

SB0150S01 compared with SB0150

~~text~~ shows text that was in SB0150 but was deleted in SB0150S01.

Inserted text shows text that was not in SB0150 but was inserted into SB0150S01.

DISCLAIMER: This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

Representative Steve Eliason proposes the following substitute bill:

UTAH STATEWIDE STROKE AND CARDIAC REGISTRY

ACT

2018 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Brian Zehnder

House Sponsor: ~~_____~~ Steve Eliason

LONG TITLE

General Description:

This bill creates statewide stroke and cardiac registries and stroke and cardiac registry advisory committees within the Department of Health.

Highlighted Provisions:

This bill:

- ▶ creates statewide stroke and cardiac registries within the Department of Health;
- ▶ creates advisory committees for those registries; and
- ▶ grants rulemaking authority to the Department of Health to administer and define data elements for the registries.

Money Appropriated in this Bill:

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None

Other Special Clauses:

None

Utah Code Sections Affected:

ENACTS:

26-8d-101, Utah Code Annotated 1953

26-8d-102, Utah Code Annotated 1953

26-8d-103, Utah Code Annotated 1953

26-8d-104, Utah Code Annotated 1953

26-8d-105, Utah Code Annotated 1953

Be it enacted by the Legislature of the state of Utah:

Section 1. Section **26-8d-101** is enacted to read:

CHAPTER 8d. UTAH STATEWIDE STROKE AND CARDIAC REGISTRY ACT

26-8d-101. Title.

This chapter is known as the "Utah Statewide Stroke and Cardiac Registry Act."

Section 2. Section **26-8d-102** is enacted to read:

26-8d-102. Statewide stroke registry.

(1) The department shall establish and supervise a statewide stroke registry to:

(a) analyze information on the incidence, severity, causes, outcomes, and rehabilitation of stroke;

(b) promote optimal care for stroke patients;

(c) alleviate unnecessary death and disability from stroke;

(d) encourage the efficient and effective continuum of patient care, including prevention, prehospital care, hospital care, and rehabilitative care; and

(e) minimize the overall cost of stroke.

(2) The department shall utilize the registry established under Subsection (1) to assess:

(a) the effectiveness of the data collected by the registry; and

(b) the impact of the statewide stroke registry on the provision of stroke care.

(3) (a) The department shall make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to establish:

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(i) the data elements that ~~health care providers~~ general acute hospitals shall report to the registry; and

(ii) the time frame and format for reporting.

(b) The data elements described in Subsection (3)(a)(i) shall include consensus metrics consistent with data elements used in nationally recognized data set platforms for stroke care.

(c) The department shall permit a general acute hospital to submit data required under this section through an electronic exchange of clinical health information that meets the standards established by the department under Section 26-1-37.

(4) A general acute hospital shall submit stroke data in accordance with rules established under Subsection (3).

(5) Data collected under this section shall be subject to Chapter 3, Health Statistics.

(6) No person may be held civilly liable for providing data to the department in accordance with this section.

Section 3. Section **26-8d-103** is enacted to read:

26-8d-103. Statewide cardiac registry.

(1) The department shall establish and supervise a statewide cardiac registry to:

(a) analyze information on the incidence, severity, causes, outcomes, and rehabilitation of cardiac diseases;

(b) promote optimal care for cardiac patients;

(c) alleviate unnecessary death and disability from cardiac diseases;

(d) encourage the efficient and effective continuum of patient care, including prevention, prehospital care, hospital care, and rehabilitative care; and

(e) minimize the overall cost of cardiac care.

(2) The department shall utilize the registry established under Subsection (1) to assess:

(a) the effectiveness of the data collected by the registry; and

(b) the impact of the statewide cardiac registry on the provision of cardiac care.

(3) (a) The department shall make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to establish:

(i) the data elements that ~~health care providers~~ general acute hospitals shall report to the registry; and

(ii) the time frame and format for reporting.

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(b) The data elements described in Subsection (3)(a)(i) shall include consensus metrics consistent with data elements used in nationally recognized data set platforms for cardiac care.

(c) The department shall permit a general acute hospital to submit data required under this section through an electronic exchange of clinical health information that meets the standards established by the department under Section 26-1-37.

(4) A general acute hospital shall submit cardiac data in accordance with rules established under Subsection (3).

(5) Data collected under this section shall be subject to Chapter 3, Health Statistics.

(6) No person may be held civilly liable for providing data to the department in accordance with this section.

Section 4. Section **26-8d-104** is enacted to read:

26-8d-104. Stroke registry advisory committee.

(1) There is created within the department a stroke registry advisory committee.

(2) The stroke registry advisory committee created in Subsection (1) shall:

(a) be composed of individuals knowledgeable in adult and pediatric stroke care, including physicians, nurses, hospital administrators, emergency medical services personnel, government officials, consumers, and persons affiliated with professional health care associations;

(b) advise the department regarding the development and implementation of the stroke registry;

(c) assist the department in evaluating the quality and outcomes of the stroke registry;

and

(d) review and comment on proposals and rules governing the statewide stroke registry.

Section 5. Section **26-8d-105** is enacted to read:

26-8d-105. Cardiac registry advisory committee.

(1) There is created within the department a cardiac registry advisory committee.

(2) The cardiac registry advisory committee created in Subsection (1) shall:

(a) be composed of individuals knowledgeable in adult and pediatric cardiac care, including physicians, nurses, hospital administrators, emergency medical services personnel, government officials, consumers, and persons affiliated with professional health care associations;

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(b) advise the department regarding the development and implementation of the cardiac registry;

(c) assist the department in evaluating the quality and outcomes of the cardiac registry;
and

(d) review and comment on proposals and rules governing the statewide cardiac registry.

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Legislative Review Note

Office of Legislative Research and General Counsel†