

Senate Bill 361

By: Senators Miller of the 49th, Unterman of the 45th, Hooks of the 14th, Goggans of the 7th, Jackson of the 24th and others

AS PASSED

**A BILL TO BE ENTITLED
AN ACT**

To amend Titles 31 and 43 of the Official Code of Georgia Annotated, relating to health and professions and businesses, respectively, so as to expand provisions relating to the accreditation of health care facilities to recognize the inclusion of additional nationally recognized health care accreditation bodies; to provide for conforming changes; to provide for related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

Title 31 of the Official Code of Georgia Annotated, relating to health, is amended in Code Section 31-6-47, relating to exemptions from state health planning and development requirements, by revising paragraph (11) of subsection (a) as follows:

"(11) Capital expenditures otherwise covered by this chapter required solely to eliminate or prevent safety hazards as defined by federal, state, or local fire, building, environmental, occupational health, or life safety codes or regulations, to comply with licensing requirements of the department, or to comply with accreditation standards of ~~the Joint Commission on Accreditation of Hospitals~~ a nationally recognized health care accreditation body;"

SECTION 2.

Said title is further amended in Code Section 31-7-3, relating to requirements for permits to operate institutions, by revising subsection (b) as follows:

"(b) The department may accept the certification or accreditation of an institution by ~~the Joint Commission on the Accreditation of Hospitals~~, the American Osteopathy Association; or ~~other~~ a nationally recognized health care accreditation body, in accordance with specific standards, as evidence of that institution's compliance with the substantially equivalent departmental requirements for issuance or renewal of a permit or provisional permit, provided that such certification or accreditation is established prior to the issuance or

renewal of such permits. The department may not require an additional departmental inspection of any institution whose certification or accreditation has been accepted by the department, except to the extent that such specific standards are less rigorous or less comprehensive than departmental requirements. Nothing contained in this Code section shall prohibit departmental inspections for violations of such standards or requirements nor shall it prohibit the revocation of or refusal to issue or renew permits, as authorized by Code Section 31-7-4, or for violation of any other applicable law or regulation pursuant thereto."

SECTION 3.

Said title is further amended in Code Section 31-7-131, relating to definitions relative to peer review groups, by revising paragraph (3) as follows:

"(3) 'Review organization' means ~~the Joint Commission on Accreditation of Healthcare Organizations. Such term also means any other national~~ a nationally recognized health care accreditation body or any panel, committee, or organization:

(A) Which:

- (i) Is primarily composed of professional health care providers;
- (ii) Is an insurer, self-insurer, health maintenance organization, preferred provider organization, provider network, or other organization engaged in managed care; or
- (iii) Provides professional liability insurance for health care providers; and

(B) Which engages in or utilizes peer reviews and gathers and reviews information relating to the care and treatment of patients for the purposes of:

- (i) Evaluating and improving the quality and efficiency of health care rendered;
- (ii) Reducing morbidity or mortality;
- (iii) Evaluating claims against health care providers or engaging in underwriting decisions in connection with professional liability insurance coverage for health care providers;

(iv) Compiling aggregate data concerning the procedures and outcomes of hospitals for the purposes of evaluating the quality and efficiency of health care services.

Under no circumstances shall any such aggregate data or any other peer review information relating to an individual professional health care provider be disclosed or released to any person or entity without the express prior written consent of such health care provider, but such aggregate data or other peer review information may be released to another review organization upon the written request of such organization if such requesting review organization has specific reason to believe that immediate access to such aggregate data or information is necessary to protect the public health, safety, and welfare. Such aggregate data and other peer review

information shall be used for peer review purposes only and in no event shall such aggregate data or any other peer review information be sold or otherwise similarly distributed, but a review organization shall be authorized to utilize the services of and pay a fee to another person or entity to compile or analyze such aggregate data;

(v) Evaluating the quality and efficiency of health care services rendered by a professional health care provider in connection with such provider's participation as or request to participate as a provider in or for an insurer, self-insurer, health maintenance organization, preferred provider organization, provider network, or other organization engaged in managed care; or

(vi) Performing any of the functions or activities described in Code Section 31-7-15."

SECTION 4.

Said title is further amended in Code Section 31-7-133, relating to confidentiality of peer review organization's records, by revising paragraph (1) of subsection (b) as follows:

"(1) The disclosure under Article 4 of Chapter 18 of Title 50 of those documents in the department's custody which are records, reports, or recommendations of ~~the Joint Commission on Accreditation of Healthcare Organizations or other national~~ a nationally recognized health care accreditation body and which are provided by an institution to the department for licensure purposes under subsection (b) of Code Section 31-7-3;"

SECTION 5.

Said title is further amended in Code Section 31-7-282, relating to collection and submission of health care data, as follows:

"31-7-282.

The department shall be authorized to request, collect, or receive the collection and submission of data listed in subsection (c) of Code Section 31-7-280 from:

- (1) Health care providers;
- (2) The Department of Human Services;
- (3) The Commissioner of Insurance;
- (4) Reserved;
- (5) Third-party payors;
- (6) ~~The Joint Commission on the Accreditation of Healthcare Organizations~~ A nationally recognized health care accreditation body; and
- (7) Other appropriate sources as determined by the department.

Any entity specified in paragraphs (1) through (3) of this Code section which has in its custody or control data requested by the department pursuant to this Code section shall provide the department with such data, but any data regarding a health care provider which

97 is already available in the records of any state officer, department, or agency specified in
98 paragraph (2) or (3) of this Code section shall not be required to be provided to the
99 department by that health care provider."

100 **SECTION 6.**

101 Said title is further amended in Code Section 31-11-113, relating to certification, application
102 process, and inspections of certified stroke centers, by revising subsection (a) as follows:

103 "(a) A hospital identified as a primary stroke center shall be certified as such by ~~the Joint~~
104 ~~Commission on Accreditation of Healthcare Organizations~~ a nationally recognized health
105 care accreditation body. Any hospital wishing to receive official identification under this
106 Code section must submit a written application to the department, providing adequate
107 documentation of the hospital's valid certification as a primary stroke center by the
108 commission."

109 **SECTION 7.**

110 Said title is further amended in Code Section 31-20-1, relating to definitions relative to the
111 performance of sterilization procedures, by revising paragraph (1) as follows:

112 "(1) 'Accredited hospital' means a hospital licensed by the Department of Community
113 Health and accredited by ~~the Joint Commission on the Accreditation of Hospitals~~ a
114 nationally recognized health care accreditation body."

115 **SECTION 8.**

116 Said title is further amended in Code Section 31-20-3, relating to sterilization of mentally
117 incompetent persons, by revising paragraph (3) of subsection (c) as follows:

118 "(3) Prior to the hearing on the application, evidence shall be presented to the court that
119 a sterilization procedure has been approved for the person alleged to be subject to this
120 Code section by a committee of the medical staff of the accredited hospital in which the
121 operation is to be performed. Such committee shall be one established and maintained
122 in accordance with the standards promulgated by ~~the Joint Commission on the~~
123 ~~Accreditation of Hospitals~~ a nationally recognized health care accreditation body, and its
124 approval must be by a majority vote of a membership of not less than three members of
125 the hospital staff, the physician proposing to perform the sterilization procedure not being
126 counted as a member of the committee for this purpose. The approval of such committee
127 as above specified shall be based upon a finding that the condition of the person alleged
128 to be subject to this Code section is irreversible and incurable in the opinion of the
129 majority of the committee as above specified. The person alleged to be subject to this
130 Code section, the applicant, the parents of the person, the guardian ad litem, and the

attorney representing the person shall receive a copy of the consolidated report not later than five days prior to the hearing and, upon a timely request by any party to the probate court proceeding, each author of that finding shall be subject to cross-examination either by testimony in court or by deposition;"

SECTION 9.

Title 43 of the Official Code of Georgia Annotated, relating to professions and businesses, is amended in Code Section 43-11-21.1, relating to general anesthesia administered by a dentist, by revising subsection (b) as follows:

"(b) No dentist shall be issued a permit under this Code section nor have such permit renewed unless the board has received satisfactory evidence that such dentist:

(1)(A) Has successfully completed a minimum of one year of advanced training in anesthesiology and related academic subjects beyond the undergraduate dental school level at an institution accredited by the Commission on Dental Accreditation of the American Dental Association, ~~the Joint Commission on Accreditation of Hospitals, or their respective successor agencies~~ or its successor agency, or by a nationally recognized health care accreditation body for hospitals; or

(B) Is a diplomate of the American Board of Oral and Maxillofacial Surgery, is a member of the American Association of Oral and Maxillofacial Surgeons, or is a fellow of the American Dental Society of Anesthesiology;

(2) Utilizes a properly equipped facility for the administration of general anesthesia, including physical plant and equipment which has been evaluated and certified by an on-site examination; and

(3) Has demonstrated to the satisfaction of the board or any designee thereof proficiency in administering general anesthesia on a patient or patients in the dentist's office in a safe and effective manner."

SECTION 10.

All laws and parts of laws in conflict with this Act are repealed.