Florida House of Representatives - 2000 By Representative Casey

A bill to be entitled 1 2 An act relating to trauma services; creating s. 3 395.4001, F.S.; providing definitions; amending 4 s. 395.401, F.S.; deleting definitions; 5 revising minimum components for local and regional trauma services system plans; amending 6 7 s. 395.4015, F.S.; revising minimum components 8 for state regional trauma system plans; providing for a statewide inclusive trauma 9 system; amending s. 395.4045, F.S.; revising 10 11 requirements relating to trauma transport 12 protocols; providing for uniform protocols; 13 revising requirements relating to the trauma 14 scoring system and rules related thereto; 15 revising requirements relating to trauma 16 transport protocols and rules related thereto; providing medical responsibility and 17 accountability for trauma victims during 18 interfacility trauma transfer; requiring the 19 20 Department of Health to adopt and enforce certain rules; amending s. 395.405, F.S.; 21 22 providing rulemaking and enforcement authority; amending ss. 395.4025, 395.50, 322.0602, and 23 24 440.13, F.S.; correcting cross references; 25 providing an effective date. 26 27 Be It Enacted by the Legislature of the State of Florida: 28 29 Section 1. Section 395.4001, Florida Statutes, is 30 created to read: 31 395.4001 Definitions.--As used in this part, the term: 1

1	(1) "Agency" means the Agency for Health Care
2	Administration.
3	(2) "Charity care" or "uncompensated charity care"
4	means that portion of hospital charges reported to the agency
5	for which there is no compensation for care provided to a
6	patient whose family income for the 12 months preceding the
7	determination is less than or equal to 150 percent of the
8	federal poverty level, unless the amount of hospital charges
9	due from the patient exceeds 25 percent of the annual family
10	income. However, in no case shall the hospital charges for a
11	patient whose family income exceeds four times the federal
12	poverty level for a family of four be considered charity.
13	(3) "Department" means the Department of Health.
14	(4) "Interfacility trauma transfer" means the transfer
15	of a trauma victim between two facilities licensed under this
16	chapter, pursuant to this part.
17	(5) "Level I trauma center" means a trauma center
18	that:
19	(a) Has formal research and education programs for the
20	enhancement of trauma care and is determined by the department
21	to be in substantial compliance with Level I trauma center and
22	pediatric trauma referral center standards.
23	(b) Serves as a resource facility to Level II trauma
24	centers, pediatric trauma referral centers, and general
25	hospitals through shared outreach, education, and quality
26	improvement activities.
27	(c) Participates in an inclusive system of trauma
28	care, including providing leadership, system evaluation, and
29	quality improvement activities.
30	(6) "Level II trauma center" means a trauma center
31	that:

1 (a) Is determined by the department to be in 2 substantial compliance with Level II trauma center standards. 3 (b) Serves as a resource facility to general hospitals 4 through shared outreach, education, and quality improvement 5 activities. б (c) Participates in an inclusive system of trauma 7 care. 8 (7) "Pediatric trauma referral center" means a 9 hospital that is determined by the department to be in 10 substantial compliance with pediatric trauma referral center 11 standards as established by rule of the department. 12 (8) "State-approved trauma center" means a hospital 13 that has successfully completed the selection process pursuant 14 to s. 395.4025 and has been approved by the department to 15 operate as a trauma center in the state. 16 (9) "State-sponsored trauma center" means a trauma center or pediatric trauma referral center that receives state 17 funding for trauma care services under s. 395.403. 18 (10) 19 "Trauma agency" means a department-approved 20 agency established and operated by one or more counties, or a department-approved entity with which one or more counties 21 22 contract, for the purpose of administering an inclusive 23 regional trauma system. 24 (11) "Trauma alert victim" means a person who has 25 incurred a single or multisystem injury due to blunt or 26 penetrating means or burns, who requires immediate medical 27 intervention or treatment, and who meets one or more of the 28 adult or pediatric scorecard criteria established by the 29 department by rule. 30 (12) "Trauma center" means any hospital that has been determined by the department to be in substantial compliance 31 3

1 with trauma center verification standards as either 2 state-approved or provisional state-approved. 3 "Trauma scorecard" means a statewide methodology (13) adopted by the department by rule under which a person who has 4 5 incurred a traumatic injury is graded as to the severity of б his or her injuries or illness and which methodology is used 7 as the basis for making destination decisions. 8 (14) "Trauma transport protocol" means a document 9 which describes the policies, processes, and procedures governing the dispatch of vehicles, the triage, prehospital 10 11 transport, and interfacility trauma transfer of trauma 12 victims. 13 (15) "Trauma victim" means any person who has incurred a single or multisystem injury due to blunt or penetrating 14 15 means or burns and who requires immediate medical intervention 16 or treatment. Section 2. Subsection (1) and paragraph (b) of 17 subsection (2) of section 395.401, Florida Statutes, are 18 19 amended to read: 20 395.401 Trauma services system plans; verification of 21 trauma centers and pediatric trauma referral centers; 22 procedures; renewal.--23 (1) As used in this part, the term: 24 (a) "Agency" means the Agency for Health Care 25 Administration. 26 (b) "Charity care" or "uncompensated charity care" 27 means that portion of hospital charges reported to the agency 28 for which there is no compensation for care provided to a 29 patient whose family income for the 12 months preceding the determination is less than or equal to 150 percent of the 30 31 federal poverty level, unless the amount of hospital charges 4

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due from the patient exceeds 25 percent of the annual family 1 income. However, in no case shall the hospital charges for a 2 3 patient whose family income exceeds four times the federal poverty level for a family of four be considered charity. 4 5 (c) "Department" means the Department of Health. 6 (d) "Level I trauma center" means a hospital that is 7 determined by the department to be in substantial compliance 8 with trauma center and pediatric trauma referral center verification standards as established by rule of the 9 department, and which: 10 11 1. Has formal research and education programs for the 12 enhancement of trauma care. 13 2. Serves as a resource facility to Level II trauma 14 centers, pediatric trauma referral centers, and community 15 hospitals. 16 3. Ensures an organized system of trauma care. (e) "Level II trauma center" means a hospital that is 17 determined by the department to be in substantial compliance 18 19 with trauma center verification standards as established by 20 rule of the department, and which: 21 1. Serves as a resource facility to community 22 hospitals. 23 2. Ensures an organized system of trauma care. 24 (f) "Pediatric trauma referral center" means a 25 hospital that is determined to be in substantial compliance 26 with pediatric trauma referral center standards as established by rule of the department. 27 28 (g) "State-approved trauma center" means a hospital 29 that has successfully completed the state-approved selection process pursuant to s. 395.4025 and has been approved by the 30 department to operate as a trauma center in the state. 31 5

1 (h) "State-sponsored trauma center" means a 2 state-approved trauma center that receives state funding for 3 trauma care services. 4 (i) "Trauma agency" means an agency established and 5 operated by one or more counties, or an entity with which one or more counties contract, for the purpose of administering an 6 7 inclusive regional trauma system. 8 (j) "Trauma alert victim" means a person who has incurred a single or multisystem injury due to blunt or 9 penetrating means or burns; who requires immediate medical 10 11 intervention or treatment; and who meets one or more of the 12 adult or pediatric scorecard criteria established by the 13 department by rule. 14 (k) "Trauma center" means any hospital that has been 15 determined by the department to be in substantial compliance with trauma center verification standards. 16 (1) "Trauma scorecard" means a statewide methodology 17 adopted by the department by rule under which a person who has 18 19 incurred a traumatic injury is graded as to the severity of 20 his or her injuries or illness and which methodology is used as the basis for making destination decisions. 21 22 (m) "Trauma victim" means any person who has incurred a single or multisystem injury due to blunt or penetrating 23 means or burns and who requires immediate medical intervention 24 25 or treatment. 26 (1)(2) 27 (b) The local and regional trauma agencies shall 28 develop and submit to the department plans for local and 29 regional trauma services systems. The plans must include, at a minimum, the following components: 30 31 1. The organizational structure of the trauma system.

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1 Prehospital care management guidelines for triage 2. 2 and transportation of trauma cases. 3 3. Flow patterns of trauma cases and transportation 4 system design and resources, including air transportation 5 services, and provision for interfacility trauma transfer, and 6 the prehospital transportation of trauma victims. The trauma 7 agency shall plan for the development of a system of 8 transportation of trauma alert victims to trauma centers where 9 the distance or time to a trauma center or transportation resources diminish access by trauma alert victims. 10 11 4. The number and location of needed state-approved 12 trauma centers based on local needs, population, and location 13 and distribution of resources. 14 5. Data collection regarding system operation and 15 patient outcome. 6. Periodic performance evaluation of the trauma 16 17 system and its components. 7. The use of air transport services within the 18 19 jurisdiction of the local trauma agency. 20 8. Public information and education about the trauma 21 system. 22 9. Emergency medical services communication system usage and dispatching. 23 24 10. The coordination and integration between the 25 verified trauma care facility and the nonverified health care 26 facilities. 27 11. Medical control and accountability. 28 12. Quality control and system evaluation. Section 3. Paragraphs (d), (l), and (n) of subsection 29 (2) of section 395.4015, Florida Statutes, are amended, and 30 31 subsection (4) is added to said section, to read: 7

1 395.4015 State regional trauma planning; trauma 2 regions.--3 (2) The department shall develop trauma systems plans 4 for the department-defined trauma regions which include at a 5 minimum the following components: б (d) Flow patterns of trauma cases and transportation 7 system design and resources, including air transportation 8 services, and provision for interfacility trauma transfer, and 9 the prehospital transportation of trauma victims. The 10 department shall plan for the development of a system of 11 transportation of trauma alert victims to trauma centers where 12 the distance or time to a trauma center or transportation 13 resources diminish access by trauma alert victims. 14 (1) The coordination and integration between the 15 state-sponsored trauma centers, verified trauma centers, and 16 other health care facilities which may provide services to trauma victims. 17 (n) Quality management control and system evaluation. 18 (4) The department shall use the state trauma system 19 20 plan as the basis for establishing a statewide inclusive 21 trauma system. 22 Section 4. Paragraph (b) of subsection (2) of section 23 395.4025, Florida Statutes, is amended to read: 24 395.4025 Selection of state-approved trauma centers.--25 (2) 26 (b) By October 15, the department shall send to all 27 hospitals that submitted a letter of intent an application 28 package that will provide the hospitals with instructions for 29 submitting information to the department for selection as a state-approved trauma center. The standards for verification 30 31 of trauma centers and pediatric trauma referral centers

provided for in s. 395.401(2)(3), as adopted by rule of the 1 2 department, shall serve as the basis for these instructions. Section 5. Section 395.4045, Florida Statutes, is 3 4 amended to read: 5 395.4045 Emergency medical service providers; trauma б transport protocols; transport of trauma alert victims to 7 trauma centers; interfacility transfer .--8 (1) Each emergency medical services provider licensed under chapter 401 shall transport trauma alert victims to 9 10 hospitals approved as trauma centers, except as may be provided for either in the department-approved local or 11 12 regional trauma transport protocol of the trauma agency for 13 the geographical area in which the emergency medical services 14 licensee provides services or, if no such department-approved 15 local or regional trauma transport protocol is in effect, as 16 provided for in a department-approved provider's trauma 17 transport protocol. (2) A trauma agency may develop a uniform trauma 18 19 transport protocol that is applicable to the emergency medical 20 services licensees providing services within the geographical boundaries of the trauma agency. Development of a uniform 21 22 trauma protocol by a trauma agency regional trauma protocols 23 shall be through consultation with interested parties, 24 including, but not limited to, each approved trauma center; 25 physicians specializing in trauma care, emergency care, and 26 surgery in the region; each trauma system administrator in the 27 region; and each emergency medical service provider in the 28 region licensed under chapter 401, and such providers' 29 respective medical directors. (3) Trauma alert victims shall be identified through 30 31 the use of a trauma scoring system, including adult and

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pediatric assessment as specified in rule of the department. The rule shall also include the requirements of licensed emergency medical services providers for performing and documenting these assessments. (4) The department shall specify by rule the subjects and the minimum criteria related to prehospital trauma transport, trauma center or hospital destination determinations, and interfacility trauma transfer to be included in a trauma agency's or an emergency medical service provider's trauma transport protocol and shall approve or disapprove each such protocol. Trauma transport protocol rules pertaining to the air transportation of trauma victims shall be consistent with, but not limited to, applicable Federal Aviation Administration regulation. Emergency medical services licensees and trauma agencies shall be subject to monitoring by the department, under ss. 395.401(3) and 402.31(1) for compliance with requirements, as applicable, regarding trauma transport protocols and the transport of trauma victims. If there is no department-approved trauma agency (5) trauma transport protocol for the geographical area in which the emergency medical services license applicant intends to provide services, as provided for in subsection (1), each applicant for licensure as an emergency medical services provider, under chapter 401, must submit and obtain department approval of a trauma transport protocol prior to the department granting a license. The department shall prescribe by rule the submission and approval process for an applicant's

28 trauma transport protocols whether the applicant will be using 29 a trauma agency's or its own trauma transport protocol.

30 (6)(2) If an air ambulance service is available in the 31 trauma service area in which an emergency medical service

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provider is located, trauma transport protocols shall not 1 2 provide for transport outside of the trauma service area 3 unless otherwise provided for by written mutual agreement. Ιf air ambulance service is not available and there is no 4 5 agreement for interagency transport of trauma patients between two adjacent local or regional trauma agencies, both of which 6 7 include at least one approved trauma center, then the 8 transport of a trauma patient with an immediately 9 life-threatening condition shall be to the most appropriate trauma center as defined pursuant to trauma transport 10 11 protocols approved by the department. The provisions of this 12 subsection shall apply only to those counties with a 13 population in excess of 1 million residents. 14 (7) The medical director of an emergency medical 15 services provider licensed under chapter 401 shall have 16 medical responsibility and accountability for the trauma 17 victim during an interfacility trauma transfer. (8) The department shall adopt and enforce all rules 18 19 necessary to administer this section. The department shall 20 adopt and enforce rules to specify the submission and approval process for trauma transport protocols or modifications to 21 22 trauma transport protocols by trauma agencies and licensed emergency medical services providers. 23 24 Section 6. Section 395.405, Florida Statutes, is 25 amended to read: 26 395.405 Rulemaking authority.--The department shall 27 adopt and enforce all rules necessary to administer to 28 implement ss. 395.0199, 395.4001,395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, and 395.4045. 29 Section 7. Subsection (8) of section 395.50, Florida 30 31 Statutes, is amended to read:

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1 395.50 Quality assurance activities of trauma 2 agencies.--3 (8) Nothing in this section, ss. 395.4001-395.405 4 395.401-395.405, or s. 395.51 prohibits admitting into 5 evidence patient care, transport, or treatment records or б reports, or records or reports of the department in any civil 7 or administrative action brought by or involving the 8 department, excluding the name, residence or business address, 9 telephone number, social security or other identifying number, 10 or photograph of any person or the spouse, relative, or 11 guardian of such person or other patient-specific information 12 that otherwise identifies the patient, either directly or 13 indirectly. 14 Section 8. Paragraph (a) of subsection (4) of section 15 322.0602, Florida Statutes, is amended to read: 16 322.0602 Youthful Drunk Driver Visitation Program.--(4) VISITATION REQUIREMENT.--17 (a) To the extent that personnel and facilities are 18 19 made available to the court, the court may include a 20 requirement for supervised visitation by the probationer to 21 all, or any, of the following: 22 1. A trauma center, as defined in s. 395.4001 395.401, or a hospital as defined in s. 395.002, which regularly 23 receives victims of vehicle accidents, between the hours of 10 24 p.m. and 2 a.m. on a Friday or Saturday night, in order to 25 26 observe appropriate victims of vehicle accidents involving 27 drinking drivers, under the supervision of any of the 28 following: 29 a. A registered nurse trained in providing emergency trauma care or prehospital advanced life support. 30 31 b. An emergency room physician. 12

1 An emergency medical technician. c. 2 A licensed service provider, as defined in s. 2. 3 397.311, which cares for substance abuse impaired persons, to observe persons in the terminal stages of substance abuse 4 5 impairment, under the supervision of appropriately licensed medical personnel. Prior to any visitation of such terminally 6 7 ill or disabled persons, the persons or their legal 8 representatives must give their express consent to participate 9 in the visitation program. 10 If approved by the county coroner, the county 3. 11 coroner's office or the county morgue to observe appropriate victims of vehicle accidents involving drinking drivers, under 12 13 the supervision of the coroner or a deputy coroner. 14 Section 9. Paragraph (c) of subsection (12) of section 440.13, Florida Statutes, is amended to read: 15 16 440.13 Medical services and supplies; penalty for 17 violations; limitations.--(12) CREATION OF THREE-MEMBER PANEL; GUIDES OF MAXIMUM 18 19 REIMBURSEMENT ALLOWANCES. --20 (c) Reimbursement for all fees and other charges for 21 such treatment, care, and attendance, including treatment, 22 care, and attendance provided by any hospital or other health care provider, ambulatory surgical center, work-hardening 23 program, or pain program, must not exceed the amounts provided 24 by the uniform schedule of maximum reimbursement allowances as 25 26 determined by the panel or as otherwise provided in this 27 section. This subsection also applies to independent medical 28 examinations performed by health care providers under this 29 chapter. Until the three-member panel approves a uniform schedule of maximum reimbursement allowances and it becomes 30 31 effective, all compensable charges for treatment, care, and 13

attendance provided by physicians, ambulatory surgical 1 2 centers, work-hardening programs, or pain programs shall be 3 reimbursed at the lowest maximum reimbursement allowance across all 1992 schedules of maximum reimbursement allowances 4 5 for the services provided regardless of the place of service. In determining the uniform schedule, the panel shall first 6 7 approve the data which it finds representative of prevailing 8 charges in the state for similar treatment, care, and 9 attendance of injured persons. Each health care provider, health care facility, ambulatory surgical center, 10 11 work-hardening program, or pain program receiving workers' compensation payments shall maintain records verifying their 12 13 usual charges. In establishing the uniform schedule of maximum 14 reimbursement allowances, the panel must consider: 15 The levels of reimbursement for similar treatment, 1. 16 care, and attendance made by other health care programs or 17 third-party providers; The impact upon cost to employers for providing a 18 2. level of reimbursement for treatment, care, and attendance 19 20 which will ensure the availability of treatment, care, and 21 attendance required by injured workers; 22 3. The financial impact of the reimbursement allowances upon health care providers and health care 23 facilities, including trauma centers as defined in s. 395.4001 24 395.401, and its effect upon their ability to make available 25 26 to injured workers such medically necessary remedial 27 treatment, care, and attendance. The uniform schedule of 28 maximum reimbursement allowances must be reasonable, must 29 promote health care cost containment and efficiency with respect to the workers' compensation health care delivery 30 31 system, and must be sufficient to ensure availability of such

medically necessary remedial treatment, care, and attendance to injured workers; and 4. The most recent average maximum allowable rate of increase for hospitals determined by the Health Care Board under chapter 408. Section 10. This act shall take effect October 1, 2000. HOUSE SUMMARY Revises definitions relating to the provision of trauma services. Revises minimum components for the local and regional trauma services system plans and the state regional trauma system plans, and provides for a statewide inclusive trauma system. Revises requirements relating to trauma transport protocols, and provides for uniform protocols. Revises requirements relating to the trauma scoring system and trauma transport protocols, and rules related thereto. Provides medical responsibility and accountability of the medical director of a licensed emergency services provider for trauma victims during interfacility trauma transfer. Requires the Department of Health to adopt and enforce certain rules. See bill for details.

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