

CERTIFICATION OF ENROLLMENT

HOUSE BILL 1739

Chapter 207, Laws of 2022

67th Legislature
2022 Regular Session

PATHOGENS OF EPIDEMIOLOGICAL CONCERN—HOSPITALS

EFFECTIVE DATE: June 9, 2022

Passed by the House February 9, 2022
Yeas 96 Nays 0

LAURIE JINKINS

**Speaker of the House of
Representatives**

Passed by the Senate March 4, 2022
Yeas 48 Nays 0

DENNY HECK

President of the Senate

Approved March 30, 2022 2:25 PM

JAY INSLEE

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **HOUSE BILL 1739** as passed by the House of Representatives and the Senate on the dates hereon set forth.

BERNARD DEAN

Chief Clerk

FILED

March 31, 2022

**Secretary of State
State of Washington**

HOUSE BILL 1739

Passed Legislature - 2022 Regular Session

State of Washington

67th Legislature

2022 Regular Session

By Representatives Maycumber, Cody, and Ramos

Prefiled 01/04/22. Read first time 01/10/22. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to modernizing hospital policies related to
2 pathogens of epidemiological concern; amending RCW 70.41.430; and
3 creating a new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature finds that a singular
6 focus on methicillin-resistant staphylococcus aureus does not reflect
7 the reality that there are many more pathogens of epidemiological
8 concern. Modernization of state law is needed. Hospitals must prepare
9 and respond effectively to pathogens of epidemiological concern
10 within their facilities through a broad facility risk assessment that
11 identifies pathogens of epidemiological concern that pose risks to
12 patients, health care workers, and visitors. Department of health
13 oversight and surveys will ensure risk assessments are appropriate
14 and current. Lab identified pathogens must be reported to the
15 national healthcare safety network of the United States centers for
16 disease control and prevention pursuant to requirements from the
17 centers for medicare and medicaid services.

18 **Sec. 2.** RCW 70.41.430 and 2009 c 244 s 1 are each amended to
19 read as follows:

1 (1) Each hospital licensed under this chapter shall, by January
2 1, ~~((2010))~~ 2023, adopt a policy regarding ~~((methicillin-resistant~~
3 ~~staphylococcus aureus))~~ prevention and control of the transmission of
4 pathogens of epidemiological concern. The policy shall, at a minimum,
5 contain the following elements:

6 ~~((a) A requirement to test any patient for methicillin-resistant~~
7 ~~staphylococcus aureus who is a member of a patient population~~
8 ~~identified as appropriate to test based on the hospital's risk~~
9 ~~assessment for methicillin-resistant staphylococcus aureus;~~

10 ~~(b) A requirement that a patient in the hospital's adult or~~
11 ~~pediatric, but not neonatal, intensive care unit be tested for~~
12 ~~methicillin-resistant staphylococcus aureus within twenty-four hours~~
13 ~~of admission unless the patient has been previously tested during~~
14 ~~that hospital stay or has a known history of methicillin-resistant~~
15 ~~staphylococcus aureus;~~

16 ~~(c) Appropriate procedures to help prevent patients who test~~
17 ~~positive for methicillin-resistant staphylococcus aureus from~~
18 ~~transmitting to other patients. For purposes of this subsection,~~
19 ~~"appropriate procedures" include, but are not limited to, isolation~~
20 ~~or cohorting of patients colonized or infected with methicillin-~~
21 ~~resistant staphylococcus aureus. In a hospital where patients, whose~~
22 ~~methicillin-resistant staphylococcus aureus status is either unknown~~
23 ~~or uncolonized, may be roomed with colonized or infected patients,~~
24 ~~patients must be notified they may be roomed with patients who have~~
25 ~~tested positive for methicillin-resistant staphylococcus aureus; and~~

26 ~~(d) A requirement that every patient who has a methicillin-~~
27 ~~resistant staphylococcus aureus infection receive oral and written~~
28 ~~instructions regarding aftercare and precautions to prevent the~~
29 ~~spread of the infection to others.)~~

30 (a) A facility risk assessment
31 to identify pathogens of epidemiological concern that considers
32 elements such as the probability of occurrence as determined via
33 surveillance, potential impact, and measures the hospital has
34 implemented to mitigate the risk to patients, health care workers,

35 (b) Appropriate evidence-based procedures and intervention
36 strategies to identify and help prevent patients from transmitting
37 pathogens of epidemiological concern to other patients and health
38 care workers.

39 (2) A hospital that has identified ~~((a hospitalized patient who~~
40 ~~has a diagnosis of methicillin-resistant staphylococcus aureus shall~~

1 ~~report the infection to the department using the department's~~
2 ~~comprehensive hospital abstract reporting system. When making its~~
3 ~~report, the hospital shall use codes used by the))~~ through
4 appropriate testing a patient who has a pathogen of epidemiological
5 concern that is required to be reported to the national healthcare
6 safety network of the United States centers for disease control and
7 prevention shall report the event as required by the United States
8 centers for medicare and medicaid services ((, when available)).

9 (3) For the purposes of this section "pathogens of
10 epidemiological concern" means infectious agents that have one or
11 more of the following characteristics:

12 (a) A propensity for transmission within health care facilities
13 based on published reports from the centers for disease control and
14 prevention and the occurrence of temporal or geographic clusters of
15 two or more patients;

16 (b) Antimicrobial resistance implications;

17 (c) Association with serious clinical disease or increased
18 morbidity and mortality; or

19 (d) A newly discovered or reemerging pathogen.

Passed by the House February 9, 2022.

Passed by the Senate March 4, 2022.

Approved by the Governor March 30, 2022.

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