Representative Michael S. Kennedy proposes the following substitute bill:

	ADMINISTRATION OF ANESTHESIA AMENDMENTS
	2017 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: Michael S. Kennedy
	Senate Sponsor:
LON	IG TITLE
Gene	eral Description:
	This bill amends professional licensing acts in the Division of Occupational and
Profe	essional Licensing Act to require informed consent and certain patient monitoring
of patients who are sedated and establishes a database for adverse events.	
High	lighted Provisions:
	This bill:
	 requires the Department of Health to:
	• create a database of adverse events from the administration of sedation or
anest	hesia in outpatient settings; and
	• publish a report regarding the number of adverse events by types of provider and
facili	ty and submit a yearly report to the Health and Human Services Interim
Com	mittee;
	 requires a health care provider who administers sedation intravenously to a patient
in an	outpatient setting that is not an emergency department:
	• to obtain informed consent from the patient; and
	• to report adverse events from the sedation or anesthesia to the Department of
Healt	th;
	 makes it unprofessional conduct to fail to report an adverse event from outpatient

26	sedation or anesthesia;
27	 provides whistle blower protections to a health care provider who reports an
28	adverse event; and
29	 requires a health care provider who administers sedation or anesthesia intravenously
0	to have access to a crash cart during the anesthesia procedure.
1	Money Appropriated in this Bill:
2	None
3	Other Special Clauses:
64	None
5	Utah Code Sections Affected:
6	AMENDS:
57	58-5a-102, as last amended by Laws of Utah 2015, Chapter 230
8	58-31b-501, as last amended by Laws of Utah 2006, Chapter 291
9	58-67-501, as last amended by Laws of Utah 2015, Chapter 110
0	58-68-501, as last amended by Laws of Utah 2015, Chapter 110
1	58-69-501, as last amended by Laws of Utah 2015, Chapter 343
2	631-1-226, as last amended by Laws of Utah 2016, Chapters 89, 170, 279, and 327
3	ENACTS:
4	26-1-40 , Utah Code Annotated 1953
5 6	Be it enacted by the Legislature of the state of Utah:
7	Section 1. Section 26-1-40 is enacted to read:
8	<u>26-1-40.</u> Reports of anesthesia adverse events- whistle blower protections.
)	(1) (a) Beginning January 1, 2018, the department shall create a database of deaths and
)	adverse events from the administration of sedation or anesthesia in outpatient settings that are
1	not emergency departments in the state.
2	(b) The database required by Subsection (1)(a) shall include reports submitted by
3	health care providers under Sections 58-5a-102, 58-31b-501, 58-67-501, 58-68-501, and
54	<u>58-69-501.</u>
5	(2) The department shall adopt administrative rules under Title 63G, Chapter 3, Utah
6	Administrative Rulemaking Act, regarding:

57	(a) the format of the reports; and
58	(b) what constitutes a reportable adverse event, which shall include at least the
59	administration of intravenous sedation or anesthesia when there is:
60	(i) an escalation of care required for the patient; or
61	(ii) a rescue of a patient from a deeper level of sedation than was intended.
62	(3) (a) Information the department receives under this section that identifies a
63	particular individual is subject to Title 63G, Chapter 2, Government Records Access and
64	Management Act, and the federal Health Insurance Portability and Accountability Act of 1996.
65	(b) Beginning July 1, 2018, and on or before July 1 of each year thereafter, the
66	department shall:
67	(i) publicly report:
68	(A) the number of deaths and adverse events reported under Subsection (1);
69	(B) the type of health care providers, by license category and specialty, who submitted
70	reports under Subsection (1) and who administered the sedation or anesthesia that resulted in
71	an adverse event; and
72	(C) the type of facility in which the death or adverse event took place; and
73	(ii) submit a report to the Health and Human Services Interim Committee with the
74	information required by this Subsection (3).
75	(4) An employer of a health care provider who submits a report under this section may
76	not take an adverse employment action against the reporting health care provider if the
77	employment action is based on the provider submitting a report under this section.
78	(5) (a) This section sunsets in accordance with Section 63I-1-226.
79	(b) The sunset review of this section shall include an analysis of:
80	(i) the number and types of adverse events reported under this section;
81	(ii) the types of health care providers and locations involved in the adverse events;
82	(iii) the adequacy of sedation and anesthesia requirements in Sections 58-5a-102,
83	58-31b-501, 58-67-501, 58-68-501, and 58-69-501 related to the adverse events reported under
84	this section; and
85	(iv) the adequacy of the reporting requirements under this section and the need for
86	additional protections for health care providers who report events under this section.
87	Section 2. Section 58-5a-102 is amended to read:

88	58-5a-102. Definitions.
89	In addition to the definitions under Section 58-1-102, as used in this chapter:
90	(1) "Board" means the Podiatric Physician Board created in Section 58-5a-201.
91	(2) "Indirect supervision" means the same as that term is defined by the division by
92	rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
93	(3) "Medical assistant" means an unlicensed individual working under the indirect
94	supervision of a licensed podiatric physician and engaging in specific tasks assigned by the
95	licensed podiatric physician in accordance with the standards and ethics of the podiatry
96	profession.
97	(4) "Practice of podiatry" means the diagnosis and treatment of conditions affecting the
98	human foot and ankle and their manifestations of systemic conditions by all appropriate and
99	lawful means, subject to Section 58-5a-103.
100	(5) "Unlawful conduct" includes:
101	(a) the conduct that constitutes unlawful conduct under Section 58-1-501; and
102	(b) for an individual who is not licensed under this chapter:
103	(i) using the title or name podiatric physician, podiatrist, podiatric surgeon, foot doctor,
104	foot specialist, or D.P.M.; or
105	(ii) implying or representing that the individual is qualified to practice podiatry.
106	(6) "Unprofessional conduct" includes, for an individual licensed under this chapter:
107	(a) the conduct that constitutes unprofessional conduct under Section 58-1-501;
108	(b) communicating to a third party, without the consent of the patient, information the
109	individual acquires in treating the patient, except as necessary for professional consultation
110	regarding treatment of the patient;
111	(c) allowing the individual's name or license to be used by an individual who is not
112	licensed to practice podiatry under this chapter;
113	(d) except as described in Section 58-5a-306, employing, directly or indirectly, any
114	unlicensed individual to practice podiatry;
115	(e) using alcohol or drugs, to the extent the individual's use of alcohol or drugs impairs
116	the individual's ability to practice podiatry;
117	(f) unlawfully prescribing, selling, or giving away any prescription drug, including
118	controlled substances, as defined in Section 58-37-2;

119	(g) gross incompetency in the practice of podiatry;
120	(h) willfully and intentionally making a false statement or entry in hospital records,
121	medical records, or reports;
122	(i) willfully making a false statement in reports or claim forms to governmental
123	agencies or insurance companies with the intent to secure payment not rightfully due;
124	(j) willfully using false or fraudulent advertising; [and]
125	(k) conduct the division defines as unprofessional conduct by rule made in accordance
126	with Title 63G, Chapter 3, Utah Administrative Rulemaking Act[-]; and
127	(1) administering sedation or anesthesia intravenously to a patient in an outpatient
128	setting that is not an emergency department, without:
129	(i) first obtaining consent from the patient in writing, which shall include:
130	(A) the type of sedation or anesthesia being administered;
131	(B) the identity and training of the person who is performing the procedure for which
132	the sedation or anesthesia will be administered;
133	(C) the identity and training of the person who will be administering the sedation or
134	anesthesia;
135	(D) a list of all responsibilities during the procedure of the person who will be
136	administering the sedation or anesthesia; and
137	(E) patient monitoring that will occur during the sedation or anesthesia, including
138	monitoring equipment that will be used;
139	(ii) reporting any adverse event under Section 26-1-40; and
140	(iii) having access during the procedure to an advanced cardiac life support crash cart
141	with equipment that is regularly maintained according to guidelines established by the
142	American Hospital Association.
143	Section 3. Section 58-31b-501 is amended to read:
144	58-31b-501. Unlawful conduct.
145	"Unlawful conduct" includes:
146	(1) using the following titles, names or initials, if the user is not properly licensed or
147	certified under this chapter:
148	(a) nurse;
149	(b) licensed practical nurse, practical nurse, or L.P.N.;

150	(c) medication aide certified, or M.A.C.;			
151	(d) registered nurse or R.N.;			
152	(e) registered nurse practitioner, N.P., or R.N.P.;			
153	(f) registered nurse specialist, N.S., or R.N.S.;			
154	(g) registered psychiatric mental health nurse specialist;			
155	(h) advanced practice registered nurse;			
156	(i) nurse anesthetist, certified nurse anesthetist, certified registered nurse anesthetist, or			
157	C.R.N.A.; or			
158	(j) other generally recognized names or titles used in the profession of nursing;			
159	(2) (a) using any other name, title, or initials that would cause a reasonable person to			
160	believe the user is licensed or certified under this chapter if the user is not properly licensed or			
161	certified under this chapter; and			
162	(b) for purposes of Subsection (2)(a), it is unlawful conduct for a medication aide			
163	certified to use the term "nurse"; [and]			
164	(3) conducting a nursing education program in the state for the purpose of qualifying			
165	individuals to meet requirements for licensure under this chapter without the program having			
166	been approved under Section 58-31b-601[-]; and			
167	(4) administering sedation or anesthesia intravenously to a patient in an outpatient			
168	setting that is not an emergency department, without:			
169	(i) first obtaining consent from the patient in writing, which shall include:			
170	(A) the type of sedation or anesthesia being administered;			
171	(B) the identity and training of the person who is performing the procedure for which			
172	the sedation or anesthesia will be administered;			
173	(C) the identity and training of the person who will be administering the sedation or			
174	anesthesia;			
175	(D) a list of all responsibilities during the procedure of the person who will be			
176	administering the sedation or anesthesia; and			
177	(E) patient monitoring that will occur during the sedation or anesthesia, including			
178	monitoring equipment that will be used;			
179	(ii) reporting any adverse event under Section 26-1-40; and			
180	(iii) having access during the procedure to an advanced cardiac life support crash cart			

181	with equipment that is regularly maintained according to guidelines established by the		
182	American Hospital Association.		
183	Section 4. Section 58-67-501 is amended to read:		
184	58-67-501. Unlawful conduct.		
185	(1) "Unlawful conduct" includes, in addition to the definition in Section 58-1-501:		
186	(a) buying, selling, or fraudulently obtaining, any medical diploma, license, certificate,		
187	or registration;		
188	(b) aiding or abetting the buying, selling, or fraudulently obtaining of any medical		
189	diploma, license, certificate, or registration;		
190	(c) substantially interfering with a licensee's lawful and competent practice of medicine		
191	in accordance with this chapter by:		
192	(i) any person or entity that manages, owns, operates, or conducts a business having a		
193	direct or indirect financial interest in the licensee's professional practice; or		
194	(ii) anyone other than another physician licensed under this title, who is engaged in		
195	direct clinical care or consultation with the licensee in accordance with the standards and ethics		
196	of the profession of medicine; [or]		
197	(d) entering into a contract that limits a licensee's ability to advise the licensee's		
198	patients fully about treatment options or other issues that affect the health care of the licensee's		
199	patients[-]; or		
200	(e) administering sedation or anesthesia intravenously to a patient in an outpatient		
201	setting that is not an emergency department, without:		
202	(i) first obtaining consent from the patient in writing, which shall include:		
203	(A) the type of sedation or anesthesia being administered;		
204	(B) the identity and training of the person who is performing the procedure for which		
205	the sedation or anesthesia will be administered;		
206	(C) the identity and training of the person who will be administering the sedation or		
207	anesthesia;		
208	(D) a list of all responsibilities during the procedure of the person who will be		
209	administering the sedation or anesthesia; and		
210	(E) patient monitoring that will occur during the sedation or anesthesia, including		
211	monitoring equipment that will be used;		

02-06-17 1:23 PM

212 (ii) reporting any adverse event under Section 26-1-40; and 213 (iii) having access during the procedure to an advanced cardiac life support crash cart 214 with equipment that is regularly maintained according to guidelines established by the 215 American Hospital Association. (2) "Unlawful conduct" does not include: 216 217 (a) establishing, administering, or enforcing the provisions of a policy of accident and 218 health insurance by an insurer doing business in this state in accordance with Title 31A, 219 Insurance Code; 220 (b) adopting, implementing, or enforcing utilization management standards related to 221 payment for a licensee's services, provided that: 222 (i) utilization management standards adopted, implemented, and enforced by the payer 223 have been approved by a physician or by a committee that contains one or more physicians; and 224 (ii) the utilization management standards does not preclude a licensee from exercising independent professional judgment on behalf of the licensee's patients in a manner that is 225 226 independent of payment considerations: 227 (c) developing and implementing clinical practice standards that are intended to reduce 228 morbidity and mortality or developing and implementing other medical or surgical practice 229 standards related to the standardization of effective health care practices, provided that: 230 (i) the practice standards and recommendations have been approved by a physician or 231 by a committee that contains one or more physicians; and 232 (ii) the practice standards do not preclude a licensee from exercising independent professional judgment on behalf of the licensee's patients in a manner that is independent of 233 234 payment considerations; 235 (d) requesting or recommending that a patient obtain a second opinion from a licensee; 236 (e) conducting peer review, quality evaluation, quality improvement, risk management, 237 or similar activities designed to identify and address practice deficiencies with health care 238 providers, health care facilities, or the delivery of health care; 239 (f) providing employment supervision or adopting employment requirements that do 240 not interfere with the licensee's ability to exercise independent professional judgment on behalf of the licensee's patients, provided that employment requirements that may not be considered to 241 242 interfere with an employed licensee's exercise of independent professional judgment include:

243	(i) an employment requirement that restricts the licensee's access to patients with		
244	whom the licensee's employer does not have a contractual relationship, either directly or		
245	through contracts with one or more third-party payers; or		
246	(ii) providing compensation incentives that are not related to the treatment of any		
247	particular patient;		
248	(g) providing benefit coverage information, giving advice, or expressing opinions to a		
249	patient or to a family member of a patient to assist the patient or family member in making a		
250	decision about health care that has been recommended by a licensee;		
251	(h) in compliance with Section 58-85-103:		
252	(i) obtaining an investigational drug or investigational device;		
253	(ii) administering the investigational drug to an eligible patient; or		
254	(iii) treating an eligible patient with the investigational drug or investigational device;		
255	or		
256	(i) any otherwise lawful conduct that does not substantially interfere with the licensee's		
257	ability to exercise independent professional judgment on behalf of the licensee's patients and		
258	that does not constitute the practice of medicine as defined in this chapter.		
259	Section 5. Section 58-68-501 is amended to read:		
260	58-68-501. Unlawful conduct.		
261	(1) "Unlawful conduct" includes, in addition to the definition in Section 58-1-501:		
262	(a) buying, selling, or fraudulently obtaining any osteopathic medical diploma, license,		
263	certificate, or registration; and		
264	(b) aiding or abetting the buying, selling, or fraudulently obtaining of any osteopathic		
265	medical diploma, license, certificate, or registration;		
266	(c) substantially interfering with a licensee's lawful and competent practice of medicine		
267	in accordance with this chapter by:		
268	(i) any person or entity that manages, owns, operates, or conducts a business having a		
269	direct or indirect financial interest in the licensee's professional practice; or		
270	(ii) anyone other than another physician licensed under this title, who is engaged in		
271	direct clinical care or consultation with the licensee in accordance with the standards and ethics		
272	of the profession of medicine; [or]		
273	(d) entering into a contract that limits a licensee's ability to advise the licensee's		

274	patients fully about treatment options or other issues that affect the health care of the licensee's		
275	patients[-]; or		
276	(e) administering sedation or anesthesia intravenously to a patient in an outpatient		
277	setting that is not an emergency department, without:		
278	(i) first obtaining consent from the patient in writing, which shall include:		
279	(A) the type of sedation or anesthesia being administered;		
280	(B) the identity and training of the person who is performing the procedure for which		
281	the sedation or anesthesia will be administered;		
282	(C) the identity and training of the person who will be administering the sedation or		
283	anesthesia;		
284	(D) a list of all responsibilities during the procedure of the person who will be		
285	administering the sedation or anesthesia; and		
286	(E) patient monitoring that will occur during the sedation or anesthesia, including		
287	monitoring equipment that will be used;		
288	(ii) reporting any adverse event under Section 26-1-40; and		
289	(iii) having access during the procedure to an advanced cardiac life support crash cart		
290	with equipment that is regularly maintained according to guidelines established by the		
291	American Hospital Association.		
292	(2) "Unlawful conduct" does not include:		
293	(a) establishing, administering, or enforcing the provisions of a policy of accident and		
294	health insurance by an insurer doing business in this state in accordance with Title 31A,		
295	Insurance Code;		
296	(b) adopting, implementing, or enforcing utilization management standards related to		
297	payment for a licensee's services, provided that:		
298	(i) utilization management standards adopted, implemented, and enforced by the payer		
299	have been approved by a physician or by a committee that contains one or more physicians; and		
300	(ii) the utilization management standards does not preclude a licensee from exercising		
301	independent professional judgment on behalf of the licensee's patients in a manner that is		
302	independent of payment considerations;		
303	(c) developing and implementing clinical practice standards that are intended to reduce		
304	morbidity and mortality or developing and implementing other medical or surgical practice		

02-06-17 1:23 PM 305 standards related to the standardization of effective health care practices, provided that: 306 (i) the practice standards and recommendations have been approved by a physician or 307 by a committee that contains one or more physicians; and 308 (ii) the practice standards do not preclude a licensee from exercising independent 309 professional judgment on behalf of the licensee's patients in a manner that is independent of 310 payment considerations; 311 (d) requesting or recommending that a patient obtain a second opinion from a licensee; 312 (e) conducting peer review, quality evaluation, quality improvement, risk management, 313 or similar activities designed to identify and address practice deficiencies with health care 314 providers, health care facilities, or the delivery of health care; 315 (f) providing employment supervision or adopting employment requirements that do 316 not interfere with the licensee's ability to exercise independent professional judgment on behalf 317 of the licensee's patients, provided that employment requirements that may not be considered to interfere with an employed licensee's exercise of independent professional judgment include: 318 319 (i) an employment requirement that restricts the licensee's access to patients with 320 whom the licensee's employer does not have a contractual relationship, either directly or 321 through contracts with one or more third-party payers; or 322 (ii) providing compensation incentives that are not related to the treatment of any 323 particular patient; 324 (g) providing benefit coverage information, giving advice, or expressing opinions to a 325 patient or to a family member of a patient to assist the patient or family member in making a 326 decision about health care that has been recommended by a licensee; 327 (h) in compliance with Section 58-85-103: 328 (i) obtaining an investigational drug or investigational device; 329 (ii) administering the investigational drug to an eligible patient; or 330 (iii) treating an eligible patient with the investigational drug or investigational device; 331 or

332 (i) any otherwise lawful conduct that does not substantially interfere with the licensee's 333 ability to exercise independent professional judgment on behalf of the licensee's patients and 334 that does not constitute the practice of medicine as defined in this chapter.

Section 6. Section **58-69-501** is amended to read: 335

336	58-69-501. Unlawful conduct.
337	"Unlawful conduct" includes, in addition to the definition in Section 58-1-501:
338	(1) administering anesthesia or analgesia in the practice of dentistry or dental hygiene
339	if <u>:</u>
340	(a) the individual does not hold a current permit issued by the division authorizing that
341	individual to administer the type of anesthesia or analgesia used; or
342	(b) administering sedation or anesthesia intravenously to a patient in an outpatient
343	setting that is not an emergency department, without:
344	(i) first obtaining consent from the patient in writing, which shall include:
345	(A) the type of sedation or anesthesia being administered;
346	(B) the identity and training of the person who is performing the procedure for which
347	the sedation or anesthesia will be administered;
348	(C) the identity and training of the person who will be administering the sedation or
349	anesthesia;
350	(D) a list of all responsibilities during the procedure of the person who will be
351	administering the sedation or anesthesia; and
352	(E) patient monitoring that will occur during the anesthesia, including monitoring
353	equipment that will be used;
354	(ii) reporting any adverse event under Section 26-1-40; and
355	(iii) having access during the procedure to an advanced cardiac life support crash cart
356	with equipment that is regularly maintained according to guidelines established by the
357	American Hospital Association.
358	(2) practice of dental hygiene by a licensed dental hygienist when not under the
359	supervision of a dentist, or under a written agreement with a dentist who is licensed under this
360	chapter and who is a Utah resident, in accordance with the provisions of this chapter; or
361	(3) directing or interfering with a licensed dentist's judgment and competent practice of
362	dentistry.
363	Section 7. Section 63I-1-226 is amended to read:
364	63I-1-226. Repeal dates, Title 26.
365	(1) Section <u>26-1-40</u> is repealed July 1, 2021.
366	[(1)] (2) Title 26, Chapter 9f, Utah Digital Health Service Commission Act, is repealed

367	July 1,	2025.
368		[(2)] (3) Section 26-10-11 is repealed July 1, 2020.
369		[(3)] (4) Section 26-21-23, Licensing of non-Medicaid nursing care facility beds, is
370	repeale	ed July 1, 2018.
371		[(4)] (5) Title 26, Chapter 33a, Utah Health Data Authority Act, is repealed July 1,
372	2024.	
373		[(5)] (6) Title 26, Chapter 36a, Hospital Provider Assessment Act, is repealed July 1,
374	2019.	
375		[(6)] (7) Title 26, Chapter 36b, Inpatient Hospital Assessment Act, is repealed July 1,
376	2021.	
377		[(7)] <u>(8)</u> Section 26-38-2.5 is repealed July 1, 2017.
378		[(8)] <u>(9)</u> Section 26-38-2.6 is repealed July 1, 2017.
379		[(9) Title 26, Chapter 52, Autism Treatment Account, is repealed July 1, 2016.]
380		(10) Title 26, Chapter 56, Hemp Extract Registration Act, is repealed July 1, 2021.