

1 1. Screening patients for, and early recognition in patients
2 of, health-care-acquired and community-acquired sepsis and septic
3 shock;

4 2. Identification of patients for whom treatment, using the
5 sepsis protocols, is appropriate, and for whom treatment would be
6 inappropriate based on patient-specific clinical or bioethical
7 considerations, and documentation of these patient identification
8 activities;

9 3. Treatment guidelines;

10 4. Components that are population-specific as clinically
11 indicated in accordance with evidence-based best practices, such as
12 perinatal, neonatal, pediatric, and adult variations that may exist
13 in the identification and treatment of sepsis, with corresponding
14 development and use of clinical staff training materials and
15 practice tools that distinctly identify these population-specific
16 variations; and

17 5. Training of clinical staff in the sepsis protocols and
18 providing updated training upon substantive revisions thereof.

19 D. A hospital shall ensure that appropriate clinical staff
20 receive training in the sepsis protocols.

21 SECTION 2. NEW LAW A new section of law to be codified
22 in the Oklahoma Statutes as Section 1-724.2 of Title 63, unless
23 there is created a duplication in numbering, reads as follows:

1 For purposes of the early identification and treatment of
2 sepsis, and for consistency with the ICD-10-CM coding classification
3 system utilized by the federal Centers for Medicare and Medicaid
4 Services, any third-party payor or managed care organization with
5 which the Oklahoma Health Care Authority contracts for the delivery
6 of Medicaid services, and any health benefit plan as defined
7 pursuant to Section 6060.4 of Title 36 of the Oklahoma Statutes,
8 shall use and apply clinical criteria for sepsis that requires no
9 more than:

10 1. A provider's diagnosis of sepsis and that a suspected or
11 confirmed source of infection is present; and

12 2. The presence of two or more symptoms indicating inflammatory
13 response syndrome which may include elevated values of the patient's
14 body temperature, heart rate, white blood count, or respiratory
15 rate.

16 SECTION 3. This act shall become effective November 1, 2025.

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18 COMMITTEE REPORT BY: COMMITTEE ON HEALTH AND HUMAN SERVICES
19 OVERSIGHT, dated 02/26/2025 - DO PASS, As Coauthored.

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