Presentation Overview

1. Privacy
2. HAI Legislation
3. Reporting Requirements
4. Reporting Time-Line
5. Preparation for Reporting
Important message about HIPAA Privacy Standards to providers and entities that submit protected health information to the Texas Department of State Health Services

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy regulations implemented standards for how information that identifies a patient can be used and disclosed. (Title 45, Code of Federal Regulations (CFR), Parts 160 and 164) The regulations apply to "covered entities" including health-care plans, health-care clearinghouses, and health-care providers. These privacy standards go into effect on April 14, 2003.

The regulations were amended in August 2002 deleting the requirement to obtain an individual’s consent for the use and disclosure of private health information for treatment, payment and health care operations. (45 CFR §164.506).

You can continue to submit information you currently submit to DSHS under one or more of the following exceptions in the HIPAA Privacy Standards:

- **USE AND DISCLOSURE REQUIRED BY LAW:**
  Section 164.512(a) allows covered entities to use and disclose private health information if the use or disclosure is required by law. For example, DSHS rules require certain diseases, injuries and conditions to be reported to DSHS. Under the "required by law" exception you can continue to comply with these mandatory reporting rules.

- **USE AND DISCLOSURE FOR PUBLIC HEALTH ACTIVITIES:**
  Section 164.512(b) permits covered entities to release private health information to a public health authority that is authorized by law to collect and receive information for preventing and controlling disease, injury, or disability. This information includes reporting of; disease, injury, vital statistics like births, deaths, marriages,
Legislation Background

- **78th legislative Session (2005)** passed study bill
  - Advisory Panel, White Paper
- **79th legislative Session (2007)** passed SB 288
  - Reporting provisions
- **80th legislative Session (2009)** passed SB 203: Amended SB 288 (Chapter 98)
  - Added two members to AP
  - 28 PAE
- **82nd Legislative Session**
  - To allow use of NHSN
Reporting Requirements

Who is required to report?

• Ambulatory Surgical Centers – SSIs
  • Licensed under Chapter 243
• General Hospitals – CLABSIs & SSIs
  • Licensed under Chapter 241
• Hospital that provides surgical or obstetrical services that is maintained or operated by the state
  • Includes LTACs and Critical Access Hospitals

DOES NOT INCLUDE COMPREHENSIVE MEDICAL REHABILITATION HOSPITALS
Reporting Requirements

Reportable healthcare-associated infections

› **Central line-associated bloodstream infections** in special care settings (unit or hospital service that provides treatment to inpatients who require extraordinary care on a concentrated and continuous basis, such as ICUs & CCUs)

› **Surgical site infections** (see ICD-9 codes in rules)
  - **PEDIATRIC/ADOLESCENT HOSPITALS**: Cardiac procedures, spinal surgery with instrumentation, and ventriculoperitoneal shunt procedures
  - **ALL OTHER HOSPITALS**: Colon surgeries, hip & knee arthroplasties, abdominal & vaginal hysterectomies, vascular procedures, and coronary artery bypass grafts
Beginning 2011

- All facilities report CLABSIs in specialty care areas
- Surgical centers and general hospitals report knee arthroplasties
  - Knee arthroplasties ICD-9th Revision codes; Knee prosthesis – 00.80-00.84, 81.54 and 81.55
- Pediatric hospitals report ventriculoperitoneal shunts
  - Ventriculoperitoneal shunts ICD-9th Revision codes; Ventriculoperitoneal shunts including revision and removal of shunt – 02.2, 02.31-02.35, 02.39, 02.42, 04.43 and 54.95
Phased in Reporting

Beginning in January 2012

- Surgical centers and general hospitals report hip arthroplasties, coronary artery bypass grafts
- Pediatric hospitals report cardiac procedures

Beginning January 2013

- Surgical centers and general hospitals report abdominal & vaginal hysterectomies, colon surgeries, and vascular procedures
- Pediatric hospitals report spinal surgeries with instrumentation

* Tentative date
### Proposed Reporting Time Line

<table>
<thead>
<tr>
<th>Reporting Quarter</th>
<th>Jan 1 – Mar 31</th>
<th>April 1 – June 30</th>
<th>July 1 – Sept 30</th>
<th>Oct 1 – Dec 31</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility data submission deadline</td>
<td>31-May</td>
<td>31-Aug</td>
<td>30-Nov</td>
<td>28-Feb</td>
</tr>
<tr>
<td>DSHS data reconciliation performed</td>
<td>15-Jun</td>
<td>15-Sep</td>
<td>15-Dec</td>
<td>15-Mar</td>
</tr>
<tr>
<td>Facility corrections due</td>
<td>30-Jun</td>
<td>30-Sep</td>
<td>31-Dec</td>
<td>31-Mar</td>
</tr>
<tr>
<td>DSHS data summary to facilities</td>
<td>NA</td>
<td>15-Oct</td>
<td>NA</td>
<td>15-Apr</td>
</tr>
<tr>
<td>Facility comment period</td>
<td>NA</td>
<td>30-Oct</td>
<td>NA</td>
<td>30-Apr</td>
</tr>
<tr>
<td>DSHS review of comments</td>
<td>NA</td>
<td>15-Nov</td>
<td>NA</td>
<td>15-May</td>
</tr>
<tr>
<td>Public posting of summary</td>
<td>NA</td>
<td>1-Dec</td>
<td>NA</td>
<td>1-Jun</td>
</tr>
</tbody>
</table>
Reporting Preparation

• **Enroll your facility in NHSN using CMS Provider #**
  - May need to request an enrollment #

• **Establish facility contacts for communication with TEXAS:** Select a primary and secondary contact responsible for coordinating communications related to data submissions, verifications and approval of data summary.
  - You may want to establish a general facility email address. For example:
    - NHSNusers@yourhospital.com
HAI Reporting on the Web
HAI Reporting on the Web

HAI Search Results

Austin American Sleep Diagnostic Center - other information (address, ...)
Austin Heart Center - other information (address, ...)
Austin Office of Rural Health - other information (address, ...)
Austin State Hospital - other information (address, ...)
Austin Women's Hospital - other information (address, ...)
Austin-Travis County Tuberculosis Sanatorium - other information (address, ...)
Brackenridge Hospital - other information (address, ...)
Brown Schools Rehabilitation Center - other information (address, ...)
Disability and Impairment Assessment Center - other information (address, ...)
Health South Surgical Hospital - other information (address, ...)

Current Brief Report
Current Extended Report
Historical Reports

New Search
### Central-Line Associated Bloodstream Infection (CLABSI) Standardized Infection

<table>
<thead>
<tr>
<th>Unit Type</th>
<th>CLABSI SIR</th>
<th>Statistical Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NICU</td>
<td>⭐⭐⭐</td>
<td>Better than the national experience</td>
</tr>
<tr>
<td>ICU-OTHER</td>
<td>⭐⭐</td>
<td>About the same as the national experience</td>
</tr>
</tbody>
</table>

### Surgical Site Infections (SSI) Standardized Infection Ratio (SIR)

<table>
<thead>
<tr>
<th>Surgery Type</th>
<th>SSI SIR</th>
<th>Statistical Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knee prosthesis:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td>⭐⭐⭐</td>
<td>Better than the national experience</td>
</tr>
<tr>
<td>Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hip prosthesis:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td>⭐⭐⭐</td>
<td>Better than the national experience</td>
</tr>
<tr>
<td>Outpatient</td>
<td>⭐⭐⭐</td>
<td>Not enough data</td>
</tr>
<tr>
<td>Coronary artery bypass graft with both chest and donor site incisions:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coronary artery bypass graft with chest incision only:</td>
<td></td>
<td></td>
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<tr>
<td>Inpatient</td>
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<td></td>
</tr>
</tbody>
</table>
### Central-Line Associated Bloodstream Infection (CLABSI) Standardized Infection Ratio (SIR)

<table>
<thead>
<tr>
<th>Unit Type</th>
<th>Observed No. of CLABSI</th>
<th>No. of Central Time Days</th>
<th>Predicted No. of CLABSI</th>
<th>CLABSI SIR</th>
<th>Statistical Interpretation</th>
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<th>No. of Procedures</th>
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National Healthcare Safety Network (NHSN)

Begin Enrollment Process

Enrolling in NHSN is a multiple step process, outlined below, that is completed by the person designated to serve as the Facility Administrator. The steps must be followed in the order listed to ensure a successful enrollment.

The person designated as the NHSN Facility Administrator is the only person who can enroll a facility in NHSN or reassign the role of Facility Administrator. This person will also have the ability to nominate groups, that is, entities with which your hospital wants to share some/all of its data (e.g., state or county health department, corporate headquarters).

For complete detailed enrollment instructions please download the NHSN Facility Administrator Enrollment Guide. A step-by-step start-up guide for enrolling a facility in NHSN. October 2010.

Before attempting to enroll, as the Facility Administrator you must:

- Review the following documents and fulfill training requirements:

When you have completed the required trainings and read the above documents, you are ready to enroll. Follow the steps below to complete the enrollment process.

**NOTE:** Please make sure that your email system will not block emails from nhsn@cdc.gov and PHITech@cdc.gov before beginning enrollment.

1. Read the **NHSN Rules of Behavior**.
   - In order to participate in the NHSN, you must read and agree to abide by the following rules of behavior for safeguarding the system’s security.
2. Register your facility in the NHSN.
   - After agreeing to the rules of behavior, you will be taken to the NHSN Registration page.
For Texas HAI reporting questions:
Office: (512) 776-3773

Email: HAITexas@dshs.state.tx.us

Important Websites:
› www.HAITexas.org
› www.cdc.gov/nhsn