Guidance for New Health Care-Associated Infection Reporting Requirements

Effective Jan. 1, Texas hospitals' requirements for reporting health care-associated infections will change. Hospitals will report the same HAI data to the state as is reported to the Centers for Medicare & Medicaid Services. The Texas Hospital Association offers the following guidance to help hospitals navigate the new requirements and answer potential questions about the reporting changes.

Duplicative and inconsistent requirements for the reporting of HAIs undermine the intent of reporting, which is to drive increased patient safety and better outcomes.

During the 2019 legislative session, THA helped pass Senate Bill 384 to align state reporting requirements for HAIs with existing federal requirements, thereby eliminating duplication and unnecessary regulatory burden.

CMS' current and proposed requirements are available here.

Reporting Requirements

The reporting changes impact general hospitals licensed under Chapter 241 of the Health & Safety Code and ambulatory surgery centers licensed under Chapter 243 of the Health & Safety Code. These changes impact facilities licensed under Chapter 241 and 243, regardless of participation in CMS. In addition, the following reporting changes do not affect reporting of preventable adverse events. PAE reporting still is required for all general hospitals and ambulatory surgery centers.

General Hospitals: General hospitals will follow the CMS Hospital Inpatient Quality Reporting Program requirements:

- Central line-associated bloodstream infections from:
  - Adult, pediatric and neonatal intensive care units.
  - Adult and pediatric medical wards.
  - Adult and pediatric surgical wards.
  - Adult and pediatric medical/surgical wards.
- Catheter-associated urinary tract infections from:
  - Adult and pediatric intensive care units.
  - Adult and pediatric medical wards.
  - Adult and pediatric surgical wards.

    - Adult and pediatric medical/surgical wards.
- Surgical site infections following inpatient colon and abdominal hysterectomy procedures.
- Methicillin-resistant *Staphylococcus aureus* (MRSA*)* bacteremia lab identification events and *Clostridioides difficile* (*C*. *difficile*) lab ID events for facility-wide inpatient location. This includes all inpatient locations, observation patients housed in an inpatient location, outpatient emergency departments and 24-hour observation locations.

Ambulatory Surgery Centers: Because CMS does not currently require HAI data reporting from ASCs, **surgical procedures occurring on and after Jan. 1, along with any associated surgical site infections, will no longer need to be reported via the National Healthcare Safety Network for the purposes of Texas mandatory reporting**.

Children's Hospitals: Although children's hospitals are excluded from CMS reporting because they are included in Chapter 98 of the state mandate for reporting, for the purposes of state HAI reporting, **they will follow the same reporting requirements as general hospitals.**

- Central line-associated bloodstream infections from:
    - Adult, pediatric and neonatal ICUs.
    - Adult and pediatric medical wards.
    - Adult and pediatric surgical wards.
    - Adult and pediatric medical/surgical wards.
- Catheter-associated urinary tract infections from:
    - Adult and pediatric ICUs.
    - Adult and pediatric medical wards.
    - Adult and pediatric surgical wards.
    - Adult and pediatric medical/surgical wards.
- Surgical site infections following inpatient colon and abdominal hysterectomy procedures.
- Methicillin-resistant *Staphylococcus aureus* (MRSA) bacteremia lab ID events and *Clostridioides difficile* (*C*. *difficile*) lab ID events for facility-wide inpatient location. This includes all inpatient locations, observation patients housed in an inpatient location, outpatient emergency departments and 24-hour observation locations.

Cancer Hospitals: Cancer hospitals will be required to follow the CMS Prospective Payment System-Exempt Cancer Hospital Quality Reporting Program requirements, which include:

- Central line-associated bloodstream infections from all bedded inpatient locations.
- Catheter-associated urinary tract infections from all bedded inpatient locations.
- Surgical site infections following inpatient colon and abdominal hysterectomy procedures.
- Methicillin-resistant *Staphylococcus aureus* (MRSA) bacteremia lab ID events and *Clostridioides difficile* (*C*. *difficile*) lab ID events for facility-wide inpatient location. This includes all inpatient locations, observation patients housed in an inpatient location, outpatient emergency departments and 24-hour observation locations.

Data Publication

While all changes are effective Jan. 1, MRSA bacteremia lab ID event and *C. difficile* lab ID event data will not be displayed on either of the 2020 facility-specific data display reports. The Texas Healthcare Safety Network will need to undergo modifications to add those data to the reports. The Texas Department of State Health Services anticipates that the lab ID event data may be available for posting for HAI data collected in 2022.