

SECOND REGULAR SESSION

SENATE BILL NO. 1034

100TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR CIERPIOT.

Read 1st time February 24, 2020, and ordered printed.

ADRIANE D. CROUSE, Secretary.

5526S.011

AN ACT

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

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Section A. Section 190.241, RSMo, is repealed and one new section
2 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,
2 pediatric or adult and pediatric trauma center when a hospital, upon proper
3 application submitted by the hospital and site review, has been found by the
4 department to meet the applicable level of trauma center criteria for designation
5 in accordance with rules adopted by the department as prescribed by section
6 190.185. Such rules shall include designation as a trauma center without site
7 review if such hospital is verified by a national verifying or designating body at
8 the level which corresponds to a level approved in rule. **The department shall
9 not deny a qualified hospital designation of a level I, II, or III trauma
10 center based solely on the distance or mileage between trauma centers.**

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

21 criteria for stroke centers, or Primary and Comprehensive Stroke Center
22 Recommendations as published by the American Stroke Association. Such rules
23 shall include designation as a STEMI center without site review if such hospital
24 is certified by a national body.

25 3. The department of health and senior services shall, not less than once
26 every five years, conduct an on-site review of every trauma, STEMI, and stroke
27 center through appropriate department personnel or a qualified contractor, with
28 the exception of stroke centers designated pursuant to subsection 5 of this
29 section; however, this provision is not intended to limit the department's ability
30 to conduct a complaint investigation pursuant to subdivision (3) of subsection 2
31 of section 197.080 of any trauma, STEMI, or stroke center. On-site reviews shall
32 be coordinated for the different types of centers to the extent practicable with
33 hospital licensure inspections conducted under chapter 197. No person shall be
34 a qualified contractor for purposes of this subsection who has a substantial
35 conflict of interest in the operation of any trauma, STEMI, or stroke center under
36 review. The department may deny, place on probation, suspend or revoke such
37 designation in any case in which it has reasonable cause to believe that there has
38 been a substantial failure to comply with the provisions of this chapter or any
39 rules or regulations promulgated pursuant to this chapter. If the department of
40 health and senior services has reasonable cause to believe that a hospital is not
41 in compliance with such provisions or regulations, it may conduct additional
42 announced or unannounced site reviews of the hospital to verify compliance. If
43 a trauma, STEMI, or stroke center fails two consecutive on-site reviews because
44 of substantial noncompliance with standards prescribed by sections 190.001 to
45 190.245 or rules adopted by the department pursuant to sections 190.001 to
46 190.245, its center designation shall be revoked.

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

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

55 (2) A level II STEMI center if such hospital has been accredited as a
56 Mission: Lifeline STEMI receiving center by the American Heart Association

57 accreditation process or another department-approved nationally recognized
58 organization that provides STEMI receiving center accreditation.

59 5. Instead of applying for stroke center designation pursuant to the
60 provisions of subsection 2 of this section, a hospital may apply for stroke center
61 designation pursuant to this subsection. Upon receipt of an application from a
62 hospital on a form prescribed by the department, the department shall designate
63 such hospital:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

139 (5) STEMI and stroke center data elements shall conform to nationally
140 recognized performance measures, such as the American Heart Association's Get
141 With the Guidelines, and include published detailed measure specifications, data
142 coding instructions, and patient population inclusion and exclusion criteria to
143 ensure data reliability and validity.

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

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

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

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

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