

Stricken language would be deleted from and underlined language would be added to the law as it existed prior to this session of the General Assembly.

Act 393 of the Regular Session

1 State of Arkansas
2 87th General Assembly
3 Regular Session, 2009
4

As Engrossed: S2/25/09

A Bill

SENATE BILL 315

5 By: Senator Steele
6 By: Representatives Shelby, Allen, Blount, Carroll, Cash, Cheatham, Cole, J. Edwards, Flowers, R.
7 Green, House, D. Hutchinson, Hyde, Ingram, Kerr, W. Lewellen, Lowery, McCrary, Patterson, Pennartz,
8 Perry, Reep, J. Roebuck, Saunders, G. Smith, L. Smith, Tyler, Wagner, Webb, Williams
9

10
11 **For An Act To Be Entitled**

12 AN ACT TO AMEND THE TRAUMA SYSTEM ACT, § 20-13-
13 801 ET SEQ.; AND FOR OTHER PURPOSES.
14

15 **Subtitle**

16 TO AMEND THE TRAUMA SYSTEM ACT.
17

18
19 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
20

21 SECTION 1. Arkansas Code Title 20, Chapter 13, Subchapter 8 is amended
22 to read as follows:

23 20-13-801. Title.

24 This subchapter ~~shall be~~ is known and may be cited as the "Trauma
25 System Act".
26

27 20-13-802. Legislative findings.

28 The General Assembly finds that:

29 (1) ~~Trauma~~ Traumatic injury is recognized as the leading killer
30 of persons one (1) year to forty-four (44) years of age and is a serious yet
31 preventable ~~disease~~ condition;

32 (2) Deaths due to trauma in the United States for 2005 were
33 nearly one hundred thirty-nine thousand (139,000), and children nineteen (19)
34 years of age or younger accounted for nearly twelve percent (12%) of the
35 deaths;



1 (3) In 2006, two thousand one hundred nineteen (2,119) Arkansans
2 lost their lives and twenty-five thousand three hundred eight (25,308) were
3 admitted to hospitals due to trauma;

4 (4) The State of Arkansas incurs a massive expense from trauma
5 in lives lost, productive years destroyed, and the emotional and monetary
6 expense of caring for victims of trauma; and

7 (5) The experience of other states has shown that a
8 comprehensive trauma system, including all phases of trauma care, from
9 prevention, prehospital care, and trauma center designation to rehabilitative
10 care, can vastly improve overall trauma problems.

11
12 20-13-803. Definitions.

13 As used in this subchapter:

14 (1) “~~Division~~ ~~Department~~” means the ~~Division of Health of the~~
15 ~~Department of Health and Human Services~~ ~~Department of Health~~; and

16 (2) “EMS Division” means the Division of Emergency Medical
17 Services of the ~~Division of Health of the Department of Health and Human~~
18 ~~Services~~ ~~Department of Health~~.

19
20 20-13-804. Powers and duties of the ~~division~~ department.

21 (a) The ~~Division of Health of the Department of Health and Human~~
22 ~~Services~~ ~~Department of Health~~ may develop and implement a comprehensive
23 trauma care system that provides guidelines for the care of trauma victims
24 and is fully integrated with all available resources, including, but not
25 limited to, existing emergency medical services providers, hospitals, or
26 other health care providers that would like to participate in the program.

27 (b)(1) The department shall allocate funds deposited into the Public
28 Health Fund to administer this subchapter.

29 (2) The allocation of available funds shall be developed and
30 modified with:

31 (A) The advice of the Trauma Advisory Council; and

32 (B) The approval of the State Board of Health.

33 (3) Allocations of funds in the form of grants or contracts from
34 the funds deposited into the Public Health Fund to administer this subchapter
35 may include, but are not limited to:

36 (A) Emergency medical system care providers and ambulance

1 providers under § 20-13-809;

2 (B) Level I, Level II, Level III, and Level IV trauma
3 centers under §§ 20-13-810 – 20-13-813;

4 (C) Rehabilitation service providers under § 20-13-814;

5 (D) Quality improvement organizations under § 20-13-815;

6 (E) Trauma regional advisory councils under § 20-13-816;

7 (F) Command communication networks under 20-13-817; and

8 (G) Injury prevention programs under § 20-13-818.

9 (c) The funds deposited into the Public Health Fund to administer this
10 subchapter will be used to fund two (2) general types of grants with entities
11 necessary to administer this subchapter:

12 (1) Start-up trauma grants to support initial costs required to
13 qualify for participation in the trauma care system; and

14 (2) Sustaining trauma grants to support ongoing readiness costs
15 for continued participation in the trauma care system.

16 (d) The Department may contract with entities as necessary to
17 implement this subchapter.

18 ~~(b) The division shall promulgate such rules and regulations as are~~
19 ~~necessary to implement and administer this subchapter.~~

20
21 20-13-805. Standards for verification of trauma center status.

22 ~~(a) The Division of Health of the Department of Health and Human~~
23 ~~Services~~ State Board of Health may adopt standards for designation and
24 verification of trauma center status which assign level designations based on
25 resources available within the facility.

26 (b)(1) Standards shall be based upon national guidelines, including
27 those established by the American College of Surgeons entitled “Hospital and
28 Prehospital Resources for Optimal Care of the Injured Patient” and published
29 appendices thereto.

30 (2) Standards specific to ~~rural and urban areas shall~~ address
31 the unique nature of Arkansas may be developed and adopted and modified by
32 rule of the ~~division~~ board.

33
34 20-13-806. Trauma data collection and evaluation system –
35 Confidentiality of records.

36 ~~(a)(1) The Division of Health of the Department of Health and Human~~

1 ~~Services may~~ Department of Health shall develop a trauma data collection and
2 evaluation system, known as the "Trauma Registry".

3 (2) The Trauma Registry shall be designed to study both the
4 individual and collective care and treatment given to patients of the trauma
5 system ~~to improve patient outcome and ensure compliance with standards of~~
6 ~~verification.~~

7 (b)(1) The ~~division~~ department may collect, as deemed necessary and
8 appropriate, data and information regarding patients treated and transported
9 from the field, admitted to a facility through the emergency department,
10 through a trauma center, or directly to a special care unit or post-
11 hospitalization facility.

12 (2) Data and information shall be collected in a manner which
13 protects and maintains the confidential nature of patient records.

14 (c) Records and reports made pursuant to this subchapter shall be held
15 confidential within the hospital and ~~division~~ department and shall not be
16 available to the public.

17 (d) The Department of Health shall require all recipients of
18 sustaining grants under this subchapter to participate in the state specified
19 Trauma Registry.

20
21 20-13-807. Trauma Advisory Council.

22 (a) There is established an advisory council, to be known as the
23 "Trauma Advisory Council", for the purpose of making recommendations,
24 advising, and providing assistance to the ~~Division of Emergency Medical~~
25 ~~Services of the Division of Health of the Department of Health and Human~~
26 ~~Services~~ Department of Health concerning the development and operation of a
27 statewide trauma system.

28 (b) The council shall consist of ~~twelve (12)~~ twenty (20) voting
29 members who have a demonstrated interest in trauma systems, to be appointed
30 by the Governor as follows:

31 (1) One (1) member appointed from a list of two (2) nominees
32 submitted by the Arkansas Chapter of the American College of Emergency
33 Physicians;

34 (2) One (1) member appointed from a list of two (2) nominees
35 submitted by the Arkansas Academy of Family Physicians;

36 (3) One (1) member appointed from a list of two (2) nominees

1 submitted by the Arkansas Chapter of the American College of Surgeons;

2 (4) One (1) member appointed from a list of two (2) nominees
3 submitted by the Arkansas Medical Society;

4 (5) ~~One (1) member~~ Four (4) members appointed from a list of ~~two~~
5 ~~(2) eight (8)~~ nominees submitted by the Arkansas Hospital Association;

6 (6) One (1) member appointed from a list of two (2) nominees
7 submitted by the Governor's Emergency Medical Services Advisory Council;

8 (7) One (1) member appointed from a list of two (2) nominees
9 submitted by the Arkansas Emergency Nurses' Association;

10 (8) One (1) member appointed from a list of two (2) nominees
11 submitted by the Arkansas Emergency Medical Technicians' Association;

12 (9) One (1) member appointed from a list of two (2) nominees
13 submitted by the Arkansas Ambulance Association;

14 (10) One (1) member appointed from a list of two (2) nominees
15 submitted by the Arkansas Emergency Medical Services for Children Program;

16 (11) One (1) member appointed from a list of two (2) nominees
17 submitted by the Arkansas Trauma Society; ~~and~~

18 (12) One (1) member appointed from a list of two (2) nominees
19 submitted by the Arkansas Trauma Nurses' Society;

20 (13) One (1) member appointed from a list of two (2) nominees
21 submitted by the Arkansas Spinal Cord Commission;

22 (14) One (1) member appointed from a list of two (2) nominees
23 submitted by the Arkansas Minority Health Commission;

24 (15) One (1) member appointed from a list of two (2) nominees
25 submitted by the Arkansas Medical, Dental and Pharmaceutical Association;

26 (16) One (1) member appointed to represent injury prevention;
27 and

28 ~~(12)~~(17) One (1) member appointed from the public at large as a
29 consumer representative who has an interest in trauma systems.

30 (c) The council shall also include four (4) voting members who have a
31 demonstrated interest in trauma systems to be appointed as follows:

32 (1) Two (2) members to be appointed by and to serve at the
33 pleasure of the President Pro Tempore of the Senate; and

34 (2) Two (2) members to be appointed by and to serve at the
35 pleasure of the Speaker of the House of Representatives.

36 ~~(e)~~(d) The following shall ~~also be~~ serve as non-voting ex-officio

1 members of the council:

2 (1) The Director of the Department of Health ~~and Human Services~~
3 or the director's designee; and

4 (2) ~~The Director of the Highway Safety Program of the Arkansas~~
5 ~~State Highway and Transportation Department;~~

6 ~~(3) The Director of the Department of Arkansas State Police or~~
7 ~~the director's designee;~~

8 ~~(4) Two (2) members to be appointed by and to serve at the~~
9 ~~pleasure of the President Pro Tempore of the Senate; and~~

10 ~~(5) Four (4) members to be appointed by and to serve at the~~
11 ~~pleasure of the Speaker of the House of Representatives.~~

12
13 20-13-808. Terms - Vacancies - Meetings - Rules.

14 (a)~~(1)~~ All voting members of the Trauma Advisory Council ~~appointed by~~
15 ~~the Governor~~ shall be appointed for terms of ~~four (4)~~ two (2) years.

16 ~~(2)(b)(1) Vacancies shall be filled in the manner provided in this~~
17 ~~subchapter for the original appointment. Persons appointed to fill vacancies~~
18 ~~shall serve the unexpired portions of the terms. If a vacancy occurs in an~~
19 ~~appointed position for any reason, the vacancy shall be filled in the manner~~
20 ~~provided for the original appointment under § 20-13-807.~~

21 (2) The new appointee shall serve for the remainder of the
22 unexpired term.

23 (c) A member of the council shall be removed for conviction of a
24 felony, for not attending fifty percent (50%) of the meetings in a calendar
25 year, or if the member no longer meets the qualifications for his or her
26 initial appointment.

27 ~~(b)(d)(1)~~ The members of the council shall elect from their membership
28 a chair, a vice chair, and a ~~secretary-treasurer~~ secretary, whose duties
29 shall be those customarily exercised by those officers or duties specifically
30 designated by the council.

31 (2) All officers shall serve for a period of ~~one (1) year~~ two
32 (2) years and until their successors are elected.

33 (e)(1) Thirteen (13) of the voting members of the council shall
34 constitute a quorum for the purpose of transacting business.

35 (2) Except for actions taken pursuant to subsection (g) of this
36 section, all actions of the council shall be made by a majority of all voting

1 members.

2 ~~(e)~~(f) The council shall meet at least ~~two (2)~~ four (4) times a year
3 but may meet more frequently upon the call of the chair or at the request,
4 stated in writing, of ~~any seven (7)~~ a majority of the members of the council.

5 (g)(1) To assist in the expeditious conduct of its business when the
6 full council is not meeting, the council may elect an executive committee.

7 (2) The chair, vice-chair, and secretary of the council shall be
8 members of the executive committee.

9 (3) The executive committee shall be constituted and shall
10 function as provided in the bylaws of the council.

11 ~~(d)~~(h) The council shall establish its own rules of procedure.

12
13 20-13-809. Grants for emergency medical system care providers or
14 ambulance providers.

15 An emergency medical system care provider or ambulance provider may be
16 eligible for:

17 (1) The emergency medical system care provider education start-
18 up grants that are used to support trauma education and trauma readiness; or

19 (2) The emergency medical system care provider sustaining grants
20 that are used to support ongoing trauma education and trauma readiness.

21
22 20-13-810. Grants for Level I Trauma Centers.

23 (a)(1) An entity that meets the preliminary criteria for a Level I
24 Trauma Center under the rules of the State Board of Health may be eligible
25 for the Level I Trauma Center start-up grant that is used to qualify for the
26 status of a Level I Trauma Center and for trauma readiness costs associated
27 with the care of trauma patients.

28 (2) This grant may be awarded to entities that:

29 (A) Meet the preliminary criteria for Level I Trauma
30 Center status as determined by the Department of Health; and

31 (B) Demonstrate the capability of fully achieving Level I
32 Trauma Center status within eighteen (18) months.

33 (b)(1) An established Level I Trauma Center may be eligible for a
34 sustaining grant if the Level I Trauma Center:

35 (A) Has achieved Level I Trauma Center status and is
36 currently at Level I status; and

1 (B) Demonstrates continued capability to maintain Level I
2 Trauma Center status.

3 (2) This grant may be an annual grant and may have an annual
4 renewal process for Level I Trauma Centers that meet the criteria under this
5 subsection.

6
7 20-13-811. Grants for Level II Trauma Centers.

8 (a) An entity that meets the preliminary criteria for a Level II
9 Trauma Center under the rules of the State Board of Health may be eligible
10 for the Level II Trauma Center start-up grant that is used to qualify for the
11 status of a Level II Trauma Center and for trauma readiness costs associated
12 with the care of trauma patients.

13 (2) This grant may be awarded to entities that:

14 (A) Meet the preliminary criteria for Level II Trauma
15 Center status as determined by the Department of Health; and

16 (B) Demonstrate the capability of fully achieving Level II
17 Trauma Center status within twelve (12) months.

18 (b)(1) An established Level II Trauma Center may be eligible for a
19 sustaining grant if the Level II Trauma Center:

20 (A) Has achieved Level II Trauma Center status and is
21 currently at Level II status; and

22 (B) Demonstrates continued capability to maintain Level II
23 Trauma Center status.

24 (2) This grant may be an annual grant and may have an annual
25 renewal process for Level II Trauma Centers that meet the criteria under this
26 subsection.

27
28 20-13-812. Grants for Level III Trauma Centers.

29 (a)(1) An entity that meets the preliminary criteria for a Level III
30 Trauma Center under the rules of the State Board of Health may be eligible
31 for the Level III Trauma Center start-up grant that is used to qualify for
32 the status of a Level III Trauma Center and for trauma readiness costs
33 associated with the care of trauma patients.

34 (2) This grant may be awarded to entities that:

35 (A) Meet the preliminary criteria for Level III Trauma
36 Center status as determined by the Department of Health; and

1 (B) Demonstrate the capability of fully achieving Level
2 III Trauma Center status within twelve (12) months.

3 (b)(1) An established Level III Trauma Center may be eligible for a
4 sustaining grant if the Level III Trauma Center:

5 (A) Has achieved Level III Trauma Center status and is
6 currently at Level III status; and

7 (B) Demonstrates continued capability to maintain Level
8 III Trauma Center status.

9 (2) This grant may be an annual grant and may have an annual
10 renewal process for Level III Trauma Centers that meet the criteria under
11 this subsection.

12
13 20-13-813. Grants for Level IV Trauma Centers.

14 (a)(1) An entity that meets the preliminary criteria for a Level IV
15 Trauma Center under the rules of the State Board of Health may be eligible
16 for the Level IV Trauma Center start-up grant that is used to qualify for the
17 status of a Level IV Trauma Center and for trauma readiness costs associated
18 with the care of trauma patients.

19 (2) This grant may be awarded to entities that:

20 (A) Meet the preliminary criteria for Level IV Trauma
21 Center status as determined by the Department of Health; and

22 (B) Demonstrate the capability of fully achieving Level IV
23 Trauma Center status within twelve (12) months.

24 (b)(1) An established Level IV Trauma Center may be eligible for a
25 sustaining grant if the Level IV Trauma Center:

26 (A) Has achieved Level IV Trauma Center status and is
27 currently at Level IV status; and

28 (B) Demonstrates continued capability to maintain Level IV
29 Trauma Center status.

30 (2) This grant may be an annual grant and may have an annual
31 renewal process for Level IV Trauma Centers that meet the criteria under this
32 subsection.

33
34 20-13-814. Grants for rehabilitation services.

35 Grants may be awarded to providers, entities, or organizations with
36 special competence in trauma rehabilitation services that provide

1 rehabilitation services under this subchapter to trauma patients.

2
3 20-13-815. Contracts with quality improvement organizations.

4 (a) An entity that meets the preliminary criteria for a quality
5 improvement organization under the rules of the State Board of Health may
6 contract with the Department of Health to develop, promulgate, and measure
7 trauma quality measures for entities providing care for the Trauma System
8 under this subchapter.

9 (b) This contract may be awarded to entities that:

10 (1) Meet the preliminary criteria for a quality improvement
11 organization as determined by the Department of Health; and

12 (2) Demonstrate the capability of providing to the Trauma
13 System, trauma centers, and other trauma care providers:

14 (A) The development of quality measures;

15 (B) The implementation of educational programs to trauma
16 care providers related to quality measures and to improve the quality of
17 care; and

18 (C) The gathering of data that can be used to measure the
19 quality of care, outcomes, and utilization of resources.

20
21 20-13-816. Grants for trauma regional advisory councils.

22 (a)(1) An entity that meets the preliminary criteria for a trauma
23 regional advisory council under the rules of the State Board of Health may be
24 eligible for recognition as a trauma regional advisory council.

25 (2) The Department of Health may establish a grant or provide
26 technical assistance to entities that:

27 (A) Meet the preliminary criteria for a trauma regional
28 advisory council as determined by the Department of Health; and

29 (B) Demonstrate the capability of satisfactorily
30 developing, overseeing, and administering the trauma system plan for its
31 region.

32 (b)(1) An established trauma regional advisory council may be eligible
33 for a sustaining grant if the trauma regional advisory council:

34 (A) Has achieved the status as the trauma regional
35 advisory council for its region of the Trauma System and is currently
36 providing trauma planning and quality improvement services to its region of

1 the Trauma System; and

2 (B) Demonstrates continued capability to maintain its
3 status as a trauma regional advisory council based on its performance in
4 planning and overseeing the plan for its region of the Trauma System.

5 (2) This grant may be an annual grant and have an annual renewal
6 process for a trauma regional advisory council that meets the criteria under
7 this subsection.

8
9 20-13-817. Command and communication networks.

10 (a) The Department of Health shall ensure operation of a call center
11 to facilitate communication and coordination of available resources.

12 (b) The call center shall direct patient transport of critical trauma
13 patients to hospitals with the appropriate capability to provide optimum
14 patient care.

15 (c) The department may contract with entities to provide command and
16 communication networks.

17
18 20-13-818. Injury prevention programs.

19 The Department of Health shall allocate funds to develop and promote
20 injury prevention programs including the development of the capacity to track
21 and describe the epidemiologic and health statistics of injury deaths and
22 disabilities in Arkansas.

23
24 20-13-819. Quality or system assessment and improvement.

25 (a)(1) Any data, records, reports, and documents collected or compiled
26 by or on behalf of the Department of Health, the Trauma Advisory Council, or
27 other entity authorized under this subchapter for the purpose of quality or
28 system assessment and *improvement of the trauma system* shall not be subject
29 to disclosure under the Freedom of Information Act of 1967, § 25-19-101 et
30 seq., to the extent that it identifies or could be used to identify any
31 individual patient, provider, institution, or health plan.

32 (2) For purposes of this section, "data, records, reports, and
33 documents" means recordings of interviews and all oral or written
34 proceedings, reports, statements, minutes, memoranda, data, and other
35 documentation collected or compiled for the purposes of trauma system quality
36 review or trauma system assessment and improvement pursuant to a requirement

1 of or request by the Department of Health, the Trauma Advisory Council, or
2 other entity authorized by this chapter.

3 (b)(1) Any data, records, reports, and documents collected or compiled
4 by or on behalf of the Department of Health, the Trauma Advisory Council, or
5 other entity authorized under this subchapter for the purpose of quality or
6 system assessment and improvement shall not be admissible in any legal
7 proceeding and shall be exempt from discovery and disclosure to the same
8 extent that records of and testimony before committees evaluating the quality
9 of medical or hospital care are exempt under § 16-46-105(a)(1).

10 (2) A healthcare provider's use of the information in its
11 internal operations shall not operate as a waiver of these protections.

12 (c) All information shall be treated in a manner that is consistent
13 with all state and federal privacy requirements, including without limitation
14 the federal Health Insurance Portability and Accountability Act of 1996
15 privacy rule, 45 C.F.R. § 164.512(i).

16
17 (d) The Department of Health or other entity authorized to provide
18 services for the Trauma System may use any data, records, reports, or
19 documents generated or acquired in its internal operations without waiving
20 any protections under this section.

21
22 20-13-820. Reports to the General Assembly.

23 The Director of the Department of Health shall provide a report to the
24 Senate Committee on Public Health, Welfare, and Labor and the House Committee
25 on Public Health, Welfare, and Labor on or before April 1 and October 1 of
26 each year through 2011. After 2011, the director shall provide an annual
27 report to each committee on or before October 1.

28 20-13-821. Rules.

29 The State Board of Health shall promulgate the rules necessary to
30 implement and administer this subchapter.

31
32 SECTION 2. EMERGENCY CLAUSE. It is found and determined by the
33 General Assembly of the State of Arkansas that the state incurs a massive
34 expense from trauma in lives lost, productive years destroyed, and the
35 emotional and monetary expense of caring for victims of trauma; that a
36 coordinated and comprehensive system of trauma care has shown in other states

1 to improve overall trauma problems; and that this act is immediately
2 necessary because the current law must be amended to provide for a
3 coordinated and comprehensive trauma system to ensure that all trauma victims
4 have the greatest chance for survival and a reduced risk for permanently
5 disabling injuries. Therefore, an emergency is declared to exist and this
6 act being necessary for the preservation of the public peace, health, and
7 safety shall become effective on July 1, 2009.

8
9 */s/ Steele*

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11 **APPROVED: 3/13/2009**
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