

Synopsis of House Committee Amendments*

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Legislative Service Commission

Sub. S.B. 279 127th General Assembly (H. Health)

Emergency clause

Adds an emergency clause to the bill to "ensure the continuity of medical care for the citizens of this state." The emergency clause exempts the bill from the referendum.

Hospital Measures Advisory Council's (HMAC)

Makes the following changes regarding the recommendations the HMAC data collection and analysis experts group may make for the Director of Health's consideration when adopting rules on hospital reporting measures: (1) prohibits the group from recommending measures identified as time-limited, temporary, or investigational, and (2) permits the group to recommend rules that include measures for hospitals reporting methicillin-resistant staphylococcus aureus (MRSA) and clostridium difficile (CDIFF) consistent with the United States Centers for Disease Control (CDC) National Healthcare Safety Network definitions.

Requires that all measures for which information must be submitted by hospitals be measures developed or endorsed by one of the entities listed in current law.

Requires rules governing hospital performance measures to be reviewed by the Public Health Council prior to adoption by the Director.

Requires the rules adopted by the Director governing hospital submission of performance information to include (1) measures for hospitals reporting methicillinresistant staphylococcus aureus (MRSA) and clostridium difficile (CDIFF) consistent with the CDC National Healthcare Safety Network definitions, and (2) measures recommended by the pediatric medicine group of experts appointed by the Director under the bill. The pediatric recommendations must be developed on an ongoing basis and contain measures for children's hospital inpatient and outpatient services.

^{*} This synopsis does not address amendments that may have been adopted on the House floor.

Prohibits the rules adopted by the Director from doing either of the following (1) requiring a hospital to submit information regarding a performance, quality, or service measure for which the hospital does not provide the service, (2) requiring a children's hospital to report a performance, quality, or service measure for patients age 18 or older, or (3) a hospital to report a performance, quality, or service measure identified as time-limited, temporary, or investigational.

Certificate renewal cycle for limited branches of medicine

Requires the State Medical Board to establish a staggered biennial renewal schedule for limited branch practitioners¹ that is substantially similar to the renewal schedule for physicians. The Board must begin implementation in the 2009 registration period. After an interim renewal period, certificates will expire over the course of a 24-month period according to the first letter of a practitioner's last name, rather than on September 1 of each odd-numbered year. The renewal fee will remain at \$50; however, the renewal fees may be more or less than that during the interim renewal period.

Specifies that the Board must send notices of renewal at least three months before the renewal deadline.

Specifies, within the current law regarding a limited branch practitioner notifying the Board of a change of address, that the notice must be given within 30 days of the change.

Visiting medical faculty certificates

Allows a person who received a visiting medical faculty certificate before the bill's effective date to apply for a second certificate. The second certificate is valid for the length of time authorized by the bill--three years or the duration of the certificate holder's appointment to the medical school's academic staff. The second certificate is non-renewable.

<u>Physician assistants</u>

Allows a physician assistant to certify that a person who has a limited or impaired walking ability is eligible for a windshield disability placard or special disability license plates.

¹ These limited branches of medicine are massage therapy, cosmetic therapy, naprapathy and mechanotherapy (R.C. 4731.15(A)(1)).

Training for expanded function dental auxiliaries

Adds the American Safety and Health Institute to the providers of basic lifesupport training for those who register with the State Dental Board as expanded function dental auxiliaries.

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