

1-1 By: Deuell, Van de Putte S.B. No. 330
1-2 (In the Senate - Filed February 2, 2005; February 7, 2005,
1-3 read first time and referred to Committee on Health and Human
1-4 Services; April 18, 2005, reported adversely, with favorable
1-5 Committee Substitute by the following vote: Yeas 8, Nays 0;
1-6 April 18, 2005, sent to printer.)

1-7 COMMITTEE SUBSTITUTE FOR S.B. No. 330 By: Deuell

1-8 A BILL TO BE ENTITLED
1-9 AN ACT

1-10 relating to stroke treatment and the designation of certain
1-11 facilities as stroke facilities; providing an administrative
1-12 penalty.

1-13 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-14 SECTION 1. Section 773.001, Health and Safety Code, is
1-15 amended to read as follows:

1-16 Sec. 773.001. SHORT TITLE. This chapter may be cited as the
1-17 Emergency Health Care [~~Medical Services~~] Act.

1-18 SECTION 2. Section 773.003, Health and Safety Code, is
1-19 amended by amending Subdivision (7) and adding Subdivision (15-a)
1-20 to read as follows:

1-21 (7) "Department" means the [~~Texas~~] Department of State
1-22 Health Services.

1-23 (15-a) "Executive commissioner" means the executive
1-24 commissioner of the Health and Human Services Commission.

1-25 SECTION 3. Chapter 773, Health and Safety Code, is amended
1-26 by adding Subchapter H to read as follows:

1-27 SUBCHAPTER H. EMERGENCY STROKE SERVICES

1-28 Sec. 773.201. LEGISLATIVE INTENT. The legislature finds
1-29 that a strong system for stroke survival is needed in the state's
1-30 communities in order to treat stroke victims in a timely manner and
1-31 to improve the overall treatment of stroke victims. Therefore, the
1-32 legislature intends to construct an emergency treatment system in
1-33 this state so that stroke victims may be quickly identified and
1-34 transported to and treated in appropriate stroke treatment
1-35 facilities.

1-36 Sec. 773.202. DEFINITIONS. In this subchapter:

1-37 (1) "Advisory council" means the advisory council
1-38 established under Section 773.012.

1-39 (2) "Stroke committee" means the committee appointed
1-40 under Section 773.203.

1-41 (3) "Stroke facility" means a health care facility
1-42 designated under this subchapter that is capable of primary or
1-43 comprehensive treatment of stroke victims and that is part of an
1-44 emergency medical services and trauma system.

1-45 Sec. 773.203. STROKE COMMITTEE. (a) The advisory council
1-46 shall appoint a stroke committee to assist the advisory council in
1-47 the development of a statewide stroke plan.

1-48 (b) The stroke committee must include the following
1-49 members:

1-50 (1) a licensed physician appointed from a list of
1-51 physicians eligible for accreditation from the Accreditation
1-52 Council for Graduate Medical Education, recommended by a statewide
1-53 organization of neurologists;

1-54 (2) a licensed interventional neuroradiologist
1-55 appointed from a list of neuroradiologists recommended by a
1-56 statewide organization of radiologists;

1-57 (3) a neurosurgeon with stroke expertise;

1-58 (4) a member of the Texas Council on Cardiovascular
1-59 Disease and Stroke who has expertise in stroke care;

1-60 (5) a licensed physician appointed from a list of
1-61 physicians recommended by a statewide organization of emergency
1-62 physicians;

1-63 (6) a neuroscience registered nurse with stroke

2-1 expertise; and

2-2 (7) a volunteer member of a nonprofit organization
 2-3 specializing in stroke treatment, prevention, and education.

2-4 (c) Chapter 2110, Government Code, does not apply to the
 2-5 stroke committee.

2-6 Sec. 773.204. DUTIES OF STROKE COMMITTEE; DEVELOPMENT OF
 2-7 STROKE PLAN. (a) The advisory council, with the assistance of the
 2-8 stroke committee and in collaboration with the Texas Council on
 2-9 Cardiovascular Disease and Stroke, shall develop a statewide stroke
 2-10 plan and assist the department in developing stroke facility
 2-11 designation criteria.

2-12 (b) The stroke plan must include:

2-13 (1) training requirements on stroke recognition and
 2-14 treatment, including emergency screening procedures;

2-15 (2) a list of appropriate early treatments to
 2-16 stabilize patients;

2-17 (3) protocols for rapid transport to a designated
 2-18 facility when rapid transport is appropriate; and

2-19 (4) plans for coordination with statewide agencies or
 2-20 committees on programs for stroke prevention and community
 2-21 education regarding stroke.

2-22 (c) The stroke committee shall advise the executive
 2-23 commissioner regarding administrative penalties for violations of
 2-24 this subchapter.

2-25 Sec. 773.205. STROKE FACILITY DESIGNATION. (a) The
 2-26 department shall designate stroke facilities that are a part of an
 2-27 emergency medical services and trauma care system in accordance
 2-28 with rules adopted by the executive commissioner.

2-29 (b) A health care facility may apply to the department for
 2-30 designation as a stroke facility, and the department shall grant
 2-31 the designation if the facility meets the requirements for
 2-32 designation.

2-33 (c) The executive commissioner shall adopt rules regarding
 2-34 the criteria necessary for a health care facility to be designated a
 2-35 stroke facility. In adopting the rules, the executive commissioner
 2-36 shall consult the criteria for stroke facilities established by
 2-37 national medical organizations such as the Joint Commission on
 2-38 Accreditation of Healthcare Organizations.

2-39 (d) The department may not set an arbitrary limit on the
 2-40 number of health care facilities designated as stroke facilities.

2-41 (e) The rules for designation must require a health care
 2-42 facility to:

2-43 (1) have a health care professional available 24 hours
 2-44 a day, seven days a week who is knowledgeable about stroke care and
 2-45 capable of carrying out acute stroke therapy; and

2-46 (2) record patient treatment and outcomes.

2-47 Sec. 773.206. USE OF DESIGNATION. After September 1, 2007,
 2-48 a health care facility may not use the term "stroke facility,"
 2-49 "stroke hospital," or "stroke center" or similar terminology in its
 2-50 signs or advertisements or in printed materials and information the
 2-51 health care facility provides to the public unless the health care
 2-52 facility has been designated a stroke facility in accordance with
 2-53 this subchapter.

2-54 Sec. 773.207. FEES. (a) The department shall charge a fee
 2-55 in accordance with this section to a health care facility that
 2-56 applies for initial or renewal designation as a stroke facility.

2-57 (b) To the extent feasible, the department shall establish a
 2-58 schedule of fees as necessary for the department to recover the cost
 2-59 directly related to designation of stroke facilities under this
 2-60 subchapter.

2-61 (c) The department shall determine the amount of the fee for
 2-62 initial or renewal designation for a health care facility according
 2-63 to the number of beds in the facility.

2-64 Sec. 773.208. DENIAL, SUSPENSION, OR REVOCATION OF
 2-65 DESIGNATION. (a) The department may deny, suspend, or revoke a
 2-66 health care facility's designation as a stroke facility if the
 2-67 facility fails to comply with the rules adopted under this
 2-68 subchapter.

2-69 (b) The denial, suspension, or revocation of a designation

3-1 by the department and the appeal from that action are governed by
 3-2 the department's rules for a contested case hearing and by Chapter
 3-3 2001, Government Code.

3-4 Sec. 773.209. GRANT PROGRAMS. (a) The department shall
 3-5 establish programs to award grants to initiate, expand, maintain,
 3-6 and improve stroke care in accordance with Subsections (b) and (c).

3-7 (b) The department by rule shall establish eligibility
 3-8 criteria for awarding grants to rural health care facilities
 3-9 located in counties with a population of less than 250,000. The
 3-10 rules must require the grant recipient to use grant funds only to:

3-11 (1) hire medical personnel trained in acute stroke
 3-12 care;

3-13 (2) purchase medical equipment related to the
 3-14 diagnosis, treatment, or prevention of stroke; and

3-15 (3) facilitate training in stroke care.

3-16 (c) The department by rule shall establish eligibility
 3-17 criteria for awarding grants to assist designated stroke facilities
 3-18 to maintain the designation. The rules must require the grant
 3-19 recipient to use grant funds only to:

3-20 (1) purchase supplies, equipment, or vehicles for
 3-21 stroke diagnosis, treatment, or prevention;

3-22 (2) pay designated stroke facility operating
 3-23 expenses;

3-24 (3) cover stroke education and training expenses;

3-25 (4) purchase communication systems used in emergency
 3-26 medical services;

3-27 (5) promote public awareness of stroke warning signs,
 3-28 emergency treatment, and prevention; or

3-29 (6) cover the costs of uncompensated care related to
 3-30 stroke.

3-31 (d) The department by rule must require each recipient of a
 3-32 grant under Subsection (c) to:

3-33 (1) engage in stroke awareness campaigns;

3-34 (2) create stroke education materials aimed at
 3-35 low-income or minority populations at risk of stroke; and

3-36 (3) provide mentoring for health care facilities
 3-37 seeking stroke facility designation.

3-38 (e) Money in the fund for emergency medical services, trauma
 3-39 facilities, and trauma care systems established under Section
 3-40 773.006 may not be used to fund the grant programs under this
 3-41 subchapter.

3-42 (f) The department may use funds appropriated for the grant
 3-43 programs to pay for administrative expenses incurred in
 3-44 implementing the grant programs as provided by the General
 3-45 Appropriations Act.

3-46 Sec. 773.210. ADMINISTRATIVE PENALTY. The executive
 3-47 commissioner shall adopt rules imposing an administrative penalty
 3-48 for a violation of this subchapter. The rules must specify a
 3-49 maximum penalty in an amount necessary and appropriate to deter a
 3-50 violation of this chapter and provide procedures consistent with
 3-51 Subchapter C, Chapter 2001, Government Code.

3-52 SECTION 4. Subsection (a), Section 411.110, Government
 3-53 Code, is amended to read as follows:

3-54 (a) The [Texas] Department of State Health Services is
 3-55 entitled to obtain from the department criminal history record
 3-56 information maintained by the department that relates to a person
 3-57 who is:

3-58 (1) an applicant for a license or certificate under
 3-59 the Emergency Health Care [Medical Services] Act (Chapter 773,
 3-60 Health and Safety Code);

3-61 (2) an owner or manager of an applicant for an
 3-62 emergency medical services provider license under that Act; or

3-63 (3) the holder of a license or certificate under that
 3-64 Act.

3-65 SECTION 5. (a) Not later than January 1, 2006, the
 3-66 advisory council established under Section 773.012, Health and
 3-67 Safety Code, shall establish a stroke committee as required by
 3-68 Section 773.203, Health and Safety Code, as added by this Act.

3-69 (b) Not later than January 1, 2007, the advisory council

4-1 established under Section 773.012, Health and Safety Code, shall
4-2 develop a statewide stroke plan and assist the Department of State
4-3 Health Services in developing criteria for stroke facility
4-4 designation as required by Section 773.204, Health and Safety Code,
4-5 as added by this Act.

4-6 (c) Not later than January 1, 2007, the executive
4-7 commissioner of the Health and Human Services Commission shall
4-8 adopt rules governing the designation of stroke facilities as
4-9 required by Section 773.205, Health and Safety Code, as added by
4-10 this Act.

4-11 (d) A health care facility may apply for designation as a
4-12 stroke facility on or after January 2, 2007.

4-13 SECTION 6. This Act takes effect September 1, 2005.

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