Legend:

- Single Underline = Proposed new rule language
- [Strike-through and brackets] = Current rule language proposed for deletion
- Regular Print = Current rule language not being amended

RULE §157.122 Trauma Service Areas

(a) Trauma service areas (TSAs) are established for descriptive and planning purposes and not for the purpose of restricting patient referral.

(b) The state has been geographically divided by counties into 22 TSAs; however:

(1) counties may request the department to re-align them to another TSA per the process in subsection (d) of this section;

(2) each TSA shall have at least one advanced Level III [a level] general trauma facility or higher within its boundaries or the department [bureau] may re-align the counties in that TSA to other TSAs which have such a facility;

(3) each TSA shall be multi-county with no fewer than three Texas counties; and

(4) a TSA may include areas from other states or countries.

(c) The counties included in the 22 TSAs are grouped as follows (updated lists will be maintained by the Texas Department of State Health Services, Office of EMS/Trauma Systems [bureau]):


(2) Area B - Bailey, Borden, Castro, Cochran, Cottle, Crosby, Dawson, Dickens, Floyd, Gaines, Garza, Hale, Hockley, Kent, King, Lamb, Lubbock, Lynn, Motley, Scurry, Terry, Yoakum;

(3) Area C - Archer, Baylor, Clay, Foard, Hardeman, Jack, Montague, Wichita, Wilbarger, Young;

(4) Area D - Brown, Callahan, Coleman, Comanche, Eastland, Fisher, Haskell, Jones, Knox, Mitchell, Nolan, Shackelford, Stephens, Stonewall,
Taylor, Throckmorton;

(5) Area E - Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, Wise;

(6) Area F - Bowie, Cass, Delta, Hopkins, Lamar, Morris, Red River, Titus;

(7) Area G - Anderson, Camp, Cherokee, Franklin, Freestone, Gregg, Harrison, Henderson, Houston, Marion, Panola, Raines, Rusk, Shelby, Smith, Trinity, Upshur, Van Zandt, Wood;

(8) Area H - Angelina, Nacogdoches, Polk, Sabine, San Augustine, San Jacinto, Tyler;

(9) Area I - Culberson, El Paso, Hudspeth;

(10) Area J - Andrews, Brewster, Crane, Ector, Glasscock, Howard, Jeff Davis, Loving, Martin, Midland, Pecos, Presidio, Reeves, Terrell, Upton, Ward, Winkler;

(11) Area K - Coke, Concho, Crockett, Irion, Kimble, Mason, McCulloch, Menard, Reagan, Runnels, Schleicher, Sterling, Sutton, Tom Green;

(12) Area L - Bell, Coryell, [Falls] Hamilton, Lampasas, Milam, Mills;

(13) Area M - Bosque, Falls, Hill, Limestone, McLennan;

(14) Area N - Brazos, Burleson, Grimes, Leon, Madison, Robertson, Washington;

(15) Area O - Bastrop, Blanco, Burnet, Caldwell, Fayette, Hays, Lee, Llano, San Saba, Travis, Williamson;


(17) Area Q - Austin, Colorado, Fort Bend, Harris, Matagorda, Montgomery, Walker, Waller, Wharton;

(18) Area R - Brazoria, Chambers, Galveston, Hardin, Jasper, Jefferson, Liberty, Newton, Orange;
(19) Area S - Calhoun, Dewitt, Goliad, Jackson, Lavaca, Victoria;

(20) Area T - Jim Hogg, Webb, Zapata;

(21) Area U - Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio; and

(22) Area V - Cameron, Hidalgo, Starr, Willacy.

(d) The realignment of a county may be initiated by the department [bureau] or at the request of either the county government, a licensed health care facility, or a licensed emergency medical services (EMS) provider in that county.

(1) The requesting entity should forward correspondence to the Office of EMS/Trauma Systems [bureau] specifying:

(A) reason(s) for realignment request;

(B) existing patient routing patterns used by both EMS providers and health care facilities, including distances and transport times involved in this patient routing;

(C) all entities affected by [included in] the request [and a listing of all other licensed health care facilities and licensed EMS providers in the county]; and

(D) documentation that the receiving regional advisory council (RAC) is amenable to the realignment.

(2) Copies of the correspondence should be forwarded by the requesting party to all impacted RACs, county governments, licensed health care facilities/EMS providers in the county, and the Office of EMS/Trauma Systems [appropriate Texas Department of Health regional EMS office].

(3) The department [bureau] will evaluate the request based on the impact to patient care and will notify all parties of the decision.

(4) The department’s decision regarding realignment will be communicated to all affected entities.