

SENATE No. 01083

The Commonwealth of Massachusetts

PRESENTED BY:

Katherine M. Clark

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act relative to premature infant hospital discharge and quality improvement.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Katherine M. Clark</i>	<i>Middlesex and Essex</i>
<i>David M. Torrisi</i>	<i>14th Essex</i>
<i>Eugene L. O'Flaherty</i>	<i>2nd Suffolk</i>
<i>Michael J. Rodrigues</i>	<i>First Bristol and Plymouth</i>

SENATE No. 01083

By Ms. Clark, petition (accompanied by bill, Senate, No. 1083) of Katherine M. Clark, David M. Torrasi, Eugene L. O'Flaherty and Michael J. Rodrigues for legislation relative to premature infant hospital discharge and quality improvement [Joint Committee on Public Health].

The Commonwealth of Massachusetts

In the Year Two Thousand Eleven

An Act relative to premature infant hospital discharge and quality improvement.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Chapter 111 of the General Laws is hereby amended by inserting after
2 section 67C the following new section: -

3 Section 67C ½ (a) the department in consultation with statewide organizations focused
4 on improved premature infant healthcare shall; develop standardized procedures for hospital
5 discharge and follow up care for premature infants born less than 37 weeks gestational age and
6 shall ensure standardized and coordinated processes are followed as premature infants leave the
7 hospital from either a well baby nursery, step down or transitional nursery or neonatal intensive
8 care unit and transition to follow-up care by a health care or homecare provider, provided further
9 hospitals serving infants eligible for medical assistance and child health assistance shall report to
10 the department the causes and incidence of all re-hospitalizations of infants that were born
11 premature at less than 37 weeks gestational age and who are within their first six months of life.

12 Said hospitals shall annually report to the department re-hospitalizations and costs for all infants
13 less than 37 weeks gestational age and the reason for the readmission; the department shall
14 utilize guidance, if available from the Centers for Medicare and Medicaid Services' Neonatal
15 Outcomes Improvement Project to implement programs to improve new born outcomes, reduce
16 newborn health costs and establish ongoing quality improvement for newborns, including
17 hospital discharge and follow-up care

18 (b) the department shall submit a report to the general court annually on October 1st of
19 each year that provides information about; the progress in implementing the provisions of this
20 section; the incidence and cause of re-hospitalizations of infants born premature at less than 37
21 weeks gestational age within their first six months of life; and make recommendations to
22 improve newborn outcomes and ensure ongoing health quality improvement, including
23 technological needs to improve surveillance of premature infants as they are discharged from the
24 hospital and transition to a health care provider.