PLEASE NOTE: Legislative Information *cannot* perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

Amend the resolve by striking out all of sections 1 and 2 and inserting the following:

- 'Sec. 1 Implementation of law. Resolved: That, in order to implement the Maine Revised Statutes, Title 22, section 8761, the Maine Quality Forum shall by July 1, 2010:
- 1. Define high-risk populations for the purposes of surveillance for methicillin-resistant Staphylococcus aureus in all hospitals in this State as persons who:
 - A. Are all critical care patients in all specialties, categorized by level of care rather than location of care, immunocompromised patients, dialysis patients and all surgical patients who have or are getting implants;
 - B. Have had antibiotic therapy either repeatedly or within the recent past;
 - C. Have had frequent and repeated health care contacts within the last year;
 - D. Are long-term care patients, rehabilitation facility patients or nursing facility patients;
 - E. Have previously had methicillin-resistant Staphylococcus aureus or have been caregivers for such persons;
 - F. Have any open wound or lesion that appears to be infectious;
 - G. Have an indwelling catheter or other foreign body such as a feeding tube or central line;
 - H. Are transferred from a prison or jail;
 - I. Are homeless; or
 - J. Take drugs intravenously; and
- 2. Require screening by hospitals for all high-risk populations up to 10 days prior to elective admission, upon admission or within 12 hours after admission and, for those persons screened negative upon admission, require repeat screening:
 - A. One week after admission and weekly after that;
 - B. Upon transfer to a different critical care setting; and
 - C. Prior to discharge; and be it further
- **Sec. 2 Rulemaking. Resolved:** That, by July 1, 2010, the Maine Health Data Organization shall adopt rules pursuant to the Maine Revised Statutes, Title 22, section 8708A and Resolve 2009, chapter 82 to require the reporting of the results of screening and all other clinical cultures for methicillin-resistant Staphylococcus aureus by all hospitals in the State.
- 1. The rules must require that hospitals report to the Maine Quality Forum working group on multidrug-resistant organisms, the Maine Health Data Organization and the Department of Health and Human Services, Maine Center for Disease Control and Prevention all positive tests for methicillin-resistant Staphylococcus aureus, including a designation of the infection as acquired in the community or hospital, based on a brief patient interview and the timing of acquisition of the infection.

- 2. The rules must require reported infection data to be made available to the public through a publicly accessible website.
- 3. The rules must enable reported test results to form the foundation for evaluating the progress of screening of high-risk populations and a new policy for the prevention of epidemiologically significant organisms, including methicillin-resistant Staphylococcus aureus.
- 4. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2A; and be it further
- **Sec. 3 Appropriations and allocations. Resolved:** That the following appropriations and allocations are made.

CORRECTIONS, DEPARTMENT OF

Correctional Medical Services Fund 0286

Initiative: Provides funds for testing costs.

| GENERAL FUND All Other | 2009-10 \$0 | 2010-11 \$2,219 |
|--|-----------------------|------------------------|
| GENERAL FUND TOTAL | \$0 | \$2,219 |
| CORRECTIONS, DEPARTMENT OF DEPARTMENT TOTALS | 2009-10 | 2010-11 |
| GENERAL FUND | \$0 | \$2,219 |
| DEPARTMENT TOTAL - ALL FUNDS | \$0 | \$2,219 |

CORRECTIONS, STATE BOARD OF

State Board of Corrections Investment Fund Z087

Initiative: Provides funds for testing costs.

| GENERAL FUND | 2009-10 | 2010-11 |
|--------------------|---------|---------|
| All Other | \$0 | \$2,219 |
| GENERAL FUND TOTAL | \$0 | \$2,219 |

CORRECTIONS, STATE BOARD OF DEPARTMENT TOTALS

2009-10

2010-11

| GENERAL FUND | \$0 | \$2,219 |
|------------------------------|------------|---------|
| DEPARTMENT TOTAL - ALL FUNDS | \$0 | \$2,219 |

HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY BDS)

Dorothea Dix Psychiatric Center 0120

Initiative: Provides allocation for testing costs.

| OTHER SPECIAL REVENUE FUNDS All Other | 2009-10 \$0 | 2010-11 \$25,650 |
|---|-----------------------|---------------------------------|
| OTHER SPECIAL REVENUE FUNDS TOTAL | \$0 | \$25,650 |
| Riverview Psychiatric Center 0105 | | |
| Initiative: Provides allocation for testing costs. | | |
| OTHER SPECIAL REVENUE FUNDS All Other | 2009-10 \$0 | 2010-11 \$107,577 |
| OTHER SPECIAL REVENUE FUNDS TOTAL | \$0 | \$107,577 |
| HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY BDS) DEPARTMENT TOTALS OTHER SPECIAL REVENUE FUNDS | 2009-10 \$0 | 2010-11 \$133,227 |
| DEPARTMENT TOTAL - ALL FUNDS | \$0 | \$133,227 |
| SECTION TOTALS GENERAL FUND OTHER SPECIAL REVENUE FUNDS | 2009-10 \$0 \$0 | 2010-11 \$4,438 \$133,227 |
| SECTION TOTAL - ALL FUNDS | \$0 | \$137,665 |

This amendment is the minority report of the committee. It requires the Maine Quality Forum to define high-risk populations for the purposes of surveillance for methicillin-resistant Staphylococcus aureus and provides the definition. It directs the Maine Quality Forum to require screening of all high-risk populations, with some rescreening. It requires the Maine Health Data Organization to adopt routine technical rules requiring that hospitals report the results of all screening and clinical cultures for methicillin-resistant Staphylococcus aureus. It specifies what additional information must be reported by the hospitals. The amendment also adds an appropriations and allocations section.

FISCAL NOTE REQUIRED (See attached)