Congressional Legislation 110th concerning hospital infection reporting and antibiotic resistant infection detection and prevention
(Click on bill number to view text of bill)

HR 1174
Bill Status: Introduced on 2/16/07; referred to the Committee on Ways and Means and the Committee on Energy and Commerce to consider provisions that fall within the jurisdiction of the committee concerned.
Sponsor(s): Rep. Tim Murphy (PA) and Rep(s). Myrick (NC), Boswell (IA), and Corrine Brown (FL). The bill now has 43 co-sponsors.
Other Information: "Healthy Hospitals Act of 2007" requires public disclosure of hospital-acquired infection rates.

S 2278
Bill Status: Introduced 10/31/07 and referred to the Committee on Health, Education, Labor, and Pensions.
Sponsor(s): Senators Durbin (IL), Obama (IL) and Schumer (NY), Menendez (NJ), Brown (OH), Clinton (NY), Whitehouse (RI), Lautenberg (NJ).
Other Information: The legislation seeks to improve the prevention, detection, and treatment of community and healthcare-associated infections, with a focus on antibiotic-resistant bacteria such as MRSA.

HR 4214
Sponsor(s): Representative Cummings (MD); Co-sponsors: Rep(s) Sarbanes (MD), Towns (NY), Wynn (MD), Boucher (VA), Ruppersberger (MD).
Other Information: Companion to S 2278: seeks to improve the prevention, detection, and treatment of community and healthcare-associated infections, with a focus on antibiotic-resistant bacteria such as MRSA.

S.2525
Sponsor: Senator Menendez (NJ); co-sponsor (s): Durbin (IL)
Other Information: Requires hospitals to screen patients for MRSA and to report MRSA and other infections by January 2009. The Secretary of HHS will create a system for publishing infection rates. The bill calls for MRSA screening for targeted high risk patients within 6 months of enactment, and screening of all incoming patients by 2012 (but the Sec. can waive this requirement). The bill also creates a process for identifying patients with MRSA who are being transferred between various facilities (e.g., from nursing home to hospital), provides education for health care facilities, requires hospitals to use established best practices for preventing the spread of infection (with no deadlines), offers financial assistance to hospitals including possible adjustments in Medicare payments and up front loans for the purchase of MRSA screening services (which must be paid back in 4 years).