- 1 HB517
- 2 138595-2
- 3 By Representative Johnson (R)
- 4 RFD: Health
- 5 First Read: 14-MAR-12

1 138595-2:n:03/09/2012:FC/tj LRS2012-1634R1 2 3 4 5 6 7 SYNOPSIS: Under existing law, a statewide trauma 8 system was established related to the coordination 9 10 of pre-hospital and hospital trauma and emergency 11 medical services. There is a Statewide Trauma 12 Advisory Council and regional councils operating to 13 advise the Department of Public Health in the 14 administration of the statewide trauma system. 15 Included in the trauma system is the Trauma 16 Registry which requires reporting on trauma cases 17 to the Alabama Department of Public Health by 18 pre-hospital and hospital providers. This bill would authorize the addition of 19 20 other health care illnesses which require the 21 coordination of pre-hospital and hospital care. The 22 Alabama Department of Public Health would continue 23 to administer and regulate the programs. Other 24 registries for reporting on illnesses by 25 pre-hospital and hospital providers could be 26 developed. 27

| 1  | A BILL  |
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| 2  | TO BE ENTITLED  |
| 3  | AN ACT  |
| 4  |   |
| 5  | To amend Sections 22-11D-1, 22-11D-2, 22-11D-3,                     |
| 6  | 22-11D-4, 22-11D-5, 22-11D-6, 22-11D-7, 22-11D-8, and 22-11D-9      |
| 7  | of the Code of Alabama 1975, and to add Section 22-11D-10 to        |
| 8  | Chapter 11D of Title 22 of the Code of Alabama 1975, to expand      |
| 9  | the registry and system of care in the statewide trauma system      |
| 10 | to include other health care illnesses.                             |
| 11 | BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:                        |
| 12 | Section 1. Sections 22-11D-1, 22-11D-2, 22-11D-3,                   |
| 13 | 22-11D-4, 22-11D-5, 22-11D-6, 22-11D-7, 22-11D-8, and 22-11D-9      |
| 14 | of the Code of Alabama 1975, are amended to read as follows:        |
| 15 | "§22-11D-1.   |
| 16 | "The Legislature finds that trauma is <del>a severe</del>           |
| 17 | health problem <u>one of many health problems</u> in the State of   |
| 18 | Alabama and a major cause of death and long-term disability.        |
| 19 | It is in the best interest of the citizens of Alabama to            |
| 20 | establish an efficient and well-coordinated statewide trauma        |
| 21 | system <u>and to provide for other systems of care as the needs</u> |
| 22 | are recognized and funding becomes available to reduce costs        |
| 23 | and incidences of inappropriate or inadequate emergency             |
| 24 | medical services.   |
| 25 | "\$22-11D-2.  |
| 26 | "As used in this chapter, the following terms shall                 |
|    |   |

27 have the following meanings:

"(1) BOARD. The State Board of Health. 1 2 "(2) COMMUNICATIONS SYSTEM. A radio and land line network complying with the board's rules and which provides 3 4 rapid public access, coordinated central dispatching of services, and coordination of personnel, equipment, and 5 6 facilities in the trauma and health system. 7 "(3) COUNCIL. The Statewide Trauma and Health System Advisory Council. 8 9 "(4) DEPARTMENT. The Alabama Department of Public 10 Health. "(5) DESIGNATED TRAUMA CENTER. A trauma center which 11 12 is certified by the department and meets standards identified 13 in rules of the board. "(6)(5) DESIGNATION. A formal determination by the 14 15 department that a hospital is capable of providing designated trauma care as authorized by this chapter. 16 17 "(7)(6) EMERGENCY MEDICAL SERVICE. The organization responding to a perceived individual's need for immediate 18 medical care in order to prevent loss of life or aggravation 19 20 of physiological or psychological illness or injury. 21 "(7) HEALTH CARE CENTER. A hospital that voluntarily 22 participates in a statewide health system and that has been designated as a health care center pursuant to the rules of 23 the board. 24 25 "(8) REGIONAL COUNCILS. The regional trauma advisory 26 councils.

"(9) TRAUMA CENTER. A hospital that voluntarily
 participates in the statewide trauma system and that has been
 designated as a trauma center pursuant to the rules of the
 board.

5

"§22-11D-3.

6 "(a) The board, in consultation with, and having 7 solicited the advice of the council, shall establish and 8 maintain a statewide trauma <u>and health</u> system that shall 9 include centralized dispatch for participating trauma <u>and</u> 10 <u>health care</u> centers and emergency medical services.

11 "(b) The statewide trauma <u>and health</u> system shall 12 become operational within 12 months after the State Health 13 Officer certifies to the Governor in writing that the 14 department has sufficient funds to finance its development, 15 implementation, and operation.

16

"§22-11D-4.

17 "(a) With the advice of and after approval of the council, the board may adopt rules for verification and 18 certification of trauma and health care center status which 19 assign level designations based on resources available within 20 21 the facility. Rules shall be based upon national guidelines, 22 including, but not limited to, those established by the American College of Surgeons, the Joint Commission of 23 Accreditation of Health Care Organizations, in Hospital and 24 25 Pre-hospital Resources for Optimal Care of the Injured 26 Patient, and any published appendices thereto. Rules specific

1 to rural and urban areas shall be developed and adopted by 2 rule of the board.

"(b) Any medical facility that desires to be a 3 4 designated trauma or other health care center shall request a designation from the department whereby the medical facility 5 agrees to maintain a level of commitment and resources 6 7 sufficient to meet the responsibilities and standards required 8 by the statewide trauma system and the rules promulgated pursuant to this chapter. The board shall determine by rule 9 10 the manner and form of such requests and the standards for review of such requests. Any medical facility that meets such 11 12 standards shall be certified by the department and shall be 13 included in the statewide trauma or health system. The 14 department may revoke, suspend, or modify a designation if it 15 determines that the medical facility is substantially out of compliance with standards and it has refused or been unable to 16 17 comply after a reasonable period of time has elapsed. Any medical facility may challenge the board's designation, 18 denial, revocation, suspension, or modification of its trauma 19 center designation pursuant to the contested case provisions 20 21 of the Alabama Administrative Procedure Act and rules of the 22 board.

"(c) No medical facility shall hold itself out to the public as a trauma <u>or other health care</u> center unless it is designated as such by the department.

26

"§22-11D-5.

"(a) There is established the Statewide Trauma and
 <u>Health System</u> Advisory Council to assist in developing
 regulations and standards necessary to implement this chapter
 and to serve as consultants to the board on matters related to
 the statewide trauma system and other systems of care.

6 "(b) The council shall consist of 11 members and be 7 constituted in the following manner:

8 "(1) Four representatives of hospitals, who shall be 9 appointed by the Board of Trustees of the Alabama Hospital 10 Association. Two of the appointees shall be from hospitals 11 located in urban areas and two shall be from hospitals located 12 in rural areas of the state. At least two of the appointees 13 shall be from hospitals that will be designated as trauma 14 centers after the statewide trauma system is established.

"(2) Four representatives who shall be licensed
physicians, appointed by the Medical Association of the State
of Alabama.

18 "(3) One representative of the board who shall be 19 the Medical Director of the EMS and Trauma Division of the 20 department, or his or her designee.

"(4) One member who shall be a licensed emergency medical technician, who shall be appointed by the State Health Officer.

24 "(5) The State Health Officer, who shall serve as25 the chair.

"(c) All members of the council shall be appointed
for a term of four years, except initial members shall be

1 appointed to terms of from one to four years and shall serve 2 such staggered terms so that members appointed by the Alabama Hospital Association and Medical Association of the State of 3 4 Alabama may be appointed subsequently each year. The membership of the council shall be inclusive and reflect the 5 6 racial, gender, geographic, urban/rural, and economic 7 diversity of the state. Vacancies shall be filled in the manner provided for the original appointments. Persons 8 appointed to fill vacancies shall serve the unexpired portions 9 10 of the terms.

"(d) The council shall meet at least twice a year, but may meet more frequently upon the call of the chair. The council may meet by electronic means and shall establish rules of procedure for its meetings.

"(e) The council may appoint subcommittees and
workgroups. Subcommittees shall consist of council members and
workgroups may consist of non-council members.

18 "(f) With the consent of the majority of the 19 members, the chair shall set requirements for proxy 20 representation, voting, and the establishment of a quorum.

"(g) Members shall serve without compensation, but shall be entitled to reimbursement for expenses incurred in the performance of their duties at the same rate as state employees.

25 "(h) The members shall represent the demographic26 composition of the state to the extent possible.

27 "§22-11D-6.

1 "(a) The department shall establish a statewide trauma registry and may establish other registries to collect 2 and analyze data on the incidence, severity, and causes of 3 4 trauma, including traumatic brain injury and other health care problems. The registry registries shall be used to improve the 5 availability and delivery of pre-hospital or out-of-hospital 6 7 care and hospital trauma care services. Specific data elements of the registry registries shall be defined by rule of the 8 department. Every health care facility that is designated by 9 10 the department as a trauma or health care center shall furnish data to the registry registries. All other health care 11 12 facilities shall furnish trauma data as required by rule of 13 the department.

"(b) All data collected pursuant to this section
shall be held confidential pursuant to state and federal laws,
rules, and policies.

17

"§22-11D-7.

"(a) The board shall designate, by rule, trauma care
regions, so that all parts of the state are within such
regions. The regional designations shall be made on the basis
of efficiency of delivery of needed trauma care.

"(b) The board may establish regional trauma advisory councils as needed. Regional trauma advisory councils shall advise, consult with, and make recommendations to the council on suggested regional modifications to the statewide trauma system that will improve patient care and accommodate specific regional needs. Each regional trauma advisory council shall provide data required by the department or the council
 to assess the effectiveness of the statewide trauma system.

"(c) Each regional trauma advisory council shall 3 4 have a minimum of 10 members. The membership of regional trauma advisory councils shall be appointed in the same manner 5 6 as the council is appointed and shall be composed of 7 representatives of the same groups. Additional members may be appointed pursuant to rules promulgated by the board. The 8 chair of each regional trauma advisory council shall be 9 10 elected by the members to serve for four years. The members shall represent the demographic composition of the region 11 12 served, as far as practicable.

13 "(d) Regional trauma advisory council members shall 14 be entitled to reimbursement for expenses incurred in the 15 performance of their duties at the same rate as state 16 employees.

17 "(e) All other governance requirements of the 18 regional trauma advisory councils shall be established by rule 19 of the board.

20 "\$22-11D-8.

"In accordance with the Alabama Administrative Procedure Act, the board, with the advice and after approval of the council, shall promulgate rules to implement and administer this chapter. Rules promulgated by the board may include, but are not limited to, the following:

"(1) Criteria to ensure that severely injured <u>or ill</u>
 people are promptly transported and treated at <u>designated</u>

trauma <u>or health care</u> centers appropriate to the severity of the injury. Minimum criteria shall address emergency medical service <del>trauma</del> triage and transportation guidelines as approved under the board's emergency medical services rules, designation of health care facilities <del>as trauma centers,</del> interhospital transfers, and a <del>trauma</del> system governance structure.

"(2) Standards for verification of trauma and health 8 9 care center status which assign level designations based on 10 resources available within the facility. Standards shall be based upon national guidelines, including, but not limited to, 11 12 those established by the American College of Surgeons, 13 entitled Hospital and Pre-hospital Resources for Optimal Care 14 of the Injured Patient, the Joint Commission Accreditation of Health Care Organizations, and any published appendices 15 16 thereto.

17 "(3) Communication systems used by participating
18 trauma <u>and health care</u> centers and emergency medical services.

19 "(4) Verification and adjustment of trauma center 20 status.

21

"(5) Specifications for centralized dispatch.

"(6) Dividing the state into emergency management services regions to ensure that all parts of the state are within a region. The regional designations shall be made on the basis of efficiency of delivery of needed trauma care.

26 "(7) Establishing regional trauma advisory councils
27 and designating their roles and responsibilities.

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"(8) Designating levels of trauma <u>and health care</u>
 centers.

3 "(9) Specifying activation requirements for air
4 ambulances conducting scene flights. The board shall not
5 regulate in any manner the activation or operations of
6 fixed-wing providers that do not conduct scene flights.

7 "(10) Quality assurance requirements and evaluation8 methodologies.

9 "(11) Statewide trauma registry data elements and 10 data collection.

11

"§22-11D-9.

12 "(a) The Statewide Trauma System Fund is created. 13 The department shall distribute funding allocated to the 14 department for the purpose of creating, administering, 15 maintaining, or enhancing the statewide trauma system. The department may apply for, receive, and accept gifts and other 16 17 payments, including property and services, for the fund from any governmental or other public or private entity or person 18 and may utilize the fund for activities related to the design, 19 administration, operation, maintenance, or enhancement of the 20 21 statewide trauma system.

"(b) The methodology of distribution of funds and
allocation of funds shall be established by the council and
subsequently adopted by the board, pursuant to the
<u>Administrative Procedure Act</u>. Guidelines and parameters for
distribution and allocation of funds is the sole prerogative
of the council. Fund allocation to trauma centers shall be

based upon the designated level of trauma care and the number of qualified patients directed through the trauma centers, as defined by the rules of the board.

"(c) Nothing in this chapter shall limit a patient's
right to choose the physician, hospital, trauma center, <u>health</u>
<u>care center</u>, facility, or other provider of health care
services, subject to any limitations, requirements, or
mechanisms prescribed in any federal law or law of the State
of Alabama.

10 "(d) Nothing in this chapter shall limit a hospital 11 to be designated as a trauma center or other designated health 12 care center."

Section 2. Section 22-11D-10 is added to the Code of
Alabama 1975, to read as follows:

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§22-11D-10.

(a) The Statewide Health System Fund is created. The 16 17 department shall distribute funding allocated to the department for the purpose of creating, administering, 18 maintaining, or enhancing the statewide health system. The 19 department may apply for, receive, and accept gifts and other 20 21 payments, including property and services, for the fund from 22 any governmental or other public or private entity or person 23 and may utilize the fund for activities related to the design, administration, operation, maintenance, or enhancement of the 24 25 statewide health system.

(b) The methodology of distribution of funds andallocation of funds shall be established by the council and

subsequently adopted by the board pursuant to the Administrative Procedure Act. Fund allocation to health care centers shall be based upon the designated level of health care and the number of qualified patients directed through the health care centers, as defined by the rules of the board.

6 (c) Nothing in this chapter shall limit a patient's 7 right to choose the physician, hospital, trauma center, health 8 care center, facility, or other provider of health care 9 services, subject to any limitations, requirements, or 10 mechanisms prescribed in any federal law or law of the State 11 of Alabama.

12 (d) Nothing in this chapter shall limit a hospital
13 to be designated as a trauma center or other designated health
14 care center.

Section 3. This act shall become effective on the first day of the third month following its passage and approval by the Governor, or its otherwise becoming law.

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