

CCS SB 50 -- HEALTH CARE

This bill modifies several provisions relating to health care.

STEMI AND TRAUMA CENTER DESIGNATIONS

This bill requires the Department of Health and Senior Services to promulgate rules for the designation of a trauma center or a Segment Evaluation Myocardial Infraction (STEMI) center without site review if such hospital is certified by a national body.

Additionally, a hospital may apply for STEMI center designation as follows:

- (1) A Level I STEMI center if such hospital has been certified as a Joint Commission Comprehensive Cardiac Center or another approved nationally-recognized organization; or
- (2) A Level II STEMI center if such hospital has been accredited as a Mission: Lifeline STEMI Receiving Center by the American Heart Association or another approved nationally-recognized organization.

No rule or regulation promulgated by the department shall require hospitals, as a condition of trauma, STEMI, or stroke center designation, to obtain emergency medical services data, unless such data may be obtained from the state database for emergency medical services. Additionally, a hospital shall not be required to comply with an interpretation of a specific provision in a regulation concerning trauma, STEMI, or stroke centers if the hospital can demonstrate that the interpretation of such provision was different for a similarly-situated hospital, unless the department has subsequently and consistently interpreted such provision for similarly-situated hospitals. The department shall attend meetings with trauma, STEMI, and stroke centers for the benefit of improved communications, best-practice identification, and facilitation of improvements to the designation process.

The bill removes the requirement that the department generate quarterly regional and state outcome data reports for trauma, stroke, and STEMI centers, the State Advisory Council on EMS, and regional EMS committees (Sections 190.241 and 190.242, RSMo).

NEWBORN SCREENING

Beginning January 1, 2019, this bill requires the department, subject to appropriations, to expand current newborn screening requirements to include spinal muscular atrophy and Hunter syndrome (MPS II) (Section 191.332).

NEONATAL AND MATERNAL LEVELS OF CARE

This bill requires the department to hold public hearings and establish criteria for levels of maternal care designations and neonatal care designations for birthing facilities. Beginning January 1, 2019, any hospital with a birthing facility and any hospital with a birthing facility operated by a state university shall report to the department its appropriate level of maternal care and neonatal care designations. The department may partner with nationally-recognized nonprofit organizations with relevant expertise to administer the provisions of this bill (Section 192.380).

X-RAY INSPECTIONS

This bill provides that inspections of cone beam computed tomography systems and panoramic x-ray systems that cannot produce radiation intensity greater than 30 milligrays shall not be required to be inspected more frequently than every three years. Cone beam computed tomography systems that can produce radiation intensity greater than 30 milligrays shall be inspected annually. Additionally, all cone beam computed tomography systems and panoramic x-ray systems shall be inspected within 30 days of installation and whenever moved within an office.

A cone beam computed tomography system is a medical imaging device which uses x-ray computed tomography to capture data using a cone-shaped x-ray beam. A panoramic x-ray system is an imaging device that captures the entire mouth in a single, 2-dimensional image that includes the teeth, upper and lower jaws, and surrounding structures and tissues.

This bill also provides that inspections of conventional x-ray equipment used exclusively on animals by a licensed veterinarian or veterinary facility shall not be required to be inspected more frequently than every four years (Section 192.500).

HEALTH CARE DIRECTIVES REGISTRY

This bill requires the department to contract with a third party for the establishment of a health care directives registry for the purpose of providing a place to securely store an advance health care directive and to give authorized health care providers access to the directive. The third party contractor shall be solely responsible for the administration and maintenance of the registry. All data and information contained in the registry shall remain confidential and shall be exempt from the Sunshine Law. An "advance health care directive" is defined as either a power of

attorney for health care or a declaration signed by an adult declarant containing the person's direction concerning a health care decision.

All documents shall be submitted electronically to the registry at intake points, such as licensed health care providers and licensed attorneys, and signed electronically with a unique identifier, such as a Social Security number, a driver's license number, or another unique government-issued identifier. The electronic submission will be accompanied by a fee not to exceed \$10.

The department may promulgate rules to carry out these provisions, which may include, but not be limited to, a determination of who may access the registry, including physicians, other licensed health care providers, the declarant, and his or her legal representative or designee. Failure to register a document with the registry or failure to notify the registry of the revocation of a document shall not affect the validity of the document or revocation (Section 194.600).

HOSPITAL LICENSURE

Beginning July 1, 2018, this bill requires that compliance with Medicare conditions of participation shall be deemed to constitute compliance with the standards for hospital licensure in this state. Nothing in this bill shall preclude the Department of Health and Senior Services from promulgating regulations, with specific statutory authorization, to define separate regulatory standards that do not duplicate the Medicare conditions of participation. Regulations promulgated by the department that duplicate or conflict with Medicare conditions of participation shall lapse and expire on and after July 1, 2018 (Sections 197.005, 197.040, 197.050, 197.070, 197.071, 197.080, and 197.100).

HOSPITAL EMPLOYMENT OF DENTISTS

This bill allows a licensed hospital to employ any of the following providers to treat certain conditions for hospital patients: licensed dentists; licensed oral and maxillofacial surgeons; and licensed maxillofacial prosthodontists (Section 332.081).

ASSISTANT PHYSICIANS

This bill modifies the definition of "assistant physician" to allow any medical school graduate who has met the requirements to be an assistant physician between August 28, 2014, and August 28, 2017 to be deemed to be in compliance with the requirements of becoming an assistant physician (Section 334.036).

SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS

This bill provides that license renewal for speech-language pathologists and audiologists shall occur no less frequently than every three years. Additionally, the continued competence requirements for licensed speech-language pathologists and audiologists may include up to 30 hours triennially of continuing education, examination, self-evaluation, peer review, performance appraisal, or practical simulation (Section 345.051).