

Healthcare-Associated Infection (HAI) Reporting Alignment

[Senate Bill 384](#), 86th Legislature, Regular Session, 2019 requires healthcare facilities to report the same HAI data to Texas as is reported for the Centers for Medicare and Medicaid Services (CMS). The current and proposed CMS requirements can be found at <https://www.cdc.gov/nhsn/pdfs/cms/cms-reporting-requirements.pdf>.

The rationale for alignment is to relieve the burden on healthcare facilities by streamlining the reporting requirements between Texas and CMS. This will also allow for more rapid adaptability if CMS changes reporting requirements.

The following changes DO NOT affect preventable adverse event (PAE) reporting. PAE reporting is still required for all General Hospitals and Ambulatory Surgery Centers (ASCs).

Reporting Changes

Who is required to report: The bill did not change the healthcare facilities that are required to report. Healthcare facilities affected by these changes include, regardless of the facility's participation in CMS: general hospitals licensed under Chapter [241](#) (a hospital that provides surgical or obstetrical services and that is maintained or operated by this state, but excluding comprehensive medical rehabilitation hospitals), and Ambulatory Surgery Centers licensed under Chapter [243](#).

Ambulatory Surgery Centers: Because CMS does not currently require HAI data reporting from ASCs, **surgical procedures occurring on and after January 1, 2020, along with any associated surgical site infections, will no longer need to be reported via the National Healthcare Safety Network (NHSN) for the purposes of Texas Mandatory Reporting.**

General Hospitals: These facilities will follow the CMS Hospital Inpatient Quality Reporting (IQR) Program reporting requirements:

- Central Line-Associated Bloodstream Infections (CLABSI) from Adult ICUs, Pediatric ICUs, Neonatal ICUs, Adult & Pediatric Medical Wards, Adult & Pediatric Surgical Wards, and Adult & Pediatric Medical/Surgical Wards.

- Catheter-Associated Urinary Tract Infections (CAUTIs) from Adult ICUs, Pediatric ICUs, Adult & Pediatric Medical Wards, Adult & Pediatric Surgical Wards, and Adult & Pediatric Medical/Surgical Wards.
- Surgical Site Infections (SSIs) 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).

Children's Hospitals: Although these facilities are excluded from CMS reporting, because they are included in Chapter 98 of the state mandate for reporting, for the purposes of Texas state HAI reporting, **these facilities will follow the same reporting requirements as their adult counterparts:**

- Central Line-Associated Bloodstream Infections (CLABSI) from Adult ICUs, Pediatric ICUs, Neonatal ICUs, Adult & Pediatric Medical Wards, Adult & Pediatric Surgical Wards, and Adult & Pediatric Medical/Surgical Wards.
- Catheter-Associated Urinary Tract Infections (CAUTIs) from Adult ICUs, Pediatric ICUs, Adult & Pediatric Medical Wards, Adult & Pediatric Surgical Wards, and Adult & Pediatric Medical/Surgical Wards.
- Surgical Site Infections (SSIs) 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 in Texas will be required to follow the CMS Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program reporting requirements:

- Central Line-Associated Bloodstream Infections (CLABSI) from all bedded inpatient locations.
- Catheter-Associated Urinary Tract Infections (CAUTIs) from all bedded inpatient locations.
- Surgical Site Infections (SSIs) 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

All changes will be in effect starting January 1, 2020. However, 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 (TxHSN) will need to undergo modifications to add those data to the data reports. We tentatively anticipate that the Lab ID event data may be available for posting for HAI data collected in 2022.

Frequently Asked Questions

- **Which Standardized Infection Ratio (SIR) will be used for SSI?**
The All SSI SIR model will continue to be used by Texas for public reporting.
- **Do we have to report the Healthcare Personnel Influenza Vaccination data?** No. This is an HAI.
- **Do I have to report SSIs for the discontinued procedures if they occur after December 31, 2019?** Yes. For SSIs, we go by the date of procedure rather than the date of event. Therefore, any old procedures performed in 2019 will still need to be followed for the appropriate surveillance time period and may have associated SSI events reported in 2020.
- **I am a children's hospital and we are exempt from CMS reporting. Do I still have to report for Texas?** Yes. You are considered a general hospital so you will be required to report the same data as general hospitals.
- **Are the deadlines for submitting data going to be the same as CMS' deadlines starting with 2020 data?** No. We will maintain the same data submission deadlines as we have always had in place.

- **Will we need to confer rights again in 2020?** Yes. You will need to confer rights again in 2020. DSHS will send a notice and instructions once the confer rights template is updated.
- **What will Texas do with the new MRSA/*C. difficile* Lab ID data?** These data will be used to direct prevention efforts as needed around the state. They will also help inform antimicrobial stewardship efforts across the state.
- **When will we see the changes reflected in the TxHSN reports?** The first changes will occur on public reports of data from January – June 2020. These are set to be published in December 2020. Laboratory ID event data is tentatively anticipated to be shown on facility data reports starting January – June 2022 (to be published December 2022).
- **I am a critical access hospital, are my reporting requirements different?** Yes, if you are licensed as a general hospital. Then you will be required to report the same data as general hospitals. If you are not licensed as a general hospital, then you are not required to report Healthcare Safety data to Texas.