

HOUSE No. 03826

Recommended by the committee on Health Care Financing as a substitute for a bill with the same title (House, No. 2349). December 1, 2011.

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, as appearing in the 2010 Official Edition, is
2 hereby amended by inserting after section 67C the following new section:—
3 Section 67C ½. (a) The department, in consultation with statewide organizations focused on
4 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 that standardized and coordinated processes are followed as premature infants leave
7 the hospital from either a well baby nursery, step down or transitional nursery or neonatal
8 intensive care unit and transition to follow-up care by a health care or homecare provider;
9 provided further, that hospitals serving infants eligible for medical assistance and child health
10 assistance shall report to the department the causes and incidence of all re-hospitalizations of
11 infants that were born premature at less than 37 weeks gestational age and who are within their
12 first 6 months of life. Hospitals shall annually report to the department re-hospitalizations and

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

18 (b) The department shall submit an annual report to the general court on or before October 1 that
19 includes: (i) a description of the progress in implementing the provisions of this section; (ii)
20 information about the incidence and cause of re-hospitalizations of infants born premature at less
21 than 37 weeks gestational age within their first 6 months of life; and (iii) recommendations for
22 improvement of newborn health outcomes and ensuring continued health quality improvement,
23 including recommendations concerning technological needs to improve monitoring of premature
24 infants after discharge from the hospital and transition to a health care provider.