

FIRST REGULAR SESSION

HOUSE BILL NO. 721

101ST GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE SHARP (36).

1454H.011

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal section 190.241, RSMo, and to enact in lieu thereof one new section relating to trauma center designations.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 190.241, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 190.241, to read as follows:

190.241. 1. The department shall designate a hospital as an adult, pediatric or adult and pediatric trauma center when a hospital, upon proper application submitted by the hospital and site review, has been found by the department to meet the applicable level of trauma center criteria for designation in accordance with rules adopted by the department as prescribed by section 190.185. Such rules shall include designation as a trauma center without site review if such hospital is verified by a national verifying or designating body at the level which corresponds to a level approved in rule. **The department shall not deny a qualified hospital designation as a level I, II, or III trauma center based solely on the distance or mileage between trauma centers.**

2. Except as provided for in subsection 5 of this section, the department shall designate a hospital as a STEMI or stroke center when such hospital, upon proper application and site review, has been found by the department to meet the applicable level of STEMI or stroke center criteria for designation in accordance with rules adopted by the department as prescribed by section 190.185. In developing STEMI center and stroke center designation criteria, the department shall use, as it deems practicable, appropriate peer-reviewed or evidence-based research on such topics including, but not limited to, the most recent guidelines of the American College of Cardiology and American Heart Association for STEMI centers, or the Joint

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 Commission's Primary Stroke Center Certification program criteria for stroke centers, or Primary
19 and Comprehensive Stroke Center Recommendations as published by the American Stroke
20 Association. Such rules shall include designation as a STEMI center without site review if such
21 hospital is certified by a national body.

22 3. The department of health and senior services shall, not less than once every five years,
23 conduct an on-site review of every trauma, STEMI, and stroke center through appropriate
24 department personnel or a qualified contractor, with the exception of stroke centers designated
25 pursuant to subsection 5 of this section; however, this provision is not intended to limit the
26 department's ability to conduct a complaint investigation pursuant to subdivision (3) of
27 subsection 2 of section 197.080 of any trauma, STEMI, or stroke center. On-site reviews shall
28 be coordinated for the different types of centers to the extent practicable with hospital licensure
29 inspections conducted under chapter 197. No person shall be a qualified contractor for purposes
30 of this subsection who has a substantial conflict of interest in the operation of any trauma,
31 STEMI, or stroke center under review. The department may deny, place on probation, suspend
32 or revoke such designation in any case in which it has reasonable cause to believe that there has
33 been a substantial failure to comply with the provisions of this chapter or any rules or regulations
34 promulgated pursuant to this chapter. If the department of health and senior services has
35 reasonable cause to believe that a hospital is not in compliance with such provisions or
36 regulations, it may conduct additional announced or unannounced site reviews of the hospital
37 to verify compliance. If a trauma, STEMI, or stroke center fails two consecutive on-site reviews
38 because of substantial noncompliance with standards prescribed by sections 190.001 to 190.245
39 or rules adopted by the department pursuant to sections 190.001 to 190.245, its center
40 designation shall be revoked.

41 4. Instead of applying for STEMI center designation under subsection 2 of this section,
42 a hospital may apply for STEMI center designation under this subsection. Upon receipt of an
43 application from a hospital on a form prescribed by the department, the department shall
44 designate such hospital:

45 (1) A level I STEMI center if such hospital has been certified as a Joint Commission
46 comprehensive cardiac center or another department-approved nationally recognized
47 organization that provides comparable STEMI center accreditation; or

48 (2) A level II STEMI center if such hospital has been accredited as a Mission: Lifeline
49 STEMI receiving center by the American Heart Association accreditation process or another
50 department-approved nationally recognized organization that provides STEMI receiving center
51 accreditation.

52 5. Instead of applying for stroke center designation pursuant to the provisions of
53 subsection 2 of this section, a hospital may apply for stroke center designation pursuant to this

54 subsection. Upon receipt of an application from a hospital on a form prescribed by the
55 department, the department shall designate such hospital:

56 (1) A level I stroke center if such hospital has been certified as a comprehensive stroke
57 center by the Joint Commission or any other certifying organization designated by the department
58 when such certification is in accordance with the American Heart Association/American Stroke
59 Association guidelines;

60 (2) A level II stroke center if such hospital has been certified as a primary stroke center
61 by the Joint Commission or any other certifying organization designated by the department when
62 such certification is in accordance with the American Heart Association/American Stroke
63 Association guidelines; or

64 (3) A level III stroke center if such hospital has been certified as an acute stroke-ready
65 hospital by the Joint Commission or any other certifying organization designated by the
66 department when such certification is in accordance with the American Heart
67 Association/American Stroke Association guidelines.

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69 Except as provided by subsection 6 of this section, the department shall not require compliance
70 with any additional standards for establishing or renewing stroke designations. The designation
71 shall continue if such hospital remains certified. The department may remove a hospital's
72 designation as a stroke center if the hospital requests removal of the designation or the
73 department determines that the certificate recognizing the hospital as a stroke center has been
74 suspended or revoked. Any decision made by the department to withdraw its designation of a
75 stroke center pursuant to this subsection that is based on the revocation or suspension of a
76 certification by a certifying organization shall not be subject to judicial review. The department
77 shall report to the certifying organization any complaint it receives related to the stroke center
78 certification of a stroke center designated pursuant to this subsection. The department shall also
79 advise the complainant which organization certified the stroke center and provide the necessary
80 contact information should the complainant wish to pursue a complaint with the certifying
81 organization.

82 6. Any hospital receiving designation as a stroke center pursuant to subsection 5 of this
83 section shall:

84 (1) Annually and within thirty days of any changes submit to the department proof of
85 stroke certification and the names and contact information of the medical director and the
86 program manager of the stroke center;

87 (2) Submit to the department a copy of the certifying organization's final stroke
88 certification survey results within thirty days of receiving such results;

89 (3) Submit every four years an application on a form prescribed by the department for
90 stroke center review and designation;

91 (4) Participate in the emergency medical services regional system of stroke care in its
92 respective emergency medical services region as defined in rules promulgated by the department;

93 (5) Participate in local and regional emergency medical services systems by reviewing
94 and sharing outcome data and providing training and clinical educational resources.

95

96 Any hospital receiving designation as a level III stroke center pursuant to subsection 5 of this
97 section shall have a formal agreement with a level I or level II stroke center for physician
98 consultative services for evaluation of stroke patients for thrombolytic therapy and the care of
99 the patient post-thrombolytic therapy.

100 7. Hospitals designated as a STEMI or stroke center by the department, including those
101 designated pursuant to subsection 5 of this section, shall submit data to meet the data submission
102 requirements specified by rules promulgated by the department. Such submission of data may
103 be done by the following methods:

104 (1) Entering hospital data directly into a state registry by direct data entry;

105 (2) Downloading hospital data from a nationally recognized registry or data bank and
106 importing the data files into a state registry; or

107 (3) Authorizing a nationally recognized registry or data bank to disclose or grant access
108 to the department facility-specific data held by the registry or data bank.

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110 A hospital submitting data pursuant to subdivision (2) or (3) of this subsection shall not be
111 required to collect and submit any additional STEMI or stroke center data elements.

112 8. When collecting and analyzing data pursuant to the provisions of this section, the
113 department shall comply with the following requirements:

114 (1) Names of any health care professionals, as defined in section 376.1350, shall not be
115 subject to disclosure;

116 (2) The data shall not be disclosed in a manner that permits the identification of an
117 individual patient or encounter;

118 (3) The data shall be used for the evaluation and improvement of hospital and emergency
119 medical services' trauma, stroke, and STEMI care;

120 (4) The data collection system shall be capable of accepting file transfers of data entered
121 into any national recognized trauma, stroke, or STEMI registry or data bank to fulfill trauma,
122 stroke, or STEMI certification reporting requirements; and

123 (5) STEMI and stroke center data elements shall conform to nationally recognized
124 performance measures, such as the American Heart Association's Get With the Guidelines, and

125 include published detailed measure specifications, data coding instructions, and patient
126 population inclusion and exclusion criteria to ensure data reliability and validity.

127 9. The board of registration for the healing arts shall have sole authority to establish
128 education requirements for physicians who practice in an emergency department of a facility
129 designated as a trauma, STEMI, or stroke center by the department under this section. The
130 department shall deem such education requirements promulgated by the board of registration for
131 the healing arts sufficient to meet the standards for designations under this section.

132 10. The department of health and senior services may establish appropriate fees to offset
133 the costs of trauma, STEMI, and stroke center reviews.

134 11. No hospital shall hold itself out to the public as a STEMI center, stroke center, adult
135 trauma center, pediatric trauma center, or an adult and pediatric trauma center unless it is
136 designated as such by the department of health and senior services.

137 12. Any person aggrieved by an action of the department of health and senior services
138 affecting the trauma, STEMI, or stroke center designation pursuant to this chapter, including the
139 revocation, the suspension, or the granting of, refusal to grant, or failure to renew a designation,
140 may seek a determination thereon by the administrative hearing commission under chapter 621.
141 It shall not be a condition to such determination that the person aggrieved seek a reconsideration,
142 a rehearing, or exhaust any other procedure within the department.

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