

CHAPTER 111
HOUSE BILL No. 2752

AN ACT concerning health care; relating to trauma facilities and policies regarding vaccination for meningitis; amending K.S.A. 2005 Supp. 75-5665 and 75-5666 and repealing the existing sections.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2005 Supp. 75-5665 is hereby amended to read as follows: 75-5665. The secretary of health and environment, after consultation with and consideration of recommendations from the advisory committee, shall:

(a) Develop rules and regulations necessary to carry out the provisions of this act, *including fixing, charging and collecting fees from trauma facilities to recover all or part of the expenses incurred in the designation of trauma facilities pursuant to subsection (f) of this section;*

(b) develop a statewide trauma system plan including the establishment of regional trauma councils, using the 1998 Kansas EMS-Trauma Systems Plan study as a guide and not more restrictive than state law. The secretary shall ensure that each council consist of at least six members. Members of the councils shall consist of persons chosen for their expertise in and commitment to emergency medical and trauma services. Such members shall be chosen from the region and include prehospital personnel, physicians, nurses and hospital personnel involved with the emergency medical and trauma services and a representative of a county health department. The plan should:

(1) Maximize local and regional control over decisions relating to trauma care;

(2) minimize bureaucracy;

(3) adequately protect the confidentiality of proprietary and personal health information;

(4) promote cost effectiveness;

(5) encourage participation by groups affected by the system;

(6) emphasize medical direction and involvement at all levels of the system;

(7) rely on accurate data as the basis for system planning and development; and

(8) facilitate education of health care providers in trauma care;

(c) plan, develop and administer a trauma registry to collect and analyze data on incidence, severity and causes of trauma and other pertinent information which may be used to support the secretary's decision-making and identify needs for improved trauma care;

(d) provide all technical assistance to the regional councils as necessary to implement the provisions of this act;

(e) collect data elements for the trauma registry that are consistent with the recommendations of the American college of surgeons committee on trauma and centers for disease control;

(f) *designate trauma facilities by level of trauma care capabilities after considering the American college of surgeons committee on trauma standards and other states' standards except that trauma level designations shall not be based on criteria that place practice limitations on registered nurse anesthetists which are not required by state law;*

~~(g)~~ (g) develop a phased-in implementation schedule for each component of the trauma system, including the trauma registry, which considers the additional burden placed on the emergency medical and trauma providers;

~~(g)~~ (h) develop standard reports to be utilized by the regional trauma councils and those who report data to the registry in performing their functions;

~~(h)~~ (i) assess the fiscal impact on all components of the trauma system, and thereafter recommend other funding sources for the trauma system and trauma registry;

~~(i)~~ (j) prepare and submit an annual budget in accordance with the provisions of this act. Such budget shall include costs for the provision of technical assistance to the regional trauma councils and the cost of developing and maintaining the trauma registry and analyzing and reporting on the data collected; and

~~(j)~~ (k) enter into contracts as deemed necessary to carry out the duties and functions of the secretary under this act.

Sec. 2. K.S.A. 2005 Supp. 75-5666 is hereby amended to read as follows: 75-5666. (a) The secretary of health and environment shall develop and maintain a statewide trauma registry ~~and consult with the health care data governing board in developing the registry.~~ All designated ~~trauma centers;~~ prehospital trauma providers, designated trauma facilities and ~~acute~~ medical care facilities that provide any service or care to or for persons with trauma injury in this state shall collect and report to the trauma registry data and information deemed appropriate by the secretary, ~~after consultation with the health care data governing board,~~ to monitor patient outcome.

(b) The secretary is hereby authorized to collect data pertaining to all trauma care occurring in Kansas. The secretary shall adopt rules and regulations which use the most efficient, least intrusive means for collecting the trauma care data consistent with ensuring the quality, timeliness, completeness and confidentiality of the trauma registry.

(c) Any health care provider, whether a person or institution, who reports trauma information to the registry in good faith and without malice, in accordance with the requirements of this section, shall have immunity from any liability, civil or criminal, which might otherwise be incurred or imposed in an action resulting from such report. Notwithstanding K.S.A. 60-427 and amendments thereto, there shall be no privilege preventing the furnishing of such information or reports as required by this act by any health care provider. Nothing in this section shall be construed to apply to the unauthorized disclosure of confidential or privileged information when such disclosure is due to gross negligence or willful misconduct.

(d) The information obtained by the trauma registry, including discussions and activities using the information generated from the trauma registry, shall be confidential and shall not be disclosed or made public, upon subpoena or otherwise, except such information may be disclosed if:

(1) No person can be identified in the information to be disclosed and the disclosure is for statistical purposes;

(2) all persons who are identifiable in the information to be disclosed consent in writing to its disclosure;

(3) the disclosure is necessary, and only to the extent necessary, to protect the public health, ~~and does not identify providers or facilities; or and to support quality improvement as defined in K.S.A. 65-4914 and 65-4915, and amendments thereto; or~~

(4) the information to be disclosed is required in a court proceeding involving child abuse and the information is disclosed *in camera*.

New Sec. 3. (a) Beginning with the first academic term commencing after July 1, 2007, and for each academic term thereafter, each college and university shall have in place policies and procedures requiring that all incoming students residing in student housing be vaccinated for meningitis. Such policies shall include appropriate waiver procedures for those who refuse to take the vaccine.

(b) Nothing in this section shall require or be construed to require any college or university to provide or to pay for any vaccination against meningitis.

Sec. 4. K.S.A. 2005 Supp. 75-5665 and 75-5666 are hereby repealed.

Sec. 5. This act shall take effect and be in force from and after its publication in the statute book.

Approved April 14, 2006.
