

Amend **CSSB 330** by striking all below the enacting clause and substituting the following:

SECTION 1. Section 773.001, Health and Safety Code, is amended to read as follows:

Sec. 773.001. SHORT TITLE. This chapter may be cited as the Emergency Health Care [~~Medical Services~~] Act.

SECTION 2. Section 773.003, Health and Safety Code, is amended by amending Subdivision (7) and adding Subdivision (15-a) to read as follows:

(7) "Department" means the [~~Texas~~] Department of State Health Services.

(15-a) "Executive commissioner" means the executive commissioner of the Health and Human Services Commission.

SECTION 3. Chapter 773, Health and Safety Code, is amended by adding Subchapter H to read as follows:

SUBCHAPTER H. EMERGENCY STROKE SERVICES

Sec. 773.201. LEGISLATIVE INTENT. The legislature finds that a strong system for stroke survival is needed in the state's communities in order to treat stroke victims in a timely manner and to improve the overall treatment of stroke victims. Therefore, the legislature intends to construct an emergency treatment system in this state so that stroke victims may be quickly identified and transported to and treated in appropriate stroke treatment facilities.

Sec. 773.202. DEFINITIONS. In this subchapter:

(1) "Advisory council" means the advisory council established under Section 773.012.

(2) "Stroke committee" means the committee appointed under Section 773.203.

(3) "Stroke facility" means a health care facility designated under this subchapter that is capable of primary or comprehensive treatment of stroke victims and that is part of an emergency medical services and trauma system.

Sec. 773.203. STROKE COMMITTEE. (a) The advisory council shall appoint a stroke committee to assist the advisory council in the development of a statewide stroke plan.

(b) The stroke committee must include the following members:

(1) a licensed physician appointed from a list of physicians eligible for accreditation from the Accreditation Council for Graduate Medical Education, recommended by a statewide

organization of neurologists;

(2) a licensed interventional neuroradiologist
appointed from a list of neuroradiologists recommended by a
statewide organization of radiologists;

(3) a neurosurgeon with stroke expertise;

(4) a member of the Texas Council on Cardiovascular
Disease and Stroke who has expertise in stroke care;

(5) a licensed physician appointed from a list of
physicians recommended by a statewide organization of emergency
physicians;

(6) a neuroscience registered nurse with stroke
expertise; and

(7) a volunteer member of a nonprofit organization
specializing in stroke treatment, prevention, and education.

(c) Chapter 2110, Government Code, does not apply to the
stroke committee.

Sec. 773.204. DUTIES OF STROKE COMMITTEE; DEVELOPMENT OF STROKE PLAN. (a) The advisory council, with the assistance of the stroke committee and in collaboration with the Texas Council on Cardiovascular Disease and Stroke, shall develop a statewide stroke plan and assist the department in developing stroke facility designation criteria.

(b) The stroke plan must include:

(1) training requirements on stroke recognition and treatment, including emergency screening procedures;

(2) a list of appropriate early treatments to stabilize patients;

(3) protocols for rapid transport to a designated facility when rapid transport is appropriate; and

(4) plans for coordination with statewide agencies or committees on programs for stroke prevention and community education regarding stroke.

Sec. 773.205. STROKE FACILITY DESIGNATION. (a) The department shall designate stroke facilities that are a part of an emergency medical services and trauma care system in accordance with rules adopted by the executive commissioner.

(b) A health care facility may apply to the department for designation as a stroke facility, and the department shall grant the designation if the facility meets the requirements for designation.

(c) The executive commissioner shall adopt rules regarding the criteria necessary for a health care facility to be designated a stroke facility. In adopting the rules, the executive commissioner shall consult the criteria for stroke facilities established by national medical organizations such as the Joint Commission on Accreditation of Healthcare Organizations.

(d) The department may not set an arbitrary limit on the number of health care facilities designated as stroke facilities.

(e) The rules for designation must require a health care facility to:

(1) have a health care professional available 24 hours a day, seven days a week who is knowledgeable about stroke care and capable of carrying out acute stroke therapy; and

(2) record patient treatment and outcomes.

Sec. 773.206. USE OF DESIGNATION. After September 1, 2007, a health care facility may not use the term "stroke facility," "stroke hospital," or "stroke center" or similar terminology in its signs or advertisements or in printed materials and information the health care facility provides to the public unless the health care facility has been designated a stroke facility in accordance with this subchapter.

Sec. 773.207. FEES. (a) The department shall charge a fee in accordance with this section to a health care facility that applies for initial or renewal designation as a stroke facility.

(b) To the extent feasible, the department shall establish a schedule of fees as necessary for the department to recover the cost directly related to designation of stroke facilities under this subchapter.

(c) The department shall determine the amount of the fee for initial or renewal designation for a health care facility according to the number of beds in the facility.

Sec. 773.208. DENIAL, SUSPENSION, OR REVOCATION OF DESIGNATION. (a) The department may deny, suspend, or revoke a health care facility's designation as a stroke facility if the facility fails to comply with the rules adopted under this subchapter.

(b) The denial, suspension, or revocation of a designation by the department and the appeal from that action are governed by the department's rules for a contested case hearing and by Chapter 2001, Government Code.

Sec. 773.209. GRANT PROGRAMS. (a) The department shall establish programs to award grants to initiate, expand, maintain, and improve stroke care in accordance with Subsections (b) and (c).

(b) The department by rule shall establish eligibility criteria for awarding grants to rural health care facilities located in counties with a population of less than 250,000. The rules must require the grant recipient to use grant funds only to:

(1) hire medical personnel trained in acute stroke care;

(2) purchase medical equipment related to the

diagnosis, treatment, or prevention of stroke; and

(3) facilitate training in stroke care.

(c) The department by rule shall establish eligibility criteria for awarding grants to assist designated stroke facilities to maintain the designation. The rules must require the grant recipient to use grant funds only to:

(1) purchase supplies, equipment, or vehicles for stroke diagnosis, treatment, or prevention;

(2) pay designated stroke facility operating expenses;

(3) cover stroke education and training expenses;

(4) purchase communication systems used in emergency medical services;

(5) promote public awareness of stroke warning signs, emergency treatment, and prevention; or

(6) cover the costs of uncompensated care related to stroke.

(d) The department by rule must require each recipient of a grant under Subsection (c) to:

(1) engage in stroke awareness campaigns;

(2) create stroke education materials aimed at low-income or minority populations at risk of stroke; and

(3) provide mentoring for health care facilities seeking stroke facility designation.

(e) Money in the fund for emergency medical services, trauma facilities, and trauma care systems established under Section 773.006 and money in the designated trauma facility and emergency medical services account established under Chapter 780 may not be used to fund the grant programs under this subchapter.

(f) The department may use funds appropriated for the grant programs to pay for administrative expenses incurred in implementing the grant programs as provided by the General Appropriations Act.

SECTION 4. Section 411.110(a), Government Code, is amended to read as follows:

(a) The [~~Texas~~] Department of State Health Services is entitled to obtain from the department criminal history record

information maintained by the department that relates to a person who is:

(1) an applicant for a license or certificate under the Emergency Health Care [~~Medical Services~~] Act (Chapter 773, Health and Safety Code);

(2) an owner or manager of an applicant for an emergency medical services provider license under that Act; or

(3) the holder of a license or certificate under that Act.

SECTION 5. (a) Not later than January 1, 2006, the advisory council established under Section 773.012, Health and Safety Code, shall establish a stroke committee as required by Section 773.203, Health and Safety Code, as added by this Act.

(b) Not later than January 1, 2007, the advisory council established under Section 773.012, Health and Safety Code, shall develop a statewide stroke plan and assist the Department of State Health Services in developing criteria for stroke facility designation as required by Section 773.204, Health and Safety Code, as added by this Act.

(c) Not later than January 1, 2007, the executive commissioner of the Health and Human Services Commission shall adopt rules governing the designation of stroke facilities as required by Section 773.205, Health and Safety Code, as added by this Act.

(d) A health care facility may apply for designation as a stroke facility on or after January 2, 2007.

SECTION 6. This Act takes effect September 1, 2005.