

111TH CONGRESS
2D SESSION

S. 3596

To establish the Culture of Safety Hospital Accountability Study and
Demonstration Program.

IN THE SENATE OF THE UNITED STATES

JULY 15, 2010

Mrs. HAGAN introduced the following bill; which was read twice and referred
to the Committee on Finance

A BILL

To establish the Culture of Safety Hospital Accountability
Study and Demonstration Program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Culture of Safety Hos-
5 pital Accountability Act of 2010”.

6 **SEC. 2. CULTURE OF SAFETY HOSPITAL ACCOUNTABILITY**
7 **STUDY AND DEMONSTRATION PROGRAM.**

8 (a) STUDY.—

9 (1) IN GENERAL.—The Secretary shall conduct
10 a study that—

1 (A) examines existing activities and pro-
2 grams in hospitals for quality assurance, pa-
3 tient safety, and performance improvement and
4 provides an analysis regarding best practices
5 with respect to such activities and programs;
6 and

7 (B) identifies best practices that should be
8 replicated in hospitals to improve patient safety
9 and quality of care, consistent with the provi-
10 sions included under the quality assessment and
11 performance improvement program, as required
12 under the conditions of participation for hos-
13 pitals under Medicare.

14 (2) REPORT.—Not later than 2 years after the
15 date of enactment of this Act, the Secretary shall
16 prepare a report containing the results of the study
17 conducted under paragraph (1). Such report shall be
18 made available on the Internet website of the Cen-
19 ters for Medicare & Medicaid Services.

20 (b) DEMONSTRATION PROGRAM.—

21 (1) IN GENERAL.—The Secretary shall establish
22 the Culture of Safety Hospital Accountability dem-
23 onstration program to provide support for estab-
24 lishing partnerships and other cooperative ap-
25 proaches between hospitals, State health care agen-

1 cies, and the Department of Health and Human
2 Services to promote and implement the best prac-
3 tices identified under subsection (a), with the goal of
4 improving the safety and quality of care provided to
5 Medicare beneficiaries and enhance compliance with
6 the conditions of participation for hospitals under
7 Medicare.

8 (2) DURATION.—The demonstration program
9 shall operate during a period of 3 years, beginning
10 not later than 12 months after completion of the re-
11 port described in subsection (a)(2).

12 (3) SCOPE.—

13 (A) STATES.—The Secretary shall select
14 not less than 4 States, but not more than 6
15 States, to participate in the demonstration pro-
16 gram.

17 (B) HOSPITALS.—The Secretary shall se-
18 lect not more than 24 hospitals, within the
19 States selected under subparagraph (A), to par-
20 ticipate in the demonstration program. The hos-
21 pitals selected under this subparagraph shall
22 satisfy criteria, as developed by the Secretary,
23 relating to compliance with the conditions of
24 participation for hospitals under Medicare.

1 (4) APPLICATION.—A State or hospital that de-
2 sires to participate in the demonstration program
3 shall submit to the Secretary an application at such
4 time, in such manner, and containing such informa-
5 tion as the Secretary may require.

6 (5) IMPLEMENTATION.—

7 (A) TECHNICAL ASSISTANCE.—The Sec-
8 retary shall provide participating hospitals with
9 technical assistance in implementation of the
10 best practices identified through the study
11 under subsection (a).

12 (B) HOSPITAL SURVEYORS.—For each
13 State participating in the demonstration pro-
14 gram, the Secretary shall provide training to
15 State surveyors that is designed to—

16 (i) enhance knowledge of the dis-
17 ciplines of patient safety, quality assess-
18 ment, and performance improvement;

19 (ii) increase skill in evaluating compli-
20 ance with quality assessment and perform-
21 ance improvement programs required
22 under the conditions of participation for
23 hospitals under Medicare; and

24 (iii) focus investigations of complaints
25 regarding hospital care on the hospital's

1 quality assessment and performance im-
2 provement program.

3 (6) EVALUATION.—For each State and hospital
4 participating in the demonstration program, the Sec-
5 retary shall evaluate the following:

6 (A) The level of implementation of the best
7 practices identified under subsection (a) by the
8 participating hospitals and whether adoption of
9 such practices—

10 (i) improved quality and patient safe-
11 ty (including an analysis of changes in
12 quality measures and other indicators of
13 outcome and performance); and

14 (ii) resulted in a decrease in the seri-
15 ousness or number of citations for defi-
16 ciencies under the conditions of participa-
17 tion for hospitals under Medicare.

18 (B) The training provided to State sur-
19 veyors and whether such training resulted in
20 enhanced proficiency in evaluations of hospital
21 quality assessment and performance improve-
22 ment programs.

23 (7) REPORT.—Not later than 12 months after
24 completion of the demonstration program, the Sec-

1 retary shall submit to Congress a report containing
2 an evaluation of such program, including—

3 (A) the findings of the evaluation under
4 paragraph (6); and

5 (B) recommendations—

6 (i) in regard to whether the best prac-
7 tices identified under the demonstration
8 program should be adopted by other hos-
9 pitals, and how the Secretary can best pro-
10 mote adoption of such best practices;

11 (ii) in regard to whether the training
12 for State surveyors developed under the
13 demonstration program should be provided
14 to all State surveyors; and

15 (iii) for such legislation and adminis-
16 trative action as the Secretary determines
17 appropriate.

18 (8) WAIVER AUTHORITY.—The Secretary may
19 waive such requirements under titles XI and XVIII
20 of the Social Security Act as may be necessary to
21 carry out the demonstration program.

22 (c) FUNDING.—For purposes of carrying out this
23 Act, the Secretary shall provide for the transfer from the
24 Federal Hospital Insurance Trust Fund under section
25 1817 of the Social Security Act (42 U.S.C. 1395i) of

1 \$25,000,000, to the Centers for Medicare & Medicaid
2 Services Program Management Account for the period of
3 fiscal years 2010 through 2017. Amounts transferred
4 under the preceding sentence shall remain available until
5 expended.

6 (d) ALTERNATIVE REMEDIES.—Section 1866(b) of
7 the Social Security Act (42 U.S.C. 1395cc(b)) is amended
8 by adding at the end the following new paragraph:

9 “(5)(A) The Secretary is authorized to promul-
10 gate regulations that establish enforcement remedies
11 that are in addition to, or in lieu of, termination of
12 an agreement under this section for hospitals or crit-
13 ical access hospitals for violations of health and safe-
14 ty requirements under this title. Such remedies may
15 include directed plans of correction that are designed
16 to—

17 “(i) ensure compliance with require-
18 ments under this title (including conditions
19 of participation for hospitals or critical ac-
20 cess hospitals);

21 “(ii) prevent recurrence of non-compli-
22 ance with such requirements; and

23 “(iii) improve the internal structures
24 and processes within the hospital or critical

1 access hospital for provision of continuous
2 quality and safety enhancement.

3 “(B) The regulations described under sub-
4 paragraph (A) may be promulgated by the Sec-
5 retary before, during, or after the evaluation
6 described under section 2(b)(6) of the Culture
7 of Safety Hospital Accountability Act of
8 2010.”.

9 (e) NON-APPLICATION OF PAPERWORK REDUCTION
10 ACT.—Chapter 35 of title 44, United States Code (com-
11 monly referred to as the ‘Paperwork Reduction Act of
12 1995’) shall not apply to this Act.

13 (f) DEFINITIONS.—In this Act:

14 (1) DEMONSTRATION PROGRAM.—The term
15 “demonstration program” means the Culture of
16 Safety Hospital Accountability demonstration pro-
17 gram conducted under this Act.

18 (2) HOSPITAL.—The term “hospital” means—

19 (A) an institution described under section
20 1861(e) of the Social Security Act (42 U.S.C.
21 1395x(e)); or

22 (B) a critical access hospital (as described
23 under section 1861(mm)(1) of such Act (42
24 U.S.C. 1395x(mm)(1)).

1 (3) MEDICARE.—The term “Medicare” means
2 the program established under title XVIII of the So-
3 cial Security Act (42 U.S.C. 1395 et seq.).

4 (4) SECRETARY.—The term “Secretary” means
5 the Secretary of Health and Human Services.

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