

BILL ANALYSIS

Senate Research Center
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S.B. 330
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Health & Human Services
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AUTHOR'S/SPONSOR'S STATEMENT OF INTENT

Strokes account for a significant number of deaths in Texas. After a stroke, every minute that elapses without treatment significantly reduces the victim's chance for survival. As proposed, S.B. 330 establishes an incentive program for hospitals to be prepared to treat stroke victims quickly and effectively.

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 1 (Sections 241.252 and 241.255), to the Office of Rural Community Affairs in SECTION 4 (Sections 487.702 and 487.704(a), Government Code) and to the Council on Cardiovascular Disease and Stroke in SECTION 5 (Sections 93.102, 93.104, and 93.105, Health and Safety Code) of this bill.

SECTION BY SECTION ANALYSIS

[While the statutory reference in this bill is to the Texas Department of Health (TDH), the following amendments affect the Department of State Health Services, as the successor agency to TDH.]

SECTION 1. Amends Chapter 241, Health and Safety Code, by adding Subchapter I, as follows:

SUBCHAPTER I. PRIMARY STROKE CENTER DESIGNATION

Sec. 241.251. DEFINITION. Defines "executive commissioner."

Sec. 241.252. DESIGNATION OF PRIMARY STROKE CENTER. (a) Requires the Texas Department of Health (department) to designate a hospital as a primary stroke center in accordance with this chapter and rules adopted by the executive commissioner of the Health and Human Services Commission (executive commissioner).

(b) Prohibits the department from designating a hospital as a primary stroke center unless the hospital is certified as a primary stroke center or facility by a national medical certification organization recognized for this purpose by the executive commissioner.

(c) Requires the department to develop an application procedure for a hospital to apply for designation as a primary stroke center. Authorizes the department to develop materials designed to assist a hospital in qualifying for designation as a primary stroke center.

(d) Prohibits the department from limiting the number of hospitals that may be designated as primary stroke centers.

Sec. 241.253. USE OF DESIGNATION. Prohibits a hospital from using certain terminology in printed materials seen by or given to the public unless it has been designated as a primary stroke center under this subchapter.

Sec. 241.254. PUBLICATION OF DESIGNATION. (a) Authorizes the department to publish a list of primary stroke centers on its website. Authorizes a primary stroke center to decline to be listed on the website.

(b) Requires the departments to notify all hospitals of certain details if the department publishes a list under Subsection (a).

(c) Authorizes the department to send a list of primary stroke centers and their locations to all emergency medical services providers and fire departments.

Sec. 241.255. TEMPORARY LAPSE OF QUALIFICATIONS. (a) Provides that, except as provided by Subsection (b), designation of a hospital as a primary stroke center terminates on the date the hospital ceases to qualify for that designation, as determined under rules of the executive commissioner.

(b) Authorizes a hospital designated as a primary stroke center that ceases to qualify for the designation to continue to use the designation under certain conditions.

(c) Sets forth the timeline for temporary lapse of qualifications.

(d) Requires the hospital, not later than the fifth day after the date a designation terminates under this section, to notify the department and each emergency medical services provider of the termination of the designation.

(e) Requires a hospital that loses the designation of primary stroke center under this section must reapply to use the designation again.

SECTION 2. Amends Section 773.050, Health and Safety Code, by adding Subsection (g), to require the Texas Board of Health (board), in establishing minimum standards for the licensing of emergency medical services providers (provider), to require each provider to integrate into the provider's policies and procedures any stroke plan created under Section 773.181 (Stroke Plan) by the trauma service area regional advisory council for the region of the provider.

SECTION 3. Amends Chapter 773, Health and Safety Code, by adding Subchapter H, as follows:

SUBCHAPTER H. STROKE TRAUMA PROCEDURES

Sec. 773.181. STROKE PLAN. (a) Requires the trauma service area regional advisory council for each region containing a primary stroke center designated under Section 241.252 (Designation of Primary Stroke Center) to develop a stroke plan for all emergency medical services providers operation within the region.

(b) Requires the plan to include certain elements.

Sec. 773.182. STROKE TRAINING. (a) Requires the department's bureau of emergency management (bureau) to ensure that training required by the plan developed under Section 773.181 (Stroke Plan) is available to emergency medical services personnel.

(b) Requires the bureau to provide emergency medical services personnel with information the bureau receives on newly developed stroke diagnostic approaches, technologies, or therapies.

SECTION 4. Amends Chapter 487, Government Code, by adding Subchapter P, as follows:

SUBCHAPTER P. RURAL HOSPITAL NEEDS GRANT

Sec. 487.701. DEFINITIONS. Defines "rural community" and "hospital."

Sec. 487.702. POWERS OF OFFICE. Authorizes the Office of Rural Community Affairs (office) to take certain actions and adopt rules to administer this subchapter.

Sec. 487.703. GRANT PROGRAM. (a) Authorizes the office to use money appropriated to the office for the Rural Hospital Needs Grant Program to make a grant to assist a hospital located in a rural community to qualify for designation as a primary stroke center under Section 241.252 (Designation of Primary Stroke Center), Health and Safety Code.

(b) Authorizes a grant recipient to use the money only for certain expenses.

Sec. 487.704. ELIGIBILITY FOR GRANT. (a) Requires the office to adopt rules that establish eligibility criteria for receiving a grant under this subchapter.

(b) Sets forth requirements for rules adopted by the office.

SECTION 5. Amends Chapter 93, Health and Safety Code, by adding Subchapter C, as follows:

SUBCHAPTER C. PRIMARY STROKE CENTER GRANT PROGRAM

Sec. 93.101. DEFINITION. Defines "hospital."

Sec. 93.102. POWERS OF COUNCIL. Authorizes the department on behalf of the Council on Cardiovascular Disease and Stroke (council), in accordance with Section 93.004 (Duties of Department), to take certain actions and adopt rules to administer this subchapter.

Sec. 93.103. GRANT PROGRAM. (a) Authorizes the council to use money appropriated to the council for the Primary Stroke Center Grant Program to make a grant to assist a hospital designated as a primary stroke center under Section 241.252 (Designation of Primary Stroke Center).

(b) Authorizes a grant recipient to use the money only for certain expenses.

Sec. 93.104. ELIGIBILITY FOR GRANT. (a) Requires the council to adopt rules that establish eligibility criteria for receiving a grant under this subchapter.

(b) Sets forth requirements for rules adopted by the council.

Sec. 93.105. RECIPIENT RESPONSIBILITY AGREEMENT. (a) Requires the council to adopt rules that establish the responsibilities of a recipient of a grant under the program.

(b) Requires that the rules require each recipient of a grant under the program to provide certain stroke-related services.

SECTION 6. Provides that a hospital is not required to comply with Section 241.253, as added by this Act, before September 1, 2006.

SECTION 7. Effective date: September 1, 2005.