State Legislative Approaches to Address Sepsis in 2017

Sepsis occurs when an infection causes the body to produce an overwhelming immune system response, triggering widespread inflammation and compromised blood flow.¹ It is a dangerous condition that impacts 1.5 million people in the United States annually.² Sepsis is the most expensive hospital condition to treat, costing more than $23 billion each year.³ In 2017, ASTHO tracked 11 pieces of legislation from four states that address sepsis, with one bill enacted into law. Policy approaches included establishing workgroups to identify and implement best practices to prevent and treat sepsis, education and outreach campaigns for providers and communities about sepsis, and requirements for health facilities to implement evidence-based sepsis recognition and treatment protocols.

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<tr>
<th>State</th>
<th>Bill Number</th>
<th>Summary</th>
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<tr>
<td>HI</td>
<td>SB 188</td>
<td>Establishes a 1-year pilot program run by the department of health to encourage the adoption of sepsis educational materials and initiatives in health facilities, disseminate best practices to recognize and treat sepsis, and provide findings and recommendations to the legislature.</td>
<td>Did not pass: Reported out of Senate Committee on Consumer Protection and Health and referred to Ways and Means.</td>
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<tr>
<td>HI</td>
<td>SCR 33 and</td>
<td>Senate resolutions requesting the department of health establish a sepsis workgroup to disseminate best practices,</td>
<td>Did not pass: Senate</td>
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² Sepsis is the most expensive hospital condition to treat, costing more than $23 billion each year.³ In 2017, ASTHO tracked 11 pieces of legislation from four states that address sepsis, with one bill enacted into law. Policy approaches included establishing workgroups to identify and implement best practices to prevent and treat sepsis, education and outreach campaigns for providers and communities about sepsis, and requirements for health facilities to implement evidence-based sepsis recognition and treatment protocols.
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<td>MO</td>
<td>SB 97</td>
<td>Requires hospitals to develop, implement, and periodically update evidence-based sepsis protocols for early recognition and treatment of sepsis.</td>
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<td>NJ</td>
<td>A 2105</td>
<td>Requires hospitals to develop, implement, and periodically update evidence-based sepsis protocols and submit them to the department of health. Hospitals must also collect sepsis quality measures and submit them to the health department.</td>
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<td>NY</td>
<td>AB 5900 and SB 4850</td>
<td>Requires the commissioner of education to develop a broad sepsis awareness prevention and education program that includes a model curriculum, lesson plans, and instructional materials for school districts to address prevention of and reducing individuals’ exposure to sepsis, posting materials relating to sepsis on the department’s website, and disseminating information about these materials during Sepsis Awareness Month in September.</td>
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<td>NY</td>
<td>AB 6053 and SB 4971</td>
<td>Requires the commissioner of education, in collaboration with the department of health and other health organizations, to establish a sepsis awareness, prevention, prevention, and education program targeted at students, parents, and school personnel. Specific components include age-appropriate model curriculums, lesson plans, and best practices to promote awareness of prevention methods to combat sepsis; tools and materials that incorporate data about sepsis; and strategies to disseminate the information to schools. In addition, the bill requires sepsis education as part of curriculums for health professions.</td>
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Committee on Consumer Protection and Health deferred SCR 33 and SR 7 was not taken up by Senate committees.

Did not pass: SCR 33 and SR 7.

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| NY | AB 9001 and SB 7280 | Requires educational curricula for health professions to include instruction on infections that could lead to sepsis. | Did not pass: Referred to Education, subsequently enacted in 2018. |