

HB 1153 -- REGULATION OF HOSPITALS

SPONSOR: Crawford

This bill prohibits the Department of Health and Senior Services from promulgating rules or regulations that require a hospital, as a condition of trauma, STEMI, or stroke center designation, to:

(1) Have a different staffing plan for an individual facility than a staffing plan involving multiple facilities that has been approved by a regional emergency medical services advisory committee, a regional emergency medical director, and the facilities involved in such plan; or

(2) 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 regulation concerning trauma, STEMI, or stroke centers if such hospital can demonstrate that the interpretation of such regulation was different from a similarly-situated hospital. The department shall hold advisory committee meetings with trauma, STEMI, and stroke centers for the benefit of improved communications, best-practice identification, and facilitation of improvements to the designation process. Notice of such meetings shall be communicated in writing to all such facilities.

Community-based or regional plans will no longer be submitted to the department for approval, but instead shall be approved by a regional emergency medical services advisory committee and a regional emergency medical director.

This bill also requires the department to promulgate rules for the designation of a trauma center and a STEMI center without site review if such hospital is certified by a national body.

The bill also removes a 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.

This bill is similar to SB 495 (2017).