

JAN 28 2026

A BILL FOR AN ACT

RELATING TO HOSPITAL DISCHARGE DATA.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that health care data can
2 be a valuable tool to create and implement evidence-based health
3 care policies, which may result in better coordination and
4 decision-making across all participants in the health care
5 landscape, from patients, to providers, payors, and the State.

6 The legislature further finds that forty-eight states
7 collect statewide inpatient hospital discharge data and that
8 more than thirty make a public-use file available for research
9 and public health. Some states with similar population data or
10 geographic isolation like Alaska, Delaware, Maine, New
11 Hampshire, and Rhode Island release or support the public use of
12 hospital discharge data through state agencies.

13 The legislature additionally finds that Hawaii has all-
14 payer hospital discharge data, historically via the Hawaii
15 Health Information Corporation and now the Laulima Data
16 Alliance, but access for external users and consumers is
17 limited.



1 The purpose of this Act is to:

2 (1) Establish a statewide system for the collection,
3 audit, and public release of de-identified hospital
4 discharge data; and

5 (2) Require the state health planning and development
6 agency to convene a working group to establish
7 hospital discharge data procedures.

8 SECTION 2. Chapter 323D, Hawaii Revised Statutes, is
9 amended by adding a new subpart to part II to be appropriately
10 designated and to read as follows:

11 " . Hospital Discharge Data

12 **§323D-A Definitions.** As used in this subpart:

13 "Acute care" means inpatient general routine care provided
14 to patients who are in an acute phase of illness, which includes
15 the concentrated and continuous observation and care provided in
16 the intensive care units of an institution.

17 "Discharge" means a patient's exit or release from a
18 hospital to the patient's residence following any medical care
19 or treatment rendered to the patient following an inpatient
20 admission.



1 "Emergency department" means any department of any general
2 hospital when a request is made for emergency services and care
3 for any emergency medical condition, which is within the service
4 capability of the hospital.

5 "Entry" means a patient's entrance into a hospital for the
6 purpose of receiving inpatient medical care.

7 "Executive officer" means a reporting facility's chief
8 executive officer, chief financial officer, chief operating
9 officer, president, or any vice president of the hospital in
10 charge of a principal business unit, division, or function,
11 including administration or finance.

12 "Hospital" means an institution with an organized medical
13 staff, regulated under section 321-11(10) that admits patients
14 for inpatient care, diagnosis, observation, and treatment, or is
15 a facility licensed under section 321-14.5.

16 "Hospital discharge data" means the information required to
17 be submitted under this subpart, as developed and administered
18 by the state agency.

19 "Inpatient" means a patient who has an admission order
20 given by a licensed physician or other individual who has been



1 granted admitting privileges by the hospital. "Inpatient" does
2 not include observation patients.

3 "Outpatient" means a patient who has a surgical procedure
4 that may be performed at an organized ambulatory health care
5 facility or emergency department and who does not require
6 overnight hospital care.

7 "Patient" means an individual admitted to a hospital, an
8 organized ambulatory health care facility or emergency
9 department for inpatient or outpatient treatment or a visit.

10 "Reporting facility" means a hospital, licensed short-term
11 acute care hospital; licensed organized ambulatory health care
12 facility, emergency department, lithotripsy center, or cardiac
13 catheterization laboratory required to submit hospital discharge
14 data under this subpart.

15 "Visit" means a face-to-face encounter between a health
16 care provider and a patient who is not formally admitted as an
17 inpatient in an acute care hospital setting at the time of the
18 encounter or who is not admitted to the same facility's acute
19 care hospital setting immediately following the encounter.

20 **§323D-B Hospital discharge data; inpatient reporting;**
21 **audit procedures.** (a) Beginning July 1, 2027, all hospitals



1 shall submit, at least quarterly, inpatient hospital discharge
2 data reports to the state agency according to the provisions and
3 procedures established by the hospital discharge data working
4 group established pursuant to section 4 of Act , Session Laws
5 of Hawaii 2026.

6 (b) Each hospital shall submit a separate inpatient
7 hospital discharge data report for each location, or a combined
8 report with multiple locations; provided that each location and
9 its hospital discharge data shall be clearly identified in the
10 report.

11 (c) All live discharges and deaths, including newborn live
12 discharges and deaths, from the following settings shall be
13 reported:

14 (1) Acute care;

15 (2) Intensive care;

16 (3) Long-term acute care;

17 (4) Short-term and long-term psychiatric; and

18 (5) Substance abuse and comprehensive rehabilitation.

19 (d) Upon notification by state agency staff, hospitals
20 shall provide access to all required information from the
21 medical records and billing documents underlying and documenting



1 the inpatient hospital discharge data reports submitted, as well
2 as other inpatient related documentation deemed necessary to
3 conduct complete inpatient hospital discharge data audits.

4 (e) The following provisions shall apply for inpatient
5 hospital discharge data reports submitted pursuant to this
6 section:

7 (1) Any inpatient who is transferred or discharged from
8 the acute care setting into a rehabilitative care
9 distinct part unit or free-standing hospital shall be
10 reported as a separate record from the patient's acute
11 care record; provided that the report shall
12 distinguish the discharge records as either :

13 (A) Data type one, for an acute care discharge
14 record; or

15 (B) Data type two, for a comprehensive rehabilitative
16 therapy discharge record;

17 (2) If an inpatient is administratively transferred or
18 formally discharged from the acute care setting into a
19 distinct part of a medicare-certified skilled nursing
20 unit or to hospice care, reporting accountability
21 shall cease at the time of discharge or transfer.



1 Patients receiving sub-acute care in these settings
2 shall be excluded from the reporting requirements
3 under this section;

4 (3) Observation patients shall not be included in the
5 inpatient hospital discharge data reports unless
6 admitted to the hospital as an inpatient; and

7 (4) When reporting visits, the hospital shall record each
8 instance that requires the patient to appear in an
9 ambulatory setting before the actual procedure;
10 provided that a visit that occurs one or more days
11 before the procedure shall be considered as one visit;
12 provided further that the admit date in this instance
13 shall be the day of the procedure.

14 **§323D-C Hospital discharge data; organized ambulatory**
15 **health care facility and emergency department reporting; audit**
16 **procedures.** (a) Beginning July 1, 2027, the following entities
17 shall submit, at least quarterly, hospital discharge data
18 reports, to the state agency according to the provisions and
19 procedures established by the hospital discharge data working
20 group established pursuant to section 4 of Act , Session Laws
21 of Hawaii 2026.:



(1) Licensed short-term acute care hospitals;

(2) Licensed organized ambulatory health care facilities;

(3) Emergency departments;

(4) Lithotripsy centers; and

(5) Cardiac catheterization laboratories.

(b) Each entity shall submit a separate hospital discharge data report for each location.

(c) All services for non-emergency visits for surgical procedures or services performed in the operating room; ambulatory surgical care; cardiology, including cardiac catheterization and percutaneous transluminal coronary angioplasty; gastrointestinal; extra-corporeal shock wave treatment or lithotripsy surgery; and endoscopy shall be included in the reports required under this section.

§323D-D Certification; resubmission of reports; change in

personnel. (a) The executive officer, administrator, or authorized designee of every reporting facility required to submit hospital discharge data reports to the state agency under this subpart shall certify that the reports are accurate, complete, and verifiable.



1 (b) The executive officer, administrator, or authorized
2 designee of a reporting facility may submit a written request to
3 the state agency to amend certified hospital discharge data
4 reports submitted under sections 323D-B or 323D-C. Requests to
5 resubmit a report shall be made within twelve months following
6 the initial submission due date. The written request shall
7 specify the reason for the corrections or changes; explain the
8 cause contributing to the inaccurate reporting; describe a
9 corrective action plan to prevent future errors; and indicate
10 the total number of records affected by quarters and years, the
11 data type, and the date the amended hospital discharge data
12 report is to be submitted to the state agency. The state agency
13 may grant approval for resubmission if the state agency
14 determines that the amended report will significantly impact
15 data quality.

16 (c) A reporting facility shall notify the state agency
17 when a change in certain personnel occurs, including the
18 reporting facility contact who is responsible for handling the
19 hospital discharge data submission, the facility chief executive
20 officer, or administrator. The notification shall include full



1 names, titles, applicable telephone and fax numbers, and
2 electronic mail addresses of the new personnel.

3 **§323D-E Data elements and codes; standards.** All
4 hospitals, organized ambulatory health care facilities, and
5 emergency departments submitting hospital discharge data
6 pursuant to this subpart shall report the required data elements
7 and data element codes as required by the state agency,
8 including but not be limited to information on a standard claim
9 form for institutional health care providers used to bill for
10 services to payers, including medicare, medicaid, and private
11 insurers, which captures patient info, diagnoses (ICD codes),
12 procedures, dates, charges, and provider details for inpatient
13 or outpatient care as designed by the National Uniform Billing
14 Committee.

15 **§323D-F Hospital discharge data reports; public**
16 **inspection.** (a) The state agency shall make hospital discharge
17 data reports available for public inspection during normal
18 business hours. The state agency may charge a reasonable fee
19 for the cost of copying a report under this section.



(b) Patient-specific records collected by the state agency shall be exempt from disclosure and shall not be released unless the following patient information has been de-identified:

(1) Name and any other assigned name or number by the hospital;

(2) Social security number;

(3) Birth date; provided that age in years may be disclosed;

(4) Entry date;

(5) Discharge date;

(6) Procedure date; provided that the number of days from admission to the procedure may be substituted;

(7) Other procedure date; provided that the number of days from admission to other procedure may be substituted; and

(8) Medical or health record number."

SECTION 3. Chapter 323D, Hawaii Revised Statutes, is amended by designating sections 323D-11 through 323D-18.6 as subpart A and inserting a title before section 323D-11 to read as follows:



"A. State Health Planning and Development Agency; Council;

Functions"

SECTION 4. (a) The state health planning and development agency shall convene a hospital discharge data working group no later than September 1, 2026, to develop the nature, scope, and procedures for submission of the hospital discharge data required by this Act.

(b) The working group shall consist of the following members, or their designee:

(1) The director of health;

(2) The administrator of the state health planning and development agency;

(3) The administrator of med-QUEST division of the
department of human services;

(4) The insurance commissioner; and

(5) A representative of the Hawaii health systems corporation.

(c) The members of the working group shall invite a representative from each of the following entities to be a member of the working group:

(1) Hawaii Health Information Exchange;



(2) Healthcare Association of Hawaii;

(3) The Queen's Health Systems;

(4) Hawaii Pacific Health;

(5) Hawaii Primary Care Association;

(6) Hawaii Medical Association;

(7) Pacific Medical Administrative Group; and

(8) A company with experience in comprehensive health care data analytic solutions.

(d) The majority of working group members may invite any other person deemed necessary to be a member of the working group.

(e) The working group shall select a chairperson from among its members.

(f) The working group shall hold public meetings with stakeholders, solicit input, and set its own meeting agendas.

(g) The members of the working group shall serve without compensation but shall be reimbursed for any actual and necessary expenses, including travel expenses, necessary for the performance of their duties.

(h) The working group shall submit a report of its findings and recommendations, including any proposed



1 legislation, to the legislature no later than twenty days prior
2 to the convening of the regular session of 2027.

3 (i) The working group shall cease to exist on June 30,
4 2027.

5 SECTION 5. There is appropriated out of the general
6 revenues of the State of Hawaii the sum of \$200,000 or so much
7 thereof as may be necessary for fiscal year 2026-2027 for the
8 purposes of this Act.

9 The sum appropriated shall be expended by the department of
10 health for the purposes of this Act.

11 SECTION 6. In codifying the new sections added by section
12 2 of this Act, the revisor of statutes shall substitute
13 appropriate section numbers for the letters used in designating
14 the new sections in this Act.

15 SECTION 7. New statutory material is underscored.

16 SECTION 8. This Act shall take effect on July 1, 2026.

17
INTRODUCED BY: _____

A handwritten signature in black ink, consisting of a large, stylized 'A' or 'B' shape with a long horizontal stroke extending to the right, positioned over the line for the 'INTRODUCED BY' field.

S.B. NO. 3246

Report Title:

DOH; State Health Planning and Development Agency; Hospital Discharge Data; Working Group; Appropriation

Description:

Establishes a statewide system for collecting, auditing, and publicly releasing of de-identified hospital discharge data. Requires the State Health Planning and Development Agency to convene a working group. Appropriates funds.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

