



**CALIFORNIA
HOSPITAL
ASSOCIATION**

*Providing Leadership in
Health Policy and Advocacy*

August 31, 2018

Scott Vivona, Acting Deputy Director
California Department of Public Health
Center for Health Care Quality
Attn: Regulations Unit, MS 3201
P.O. Box 99737
Sacramento, CA 95899-3201

Subject: AFL 18-33, Request for Stakeholder Input in Amending General Acute Care Hospital Medical Records Regulations

Dear Mr. Vivona:

On behalf of our more than 400 member hospitals and health systems, the California Hospital Association (CHA) respectfully offers the following comments on revising the Title 22 regulations regarding general acute care hospital (GACH) medical records.

As the California Department of Public Health (CDPH) is aware, the majority of Title 22 regulations are outdated and no longer relevant to current hospital delivery of care. Consequently, Title 22 precludes CDPH's ability to provide effective oversight. Equally problematic, the current regulations are among the many obstacles California hospitals face in providing high-quality health care under tight financial restrictions, while utilizing the most current technological advancements. CHA applauds CDPH for undertaking the monumental task of rewriting Title 22, and underscores the need to ensure a proper foundation and infrastructure are created to support this endeavor.

It is important that updated regulations: 1) are consistent with existing laws and regulations, as well as national standards; 2) can be readily implemented at the facility and unit levels; 3) allow for innovation in a constantly changing environment, to ensure their requirements remain relevant for decades; and 4) are organized in a manner that facilitates clear understanding of the requirements and compliance. We also encourage CDPH to review existing program flexibility to identify current practice standards.

CHA recommends that CDPH:

Require Hospitals to Adopt and Follow National Standards

CHA strongly urges CDPH to consider aligning Title 22 requirements with the Centers for Medicare & Medicaid Services' (CMS) Conditions of Participation (CoPs). If the department were to codify the existing CoPs in Title 22, those regulations would become outdated when CMS next updates the CoPs. Instead, CDPH could adopt the standards by reference, to allow Title 22 regulations to remain relevant as CoPs change in the future. In addition, CHA believes that, to keep pace with existing standards of care, hospitals should be required to choose relevant

national standards to use as a foundation for their policies and procedures. Facilities would base this decision on their patient population and the services they provide in each clinical service line. This will ensure that, as practice changes, Title 22 requirements remain relevant and hospitals continue to be held to the current community standard. Conformity with the CMS CoPs and the adoption of national standards in hospitals' policies and procedures will eliminate inconsistencies, inefficiencies and confusion.

Streamline Common Requirements for Basic and Supplemental Services

For each basic and supplemental service, hospitals must establish written policies and procedures, have specified equipment and meet other common requirements. CHA recommends that regulations pertaining to administrative policies and procedures be streamlined for basic and supplemental service areas. For example, one section of Title 22 should require each clinical service line to develop and implement policies and procedures, based on national standards identified by the hospital; provide sufficient trained and qualified staff; and provide sufficient equipment to serve the needs of the patient population. This will reduce redundancy and improve consistency on the key provisions that are unique to a particular service.

Eliminate Title 24 Building Standards from Title 22

CHA wishes to emphasize that Title 22 should be rewritten to allow California hospitals to provide care and design buildings that meet the needs of modern health care delivery. The Office of Statewide Health Planning and Development has jurisdiction over hospital building standards, including square footage, electrical and ventilation, and other non-operational standards. CHA strongly encourages CDPH to immediately remove those requirements from Title 22, unless the department has identified an operational concern.

Modernize Requirements for Medical Records

- Overall, CDPH should update the Title 22 regulations related to medical records to reflect the shift from paper charts to electronic records. For example, Section 70747's requirement that the medical records service space must be "conveniently located" and large enough in size to facilitate "filing" is outdated. Similarly, Section 70751's requirement to preserve X-ray "films" is outdated. Section 70751's requirement to close the medical record and open a new medical record when a patient is transferred to a different level of care within a hospital that has a distinct-part skilled-nursing or intermediate care service makes little sense in the context of an electronic health record. Other regulations should be revised to reflect electronic records.
- Further, CHA asks that CDPH clarify Section 70751's problematic requirement that medical records be filed in an "easily accessible manner" in the hospital or in an "approved medical record storage facility off the hospital premises." It is not clear what "easily accessible" means, who has authority to "approve" an offsite medical record storage facility or the criteria that an offsite storage facility must meet.
- Federal law at 42 CFR Section 482.24(c)(4)(viii) requires that medical records be completed within 30 days following discharge. CHA urges CDPH to revise Section 70751(g) in accordance with the federal standard.

CHA's recommendations are not an exhaustive list, but an initial submission during this pre-notice period. Moving forward, CHA is ready to assist CDPH in updating the Title 22 regulations to provide a structure for hospitals that supports the safe provision of patient care.

Thank you for the opportunity to comment as the department begins its work on these important regulations. We look forward to working with you. If you have any questions, please do not hesitate to contact me at drogers@calhospital.org or (916) 552-7575.

Sincerely,



Debby Rogers, RN, MS, FAEN
Vice President, Clinical Performance and Transformation

