

Legend:

(Print in parentheses) = Proposed amendment(s)

Single Underline = Proposed new language

**[Bold print and bracketed]** = Current language proposed for deletion

Regular print = Current language

(Print in parentheses) = No changes

NOTE: REPEAL CURRENT VERSION OF 157.123 and replace with proposed language below:

## Texas Administrative Code

<u>TITLE 25</u>	HEALTH SERVICES
<u>PART 1</u>	DEPARTMENT OF STATE HEALTH SERVICES
<u>CHAPTER 157</u>	EMERGENCY MEDICAL CARE
<u>SUBCHAPTER G</u>	EMERGENCY MEDICAL SERVICES TRAUMA SYSTEMS
RULE §157.123	Regional Advisory Councils

(a) The Department of State Health Services (department) shall recognize a Regional Advisory Council (RAC) as the established organizational body for the regional emergency medical care services and trauma care system within a trauma service area (TSA) as described in §157.122 of this title.

(1) The department shall recognize only one RAC for each TSA.

(2) Trauma and emergency healthcare stakeholders caring for patients in the trauma and health care system shall be eligible for membership in the RAC.

(3) If a RAC is not contracted with the department and elects to remain the recognized RAC for the respective TSA, the RAC shall:

(A) comply with trauma system planning activities as described in paragraph 4;

(B) maintain a 501 (c) (3) status and;

(C) submit an annual report to the department that includes, at a minimum:

(i) a summary of regional trauma system and acute care activities

(ii) performance improvement activities and accomplishments

(iii) educational offerings and efforts; and

(iv) all other elements as described in paragraph 4.

(4) The RAC shall develop and maintain a regionally specific comprehensive trauma and emergency health care system plan. The plan shall be inclusive of all counties within the TSA and shall be based on current industry standards and guidelines.

(A) The department shall review the plan to ensure the following elements are addressed:

(i) Injury and illness data analysis

(ii) Indicators as a tool for system assessment and evaluation

(iii) Identification of health care system coalition and community partners ) for the purpose of system integration and improvement.

(iv) Trauma, stroke, and emergency health care, including triage, treatment and transport regional guidelines

(v) Prevention and outreach

(vi) System coordination and patient flow

(vii) Disaster preparedness

(viii) System-wide education

ix) Regional systems-level performance improvement

(x) Other additional elements as required by the department

(B) All health care entities and interested specialty centers have been given an opportunity to participate in the planning process.

(5) Compliance with all contractual reporting requirements. A regional advisory council shall:

(A) notify the department and RAC membership within five days if it is unable to provide the resources as required by its recognition. The department will determine a 30-day to 90- day period from onset date of deficiency for the RAC to achieve compliance.

(B) Comply with the provisions within these sections, all current state and system standards as described in this chapter, and all policies, guidelines, and procedures as set forth in the system plan;

(C) continue its commitment to provide the resources as required by its recognition; and

(D) If the RAC chooses to permanently dissolve, it shall provide at least 30 days notice to the department and all members of the RAC.

(6) The department shall have the right to review, inspect, evaluate, and audit all RAC performance improvement documents relevant to trauma and emergency health care at any time to verify compliance with the statute and these rules. The department shall maintain confidentiality of such records to the extent authorized by the Public Information Act, (Government Code, Chapter 552), the Texas Health and Safety Code, Chapter 773 and/or any other relevant confidentiality law or regulation. Such inspections shall be scheduled by the department when appropriate.