

SUBJECT: Continuing regional emergency medical dispatch resource centers program

COMMITTEE: Public Health — favorable, without amendment

VOTE: 9 ayes — Delisi, Laubenberg, Jackson, Cohen, Coleman, Gonzales,
S. King, Olivo, Truitt

0 nays

WITNESSES: For — Allen Johnson, Montgomery County Hospital District; (*Registered, but did not testify*: Kelly Curry, Montgomery County Hospital District; Douglas, Dunsavage, American Heart Association; Greg Herzog, Texas Medical Association; David Pearson, Texas Organization of Rural and Community Hospitals)

Against —None

On — Maxie Bishop, Department of State Health Services; Brock Logan, Commission on State Emergency Communications; Steve Shelton, East Texas Area Health Education Center University of Texas Medical Branch

BACKGROUND: In 2001, the 77th Legislature created a pilot program to test the efficacy of using emergency medical dispatchers located in a regional dispatch resource center to provide life-saving and medical instructions to 9-1-1 callers in parts of rural Texas who need assistance and guidance while they await the arrival of emergency medical personnel.

The program is overseen by the area health education center at The University of Texas (UT) Medical Branch at Galveston. It is funded through an appropriation from the 9-1-1 services fee fund, which receives revenue from a flat fee added to monthly telephone bills. Prior to each legislative session, the center reports its findings to the governor, the lieutenant governor, the speaker of the House, and the emergency services advisory council appointed by the governor.

In 2005, the 79th Legislature enacted SB 523 by Deuell, which extended the expiration date of the pilot program to September 1, 2009.

DIGEST: HB 1412 would make permanent the Emergency Medical Dispatch Resource Centers Program. It would remove the word “pilot” from

applicable sections of the Health and Safety Code and repeal sec. 771.110, which calls for the pilot program to expire on September 1, 2009.

In addition, the bill would allow the appropriation of other state funds to the UT Medical Branch at Galveston to fund the program. The area health education center's reporting requirements to state officials would continue beyond January 1, 2009.

This bill would take effect September 1, 2007.

**SUPPORTERS
SAY:**

HB 1412 would make permanent a successful and important emergency services program. The Emergency Medical Dispatch Resource Centers Program is essential in rural areas where emergency services are not immediately available. Pre-arrival instructions and interventions issued by dispatchers through this program have dramatically improved patient outcomes. Over the history of the pilot program, 52 percent of the calls received involved life-threatening situations. At the same time, the program received a quality assurance score of 98.45, which demonstrates that dispatchers consistently give information in a calm, correct, and accurate manner.

The bill would make the program permanent and allow for its expansion to other areas of the state. While its current appropriation of \$150,000 is not enough to fully fund an expanded program, the area health education center could seek additional grant funding for the program. Furthermore, a rider in Art. 11 of HB 1, as passed by the House, would appropriate an additional \$600,000 in fiscal 2008-09 to fund the program. Centers could be developed and expanded as monies become available.

**OPPONENTS
SAY:**

No apparent opposition.

NOTES:

According to the Legislative Budget Board, the UT Medical Branch at Galveston was appropriated \$150,000 in fiscal 2006-07 for the pilot program. This amount is scheduled to stay the same in the institution's appropriation under Art. 3 in HB 1 by Chisum, the House version of the general appropriations bill for fiscal 2008-09.

The companion bill, SB 570 by Deuell, was reported favorably, without amendment, on April 26 by the Senate Health and Human

Services Committee and recommended for the Local and Uncontested Calendar.