

AN ACT

relating to the transfer of the regional emergency medical dispatch resource centers program to the Commission on State Emergency Communications and a pilot project to provide emergency telemedicine medical services in rural areas.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Sections 771.102(a) and (c), Health and Safety Code, are amended to read as follows:

(a) The commission [~~center~~], with the assistance of the advisory council appointed under Section 773.012, shall administer the program in which [~~establish a program to use~~] emergency medical dispatchers located in regional emergency medical dispatch resource centers are used to provide life-saving and other emergency medical instructions to persons who need guidance while awaiting the arrival of emergency medical personnel. The purpose of a regional emergency medical dispatch resource center is not to dispatch personnel or equipment resources but to serve as a resource to provide pre-arrival instructions that may be accessed by selected public safety answering points that are not adequately staffed or funded to provide those services.

(c) The commission [~~center~~], with the assistance of the advisory council, shall:

(1) design criteria and protocols and provide oversight as needed to conduct the program;

1           (2) collect the necessary data to evaluate the  
2 program; and

3           (3) report its findings to the legislature.

4           SECTION 2. Sections 771.103, 771.104, and 771.105, Health  
5 and Safety Code, are amended to read as follows:

6           Sec. 771.103. PARTICIPATION IN PROGRAM.       (a)       The  
7 commission [~~center~~] shall determine which public safety answering  
8 points are interested in participating in the program.

9           (b) Participating public safety answering points must agree  
10 to participate in any required training and to provide regular  
11 reports required by the commission [~~center~~] for the program.

12          Sec. 771.104. SELECTION OF PROGRAM PARTICIPANTS AND  
13 REGIONAL EMERGENCY MEDICAL DISPATCH RESOURCE CENTERS. (a) The  
14 commission [~~center~~], with the assistance of the advisory council,  
15 may select public safety answering points to participate in the  
16 program or to serve as regional emergency medical dispatch resource  
17 centers. A public safety answering point may participate in the  
18 program and serve as a regional emergency medical dispatch resource  
19 center. A public safety answering point selected for the program or  
20 to serve as a resource center must:

21           (1) have a fully functional quality assurance program  
22 that measures each emergency medical dispatcher's compliance with  
23 the medical protocol;

24           (2) have dispatch personnel who meet the requirements  
25 for emergency medical dispatcher certification or the equivalent as  
26 determined by the Department of State Health Services;

27           (3) use emergency medical dispatch protocols approved

1 by a physician medical director knowledgeable in emergency medical  
2 dispatch;

3 (4) have sufficient experience in providing  
4 pre-arrival instructions; and

5 (5) have sufficient resources to handle the additional  
6 workload and responsibilities of the program.

7 (b) In selecting an existing public safety answering point  
8 to act as a resource center, the commission [~~center~~] shall consider  
9 a public safety answering point's ability to keep records and  
10 produce reports to measure the effectiveness of the program. The  
11 commission [~~center~~] shall share information regarding a public  
12 safety answering point's abilities with the advisory council.

13 Sec. 771.105. CRITERIA FOR EMERGENCY MEDICAL DISPATCH  
14 INTERVENTION. The commission [~~center~~], with the assistance of the  
15 advisory council, shall define criteria that establish the need for  
16 emergency medical dispatch intervention to be used by participating  
17 public safety answering points to determine which calls are to be  
18 transferred to the regional emergency medical dispatch resource  
19 center for emergency medical dispatch intervention.

20 SECTION 3. Sections 771.106(a), (b), and (d), Health and  
21 Safety Code, are amended to read as follows:

22 (a) State [~~Money in the 9-1-1 services fee fund and other~~  
23 ~~state~~] funds may be appropriated to [~~The University of Texas~~  
24 ~~Medical Branch at Galveston on behalf of~~] the commission [~~center~~]  
25 to fund the program.

26 (b) The commission may [~~University of Texas Medical Branch~~  
27 ~~at Galveston on behalf of the center and the center are also~~

1 ~~authorized to~~ seek grant funding for the program.

2 (d) The provisions in this subchapter that require the  
3 commission ~~[center]~~ to ~~[establish,~~ conduct~~]~~ and evaluate the  
4 program are contingent on the commission ~~[center]~~ receiving funding  
5 in accordance with this section. If a sufficient number of  
6 political subdivisions in a region that could be served by a program  
7 offer to pay the commission ~~[center]~~ an amount that in the  
8 aggregate, together with any other funding received under this  
9 section, is sufficient to fund the program for the region, ~~[The~~  
10 ~~University of Texas Medical Branch at Galveston, on behalf of]~~ the  
11 commission ~~[center]~~:

12 (1) shall enter into contracts with the offering  
13 political subdivisions under which each will pay an appropriate  
14 share of the cost; and

15 (2) when the amount under the signed contracts,  
16 together with any other funding received under this section, is  
17 sufficient to fund the program for the region, shall implement the  
18 program for the region.

19 SECTION 4. Section 771.107, Health and Safety Code, is  
20 amended to read as follows:

21 Sec. 771.107. REPORT TO LEGISLATURE. The commission  
22 ~~[center]~~ shall biennially report its findings to the governor, the  
23 presiding officer of each house of the legislature, and the  
24 advisory council no later than January 1 of each odd-numbered year.

25 SECTION 5. Section 771.109(a), Health and Safety Code, is  
26 amended to read as follows:

27 (a) The commission ~~[center]~~ may appoint a program work group

1 to assist the commission [~~center~~] in [~~developing,~~] implementing[~~7~~]  
2 and evaluating the program and preparing a report on the  
3 commission's [~~center's~~] findings.

4 SECTION 6. Chapter 771, Health and Safety Code, is amended  
5 by adding Subchapter F to read as follows:

6 SUBCHAPTER F. NEXT GENERATION 9-1-1 TELEMEDICINE MEDICAL  
7 SERVICES PILOT PROJECT

8 Sec. 771.151. DEFINITIONS. In this subchapter:

9 (1) "Center" means the area health education center at  
10 the Texas Tech University Health Sciences Center that meets the  
11 requirements of 42 U.S.C. Section 294a and has received federal  
12 funding as an area health education center.

13 (2) "Emergency medical services" means services used  
14 to respond to an individual's perceived need for immediate medical  
15 care and to prevent death or aggravation of physiological or  
16 psychological illness or injury.

17 (3) "Emergency medical services provider" means a  
18 person who uses or maintains emergency medical services vehicles,  
19 medical equipment, and emergency medical services personnel to  
20 provide emergency medical services.

21 (4) "Emergency prehospital care" means care provided  
22 to the sick or injured before or during transportation to a medical  
23 facility, and includes any necessary stabilization of the sick or  
24 injured in connection with that transportation.

25 (5) "Regional trauma resource center" means a trauma  
26 facility that the center selects to participate in the project.

27 (6) "Rural area" means:

1                   (A) a county with a population of 50,000 or less;

2 or

3                   (B) a large, isolated, and sparsely populated  
4 area of a county with a population of more than 50,000.

5                   (7) "Telemedicine medical service" means a health care  
6 service that is initiated by a physician or provided by a health  
7 professional acting under physician delegation and supervision,  
8 that is provided for purposes of patient assessment by a health  
9 professional, diagnosis or consultation by a physician, or  
10 treatment, or for the transfer of medical data, and that requires  
11 the use of advanced telecommunications technology, other than  
12 telephone or facsimile technology, including:

13                   (A) compressed digital interactive video, audio,  
14 or data transmission;

15                   (B) clinical data transmission using computer  
16 imaging by way of still-image capture and store and forward; and

17                   (C) other technology that facilitates access to  
18 health care services or medical specialty expertise.

19                   (8) "Trauma facility" means a health care facility  
20 that is capable of comprehensive treatment of seriously injured  
21 persons and is a part of an emergency medical services and trauma  
22 care system.

23                   Sec. 771.152. ESTABLISHMENT OF PILOT PROJECT. (a) The  
24 commission, with the assistance of the center, shall establish a  
25 pilot project to provide emergency medical services instruction and  
26 emergency prehospital care instruction through a telemedicine  
27 medical service provided by regional trauma resource centers to:

1           (1) health care providers in rural area trauma  
2 facilities; and

3           (2) emergency medical services providers in rural  
4 areas.

5           (b) The commission shall provide technical assistance to  
6 the center in implementing the pilot project.

7           (c) The center, with the assistance of the commission,  
8 shall:

9           (1) design criteria and protocols for the telemedicine  
10 medical service and related instruction and provide the oversight  
11 necessary to conduct the pilot project;

12           (2) define criteria to determine when telemedicine  
13 medical services that provide instructions for emergency medical  
14 services, emergency prehospital care, and trauma care should be  
15 transferred to an emergency medical resource center for  
16 intervention; and

17           (3) collect the data necessary to evaluate the  
18 project.

19           (d) The center may make available appropriate resources for  
20 individuals who do not speak English.

21           Sec. 771.153. STAFF. The center shall provide the  
22 telemedicine medical service and related instruction for the pilot  
23 project through health care providers in regional trauma resource  
24 centers, including physicians, pharmacists, emergency medical  
25 personnel, and other health professionals acting under physician  
26 delegation and supervision.

27           Sec. 771.154. PARTICIPATION IN PILOT PROJECT. (a) The

1 center shall determine the trauma facilities and emergency medical  
2 services providers that are interested in participating in the  
3 pilot project.

4 (b) A trauma facility or emergency medical services  
5 provider participating in the pilot project must agree to  
6 successfully complete any required training and to provide all  
7 reports required by the center for the project.

8 Sec. 771.155. SELECTION OF PROJECT PARTICIPANTS AND  
9 REGIONAL TRAUMA RESOURCE CENTERS. (a) The center, with the  
10 assistance of the commission, may select trauma facilities and  
11 emergency medical services providers to participate in the pilot  
12 project and select trauma facilities to serve as regional trauma  
13 resource centers.

14 (b) A trauma facility may not be selected to participate in  
15 the project or to serve as a regional trauma resource center unless  
16 the facility:

17 (1) has a quality assurance program that measures each  
18 health care provider's compliance with the medical protocol;

19 (2) uses emergency medical services and emergency  
20 prehospital care protocols approved by a physician medical director  
21 knowledgeable in emergency medical services and emergency  
22 prehospital care;

23 (3) has experience in providing emergency medical  
24 services and emergency prehospital care that the center determines  
25 is sufficient; and

26 (4) has resources sufficient to provide the additional  
27 telemedicine medical services and related instruction required for



1 the pilot project in addition to the health care services already  
2 provided by the facility.

3 (c) In selecting a trauma facility to serve as a regional  
4 trauma resource center, the center shall consider the facility  
5 personnel's ability to maintain records and produce reports to  
6 measure the effectiveness of the pilot project. The center shall  
7 share information regarding that ability with the commission.

8 Sec. 771.156. FUNDING OF PILOT PROJECT. (a) Money  
9 collected under Section 771.072(f) may be appropriated to the  
10 commission to fund the pilot project.

11 (b) The center may seek grants to fund the pilot project.

12 (c) A political subdivision with a trauma facility that  
13 participates in the pilot project may pay part of the costs of the  
14 pilot project.

15 (d) If a sufficient number of political subdivisions in a  
16 region that may be served by the pilot project agree to pay the  
17 center an amount that together with other funding received under  
18 this section is sufficient to fund the pilot project for the region,  
19 the center shall:

20 (1) contract with the political subdivisions for each  
21 to pay an appropriate share of the cost; and

22 (2) implement the project for the region when the  
23 amounts agreed to in the contracts and any other funding received  
24 under this section are sufficient to fund the project for the  
25 region.

26 Sec. 771.157. REPORT TO LEGISLATURE. The center, in  
27 cooperation with the commission, shall report its findings to the

1 governor and the presiding officer of each house of the  
2 legislature, not later than December 31, 2020.

3 Sec. 771.158. LIABILITY. The operations of the center and a  
4 regional trauma resource center are considered to be the provision  
5 of 9-1-1 services for purposes of Section 771.053. Employees of and  
6 volunteers at the regional trauma resource center have the same  
7 protection from liability as a member of the governing body of a  
8 public agency under Section 771.053.

9 Sec. 771.159. WORK GROUP. (a) The center may appoint a  
10 project work group to assist the center in developing,  
11 implementing, and evaluating the project and preparing a report on  
12 the center's findings.

13 (b) A member of the work group is not entitled to  
14 compensation for serving on the project work group and may not be  
15 reimbursed for travel or other expenses incurred while conducting  
16 the business of the project work group.

17 (c) The project work group is not subject to Chapter 2110,  
18 Government Code.

19 Sec. 771.160. EXPIRATION. This subchapter expires January  
20 1, 2021.

21 SECTION 7. Sections 771.101 and 771.102(b), Health and  
22 Safety Code, are repealed.

23 SECTION 8. (a) In this section:

24 (1) "Center" means the area health education center at  
25 The University of Texas Medical Branch at Galveston that meets the  
26 requirements of 42 U.S.C. Section 294a and has received federal  
27 funding as an area health education center.

1           (2) "Program" means the regional emergency medical  
2 dispatch resource centers program established under Subchapter E,  
3 Chapter 771, Health and Safety Code, as that subchapter existed  
4 before amendment by this Act.

5           (b) On the effective date of this Act, the administration of  
6 the program is transferred from the center to the Commission on  
7 State Emergency Communications and all unspent and unobligated  
8 funds appropriated by the legislature to The University of Texas  
9 Medical Branch at Galveston on behalf of the center to fund the  
10 program are transferred to the commission.

11           (c) The Commission on State Emergency Communications with  
12 the agreement of the center may accept the transfer of any records,  
13 employees, or real or personal property of the center relating to  
14 the operation of the program.

15           SECTION 9. This Act takes effect September 1, 2015.

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President of the Senate

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Speaker of the House

I certify that H.B. No. 479 was passed by the House on April 15, 2015, by the following vote: Yeas 140, Nays 1, 1 present, not voting; and that the House concurred in Senate amendments to H.B. No. 479 on May 22, 2015, by the following vote: Yeas 128, Nays 4, 2 present, not voting.

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Chief Clerk of the House

I certify that H.B. No. 479 was passed by the Senate, with amendments, on May 21, 2015, by the following vote: Yeas 31, Nays 0.

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Secretary of the Senate

APPROVED: \_\_\_\_\_

Date

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Governor