

House _____ Amendment NO. _____

Offered By _____

1 AMEND House Committee Substitute for Senate Substitute for Senate Bill No. 7, Page 14, Section
2 190.166, Line 60, by inserting after all of said section and line the following:
3

4 "190.241. 1. Except as provided for in subsection 4 of this section, the department shall
5 designate a hospital as an adult, pediatric or adult and pediatric trauma center when a hospital, upon
6 proper application submitted by the hospital and site review, has been found by the department to
7 meet the applicable level of trauma center criteria for designation in accordance with rules adopted
8 by the department as prescribed by section 190.185. Site review may occur on-site or by any
9 reasonable means of communication, or by any combination thereof. Such rules shall include
10 designation as a trauma center without site review if such hospital is verified by a national verifying
11 or designating body at the level which corresponds to a level approved in rule. In developing
12 trauma center designation criteria, the department shall use, as it deems practicable, peer-reviewed
13 and evidence-based clinical research and guidelines including, but not limited to, the most recent
14 guidelines of the American College of Surgeons. The department shall not deny a qualified hospital
15 designation as a level I, II, or III trauma center based solely on the distance or mileage between
16 trauma centers.

17 2. Except as provided for in subsection 4 of this section, the department shall designate a
18 hospital as a STEMI or stroke center when such hospital, upon proper application and site review,
19 has been found by the department to meet the applicable level of STEMI or stroke center criteria for
20 designation in accordance with rules adopted by the department as prescribed by section 190.185.
21 Site review may occur on-site or by any reasonable means of communication, or by any
22 combination thereof. In developing STEMI center and stroke center designation criteria, the
23 department shall use, as it deems practicable, peer-reviewed and evidence-based clinical research
24 and guidelines including, but not limited to, the most recent guidelines of the American College of
25 Cardiology, the American Heart Association, or the American Stroke Association. Such rules shall
26 include designation as a STEMI center or stroke center without site review if such hospital is
27 certified by a national body.

28 3. The department of health and senior services shall, not less than once every three years,
29 conduct a site review of every trauma, STEMI, and stroke center through appropriate department
30 personnel or a qualified contractor, with the exception of trauma centers, STEMI centers, and stroke

Action Taken _____ Date _____

1 centers designated pursuant to subsection 4 of this section; however, this provision is not intended to
2 limit the department's ability to conduct a complaint investigation pursuant to subdivision (3) of
3 subsection 2 of section 197.080 of any trauma, STEMI, or stroke center. Site reviews shall be
4 coordinated for the different types of centers to the extent practicable with hospital licensure
5 inspections conducted under chapter 197. No person shall be a qualified contractor for purposes of
6 this subsection who has a substantial conflict of interest in the operation of any trauma, STEMI, or
7 stroke center under review. The department may deny, place on probation, suspend or revoke such
8 designation in any case in which it has determined there has been a substantial failure to comply
9 with the provisions of this chapter or any rules or regulations promulgated pursuant to this chapter.
10 Centers that are placed on probationary status shall be required to demonstrate compliance with the
11 provisions of this chapter and any rules or regulations promulgated under this chapter within twelve
12 months of the date of the receipt of the notice of probationary status, unless otherwise provided by a
13 settlement agreement with a duration of a maximum of eighteen months between the department
14 and the designated center. If the department of health and senior services has determined that a
15 hospital is not in compliance with such provisions or regulations, it may conduct additional
16 announced or unannounced site reviews of the hospital to verify compliance. If a trauma, STEMI,
17 or stroke center fails two consecutive site reviews because of substantial noncompliance with
18 standards prescribed by sections 190.001 to 190.245 or rules adopted by the department pursuant to
19 sections 190.001 to 190.245, its center designation shall be revoked.

20 4. (1) Instead of applying for trauma, STEMI, or stroke center designation under subsection
21 1 or 2 of this section, a hospital may apply for trauma, STEMI, or stroke center designation under
22 this subsection. Upon receipt of an application on a form prescribed by the department, the
23 department shall designate such hospital at a state level that corresponds to a similar national
24 designation as set forth in rules promulgated by the department. The rules shall be based on
25 standards of nationally recognized organizations and the recommendations of the time-critical
26 diagnosis advisory committee.

27 (2) Except as provided by subsection 5 of this section, the department shall not require
28 compliance with any additional standards for establishing or renewing trauma, STEMI, or stroke
29 designations under this subsection. The designation shall continue if such hospital remains certified
30 or verified. The department may remove a hospital's designation as a trauma center, STEMI center,
31 or stroke center if the hospital requests removal of the designation or the department determines that
32 the certificate or verification that qualified the hospital for the designation under this subsection has
33 been suspended or revoked. Any decision made by the department to withdraw its designation of a
34 center pursuant to this subsection that is based on the revocation or suspension of a certification or
35 verification by a certifying or verifying organization shall not be subject to judicial review. The
36 department shall report to the certifying or verifying organization any complaint it receives related
37 to the center designated pursuant to this subsection. The department shall also advise the
38 complainant which organization certified or verified the center and provide the necessary contact

1 information should the complainant wish to pursue a complaint with the certifying or verifying
2 organization.

3 5. Any hospital receiving designation as a trauma center, STEMI center, or stroke center
4 pursuant to subsection 4 of this section shall:

5 (1) Within thirty days of any changes or receipt of a certificate or verification, submit to the
6 department proof of certification or verification and the names and contact information of the
7 center's medical director and the program manager; and

8 (2) Participate in local and regional emergency medical services systems for purposes of
9 providing training, sharing clinical educational resources, and collaborating on improving patient
10 outcomes.

11
12 Any hospital receiving designation as a level III stroke center pursuant to subsection 4 of this
13 section shall have a formal agreement with a level I or level II stroke center for physician
14 consultative services for evaluation of stroke patients for thrombolytic therapy and the care of the
15 patient post-thrombolytic therapy.

16 6. Hospitals designated as a trauma center, STEMI center, or stroke center by the
17 department shall submit data by one of the following methods:

18 (1) Entering hospital data into a state registry; or

19 (2) Entering hospital data into a national registry or data bank. A hospital submitting data
20 pursuant to this subdivision shall not be required to collect and submit any additional trauma,
21 STEMI, or stroke center data elements. No hospital submitting data to a national data registry or
22 data bank under this subdivision shall withhold authorization for the department to access such data
23 through such national data registry or data bank. Nothing in this subdivision shall be construed as
24 requiring duplicative data entry by a hospital that is otherwise complying with the provisions of this
25 subsection. Failure of the department to obtain access to data submitted to a national data registry
26 or data bank shall not be construed as hospital noncompliance under this subsection.

27 7. When collecting and analyzing data pursuant to the provisions of this section, the
28 department shall comply with the following requirements:

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

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

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

35 (4) Trauma, STEMI, and stroke center data elements shall conform to national registry or
36 data bank data elements, and include published detailed measure specifications, data coding
37 instructions, and patient population inclusion and exclusion criteria to ensure data reliability and
38 validity.

1 8. The department shall not have authority to establish additional education requirements for
2 physicians who are emergency medicine board-certified or board-eligible through the American
3 Board of Emergency Medicine (ABEM) or the American Osteopathic Board of Emergency
4 Medicine (AOBEM) and who are practicing in the emergency department of a facility designated as
5 a trauma center, STEMI center, or stroke center by the department under this section. The
6 department shall deem the education requirements promulgated by ABEM or AOBEM to meet the
7 standards for designations under this section. Education requirements for non-ABEM or non-
8 AOBEM certified physicians, nurses, and other providers who provide care at a facility designated
9 as a trauma center, STEMI center, or stroke center by the department under this section shall mirror
10 but not exceed those established by national designating or verifying bodies of trauma centers,
11 STEMI centers, or stroke centers.

12 9. The department of health and senior services may establish appropriate fees to offset only
13 the costs of trauma, STEMI, and stroke center surveys.

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

17 11. Any person aggrieved by an action of the department of health and senior services
18 affecting the trauma, STEMI, or stroke center designation pursuant to this chapter, including the
19 revocation, the suspension, or the granting of, refusal to grant, or failure to renew a designation, may
20 seek a determination thereon by the administrative hearing commission under chapter 621. It shall
21 not be a condition to such determination that the person aggrieved seek a reconsideration, a
22 rehearing, or exhaust any other procedure within the department."; and
23

24 Further amend said bill by amending the title, enacting clause, and intersectional references
25 accordingly.