

Senate Bill 816

Sponsored by COMMITTEE ON HEALTH CARE (at the request of Oregon Health Authority)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Permits Oregon Health Authority to require hospitals to submit emergency department abstract records, in addition to ambulatory surgery and inpatient discharge abstract records. Permits authority to prescribe by rule abstract record data that hospitals and ambulatory surgery centers must include in records submitted. Permits authority to contract with third party to compile and process data from abstract records.

Deletes requirement that authority reimburse hospital for cost of converting records to form specified by authority if different from form regularly used by hospital.

A BILL FOR AN ACT

1
2 Relating to reporting of health data; amending ORS 442.120.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1.** ORS 442.120 is amended to read:

5 442.120. [*In order to provide data essential for health planning programs:*]

6 (1) **As used in this section, "hospital" has the meaning given that term in ORS 442.015**
7 **(15)(a).**

8 [(1)] **(2) If requested by** the Oregon Health Authority [*may request,*] by July 1 of each year,
9 each [*general hospital to file with*] **hospital shall submit to** the authority ambulatory surgery,
10 [*and*] inpatient discharge **and emergency department** abstract records covering all patients dis-
11 charged during the preceding calendar year. The ambulatory surgery, [*and*] inpatient discharge **and**
12 **emergency department** abstract record for each patient must include the **data, prescribed by the**
13 **authority by rule, that the authority deems necessary to develop or evaluate statewide health**
14 **policy.** [*following information, and may include other information deemed necessary by the authority*
15 *for developing or evaluating statewide health policy:*]

16 [(a) *Date of birth;*]

17 [(b) *Sex;*]

18 [(c) *Race and ethnicity;*]

19 [(d) *Primary language;*]

20 [(e) *Disability;*]

21 [(f) *Zip code;*]

22 [(g) *Inpatient admission date or outpatient service date;*]

23 [(h) *Inpatient discharge date;*]

24 [(i) *Type of discharge;*]

25 [(j) *Diagnostic related group or diagnosis;*]

26 [(k) *Type of procedure performed;*]

27 [(L) *Expected source of payment, if available;*]

28 [(m) *Hospital identification number; and*]

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 *[(n) Total hospital charges.]*

2 [(2)] **(3) If requested by the authority** by July 1 of each year, *[the authority may request*
3 *from]* ambulatory surgical centers licensed under ORS 441.015 **shall submit to the authority**
4 ambulatory surgery discharge abstract records covering all patients admitted during the preceding
5 year. Ambulatory surgery discharge abstract records must include *[information]* **data** similar to that
6 requested from *[general]* hospitals under subsection [(1)] **(2)** of this section.

7 [(3)] **(4) [In lieu of abstracting and compiling the records itself, the authority may solicit the vol-**
8 *untary submission of such data from Oregon hospitals or other sources to enable it to carry out its*
9 *responsibilities under this section. If such data are not available to the authority on an annual and*
10 *timely basis,]* The authority may establish by rule a fee to be charged to each hospital~~.]~~ **and each**
11 **ambulatory surgical center to defray the cost of compiling and processing the data required**
12 **under subsections (2) and (3) of this section. Any fee established under this subsection:**

13 **(a) May not exceed the cost to the authority of abstracting and compiling the records;**

14 **(b) Must be approved by the Oregon Health Policy Board; and**

15 **(c) Must be reported to the Joint Committee on Ways and Means or, if the Legislative**
16 **Assembly is not in session, to the Emergency Board.**

17 **(5) The authority may contract with a third party to collect and process the abstract**
18 **records submitted in accordance with this section. The contract must require the third party**
19 **to transmit to the authority all of the data in the abstract records that the third party col-**
20 **lects and processes.**

21 *[(4) Subject to prior approval of the Oregon Health Policy Board and a report to the Emergency*
22 *Board, if the Legislative Assembly is not in session, prior to adopting the fee, and within the budget*
23 *authorized by the Legislative Assembly as the budget may be modified by the Emergency Board, the*
24 *fee established under subsection (3) of this section may not exceed the cost of abstracting and compiling*
25 *the records.]*

26 [(5)] **(6)** The authority may specify by rule the form in which the **abstract** records are to be
27 submitted **in accordance with this section.** *[If the form adopted by rule requires conversion from the*
28 *form regularly used by a hospital, reasonable costs of such conversion shall be paid by the authority.]*

29 [(6)] **(7) [Abstract records] Each abstract record submitted in accordance with this section**
30 **must include a patient identifier that allows for the statistical matching of records over time to**
31 **permit public studies of issues related to clinical practices, health service utilization and health**
32 **outcomes. Provision of such a patient identifier must not allow for identification of the individual**
33 **patient.**

34 [(7) *In addition to the records required in subsection (1) of this section, the authority may obtain*
35 *abstract records for each patient that identify specific services, classified by International Classification*
36 *of Disease Code, for special studies on the incidence of specific health problems or diagnostic practices.*
37 *However, nothing in this subsection shall authorize the publication of specific data in a form that al-*
38 *lows identification of individual patients or licensed health care professionals.]*

39 **(8)** The authority may provide by rule for the submission of **abstract** records for enrollees in a
40 health maintenance organization from a hospital associated with such an organization in a form the
41 authority determines appropriate to the authority's needs for such data and the organization's re-
42 cord keeping and reporting systems for charges and services.

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