy specific to MRSA are eliminated. Instead, the policy must include:

- a facility risk assessment to identify pathogens of epidemiological concern that
 considers elements such as the probability of occurrence as determined via
 surveillance, potential impact, and measures the hospital has implemented to mitigate
 the risk to patients, health care workers, and visitors; and
- appropriate evidence-based procedures and intervention strategies to identify and help prevent patients from transmitting pathogens of epidemiological concern to other patients and health care workers.

When a hospital identifies a patient through appropriate testing who has a pathogen of epidemiological concern that is required to be reported to the United States Centers for Disease Control and Prevention's National Healthcare Safety Network, the hospital must make the report as required by the United States Centers for Medicare and Medicaid Services. The requirement for MRSA infections to be reported to the state's Comprehensive Hospital Abstract Reporting System is eliminated.

Votes on Final Passage:

House 96 0 Senate 48 0

Effective: June 9, 2022