



98TH GENERAL ASSEMBLY

State of Illinois

2013 and 2014

HB2774

Introduced 2/21/2013, by Rep. Donald L. Moffitt

SYNOPSIS AS INTRODUCED:

210 ILCS 50/3.100

Amends the Emergency Medical Services (EMS) Systems Act. In provisions concerning Level II Trauma Center minimum standards, provides that the Department of Public Health shall grant a permanent waiver of the requirement that an emergency medicine physician working at a Level II Trauma Center be board-certified in emergency medicine if it determines that certain criteria are met, including: (1) the trauma center is located in a county that (i) has a population of less than 75,000 and (ii) is a physician shortage area designated by the Director of Public Health or a health professional shortage area designated by the Secretary of Health and Human Services; (2) the trauma center demonstrates that it has tried, without success, to recruit a board-certified emergency medicine physician; and (3) the physician for whom the waiver is sought has at least 5 years of experience working as an emergency medicine physician in a trauma center setting and his or her education, training, and experience are equal to that of a physician who is board-certified in emergency medicine. Provides that the Department's authority to grant a waiver expires 5 years after the effective date of the amendatory Act. Effective immediately.

LRB098 08925 DRJ 39057 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Emergency Medical Services (EMS) Systems Act
5 is amended by changing Section 3.100 as follows:

6 (210 ILCS 50/3.100)

7 Sec. 3.100. Level II Trauma Center Minimum Standards. The
8 Department shall establish, through rules adopted pursuant to
9 this Act, standards for Level II Trauma Centers which shall
10 include, but need not be limited to:

11 (a) The designation by the trauma center of a Trauma Center
12 Medical Director and specification of his qualifications. †

13 (b) The types of surgical services the trauma center must
14 have available for trauma patients. The Department shall not
15 require the availability of all surgical services required of
16 Level I Trauma Centers. †

17 (c) The types of nonsurgical services the trauma center
18 must have available for trauma patients. †

19 (d) The numbers and qualifications of emergency medical
20 personnel, taking into consideration the more limited trauma
21 services available in a Level II Trauma Center.

22 The Department shall grant a permanent waiver of any
23 requirement that an emergency medicine physician engaged in

1 providing trauma services at a Level II Trauma Center be
2 board-certified in emergency medicine if it determines that all
3 of the following criteria are met:

4 (1) The trauma center is located in a county that (i)
5 has a population of less than 75,000 and (ii) is a
6 physician shortage area designated by the Director or a
7 health professional shortage area designated by the
8 Secretary of Health and Human Services.

9 (2) The trauma center demonstrates that it has tried,
10 without success, to recruit a board-certified emergency
11 medicine physician.

12 (3) The physician for whom the waiver is sought has at
13 least 5 years of experience working as an emergency
14 medicine physician in a trauma center setting and his or
15 her education, training, and experience are equal to that
16 of a physician who is board-certified in emergency
17 medicine.

18 (4) Granting the waiver would be in the best interest
19 of the community served by the trauma center.

20 The Department's authority to grant a waiver under the
21 preceding paragraph expires 5 years after the effective date of
22 this amendatory Act of the 98th General Assembly. †

23 (e) The types of equipment that must be available for
24 trauma patients. †

25 (f) Requiring the trauma center to have a written agreement
26 with a Level I Trauma Center serving the EMS Region outlining

1 their respective responsibilities in providing trauma
2 services, executed within a reasonable time designated by the
3 Department, unless the requirement for a Level I Trauma Center
4 to serve that EMS Region has been waived by the Department. †

5 (g) Requiring the trauma center to be affiliated with an
6 EMS System. †

7 (h) Requiring the trauma center to have a communications
8 system that is fully integrated with the Level I Trauma Centers
9 and the EMS Systems with which it is affiliated. †

10 (i) The types of data the trauma center must collect and
11 submit to the Department relating to the trauma services it
12 provides. Such data may include information on post-trauma care
13 directly related to the initial traumatic injury provided to
14 trauma patients until their discharge from the facility and
15 information on discharge plans. †

16 (j) Requiring the trauma center to have helicopter landing
17 capabilities approved by appropriate State and federal
18 authorities, if the trauma center is located within a
19 municipality having a population of less than two million
20 people.

21 (Source: P.A. 89-177, eff. 7-19-95.)

22 Section 99. Effective date. This Act takes effect upon
23 becoming law.