# **HOUSE BILL 1439**

J3, R2, R3 4lr2592

By: Delegates Shetty, Barnes, Hinebaugh, and D. Jones

Introduced and read first time: February 9, 2024

Assigned to: Appropriations

#### A BILL ENTITLED

## 1 AN ACT concerning

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## Public Health - Funding for Trauma Centers and Services

- 3 FOR the purpose of altering the purpose, contents, and sources of the funding of the 4 Maryland Trauma Physician Services Fund; altering the entities to which money 5 from the Maryland Trauma Physician Services Fund is transferred; altering the 6 methodology used to determine eligibility for disbursements from the Maryland 7 Trauma Physician Services Fund; altering the amount of the motor vehicle 8 registration surcharge and the amount of the surcharge that is required to be paid 9 into the Maryland Trauma Physician Services Fund; increasing the fines for certain violations of the Maryland Vehicle Law related to driving while impaired; altering 10 11 the authorized uses of the Maryland Emergency Medical System Operations Fund; 12 and generally relating to the funding for trauma centers and services.
- 13 BY repealing and reenacting, without amendments,
- 14 Article Health General
- 15 Section 19–101
- 16 Annotated Code of Maryland
- 17 (2023 Replacement Volume)
- 18 BY repealing and reenacting, with amendments,
- 19 Article Health General
- 20 Section 19–130
- 21 Annotated Code of Maryland
- 22 (2023 Replacement Volume)
- 23 BY repealing and reenacting, with amendments,
- 24 Article State Finance and Procurement
- 25 Section 7–118(a)
- 26 Annotated Code of Maryland
- 27 (2021 Replacement Volume and 2023 Supplement)



| 1<br>2<br>3<br>4<br>5 | BY repealing and reenacting, with amendments, Article – Transportation Section 13–954(b), 13–955, and 21–902(a) through (d) Annotated Code of Maryland (2020 Replacement Volume and 2023 Supplement) |  |  |
|-----------------------|--|--|--|
| 6<br>7                | SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:   |  |  |
| 8                     | Article - Health - General   |  |  |
| 9                     | 19–101.  |  |  |
| 10                    | In this subtitle, "Commission" means the Maryland Health Care Commission.  |  |  |
| 11                    | 19–130.  |  |  |
| 12                    | (a) (1) In this section the following words have the meanings indicated.   |  |  |
| 13                    | (2) "Fund" means the Maryland Trauma Physician Services Fund.  |  |  |
| 14                    | (3) "Maryland Trauma Specialty Referral Centers" means:  |  |  |
| 15                    | (i) The Johns Hopkins Health System Burn Program;  |  |  |
| 16<br>17              |  |  |  |
| 18                    | (iii) The Curtis National Hand Center at Union Memorial Hospital.  |  |  |
| 19<br>20<br>21<br>22  | (4) "REASONABLE COMPENSATION EQUIVALENT" MEANS THE LIMITATION ON THE COST ESTABLISHED BY THE CENTERS FOR MEDICARE AND MEDICAID SERVICES THAT A PROVIDER MAY CLAIM FOR COMPENSATION OF SERVICES.      |  |  |
| 23<br>24<br>25        | rehabilitation hospital as described in § 19–307 of this title that is affiliated with a trauma  |  |  |
| 26<br>27              | [(5)] (6) (i) "Trauma center" means a facility designated by the Maryland Institute for Emergency Medical Services Systems as:   |  |  |
| 28                    | 1. The State primary adult resource center;  |  |  |
| 29                    | 2. A Level I trauma center;  |  |  |

| 1                        | 3. A Level II trauma center;   |  |  |
|--------------------------|--|--|--|
| 2                        | 4. A Level III trauma center;  |  |  |
| 3                        | 5. A pediatric trauma center; or   |  |  |
| 4                        | 6. The Maryland Trauma Specialty Referral Centers.   |  |  |
| 5<br>6<br>7              | (ii) "Trauma center" includes an out-of-state pediatric trauma center that has entered into an agreement with the Maryland Institute for Emergency Medical Services Systems.   |  |  |
| 8<br>9<br>10<br>11<br>12 | PRACTITIONER LICENSED UNDER THE HEALTH OCCUPATIONS ARTICLE WHO PROVIDES CARE IN A TRAUMA CENTER OR IN A REHABILITATION HOSPITAL TO TRAUMA PATIENTS ON THE STATE TRAUMA REGISTRY AS DEFINED BY THE  |  |  |
| 13<br>14<br>15           | [(6)] (8) "Trauma physician" means a physician who provides care in a trauma center or in a rehabilitation hospital to trauma patients on the State trauma registry as defined by the Maryland Institute for Emergency Medical Services Systems. |  |  |
| 16<br>17<br>18           | physician OR A TRAUMA HEALTH CARE PRACTITIONER to a trauma patient on the State  |  |  |
| 19                       | (i) Has no health insurance, including Medicare Part B coverage;   |  |  |
| 20                       | (ii) Is not eligible for medical assistance coverage; and  |  |  |
| 21<br>22<br>23<br>24     | PRACTITIONER for care provided by the trauma physician OR TRAUMA HEALTH CARE PRACTITIONER, after documented attempts by the trauma physician OR TRAUMA   |  |  |
| 25                       | (b) (1) There is a Maryland Trauma Physician Services Fund.  |  |  |
| 26                       | (2) The purpose of the Fund is to subsidize the documented costs:  |  |  |
| 27<br>28<br>29           | (i) Of uncompensated care incurred by a trauma physician <b>OR A TRAUMA HEALTH CARE PRACTITIONER</b> in providing trauma care to a trauma patient on the State trauma registry;  |  |  |
| 30                       | (ii) Of undercompensated care incurred by a trauma physician <b>OR A</b>   |  |  |

TRAUMA HEALTH CARE PRACTITIONER in providing trauma care to an enrollee of the

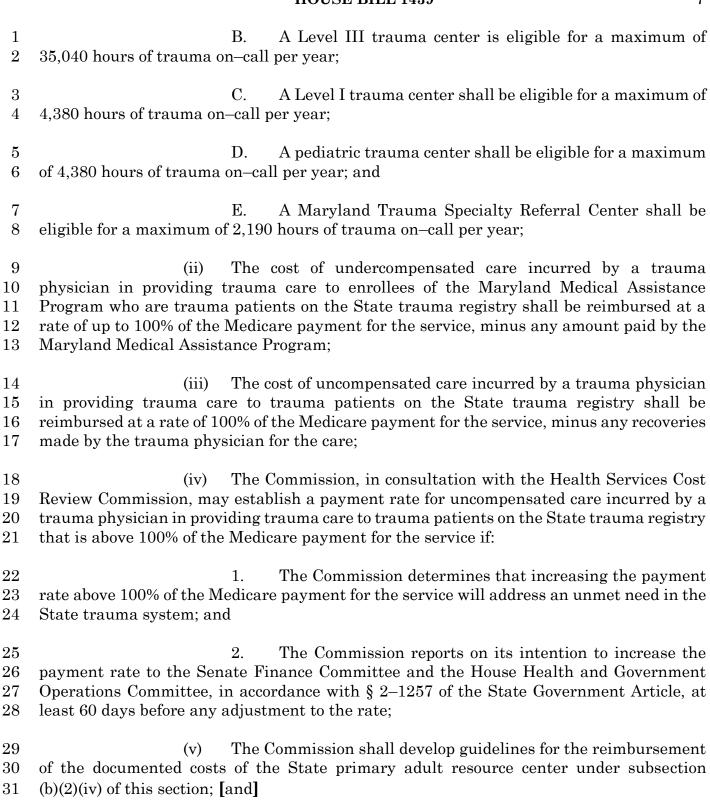
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- 1 Maryland Medical Assistance Program who is a trauma patient on the State trauma 2 registry;
- 3 (iii) Incurred by a trauma center to maintain trauma physicians 4 on-call as required by the Maryland Institute for Emergency Medical Services Systems;
- 5 (iv) Incurred by the State primary adult resource center to maintain 6 trauma surgeons, orthopedic surgeons, neurosurgeons, and anesthesiologists on—call and 7 on standby as required by the Maryland Institute for Emergency Medical Services Systems; 8 and
- 9 (v) Incurred by the Commission and the Health Services Cost 10 Review Commission to administer the Fund and audit reimbursement requests to assure 11 appropriate payments are made from the Fund.
- 12 (3) The Commission and the Health Services Cost Review Commission 13 shall administer the Fund.
- 14 (4) The Fund is a special, nonlapsing fund that is not subject to § 7–302 of the State Finance and Procurement Article.
- 16 (5) Interest on and other income from the Fund shall be separately accounted for and credited to the Fund, and are not subject to § 6–226(a) of the State Finance and Procurement Article.
- 19 (c) The Fund consists of [motor]:
- 20 **(1) MOTOR** vehicle registration surcharges paid into the Fund in accordance with § 13–954(b)(2) of the Transportation Article;
- 22 (2) AT LEAST 10% OF THE FINES COLLECTED UNDER § 21–902(A)(1), 23 (B)(2), (C)(2), AND (D)(1) OF THE TRANSPORTATION ARTICLE; AND
- 24 (3) ANY OTHER MONEY TRANSFERRED FROM THE GENERAL FUND OF 25 THE STATE.
- (d) (1) Disbursements from the Fund shall be made in accordance with a methodology established jointly by the Commission and the Health Services Cost Review Commission to calculate costs incurred by trauma physicians and trauma centers that are eligible to receive reimbursement under subsection (b) of this section.
- 30 (2) The Fund shall transfer to [the]:
- 31 **(I) THE** Maryland Department of Health an amount sufficient to 32 fully cover the State's share of expenditures for the costs of undercompensated care

- 1 incurred by a trauma physician in providing trauma care to an enrollee of the Maryland 2 Medical Assistance Program who is a trauma patient on the State trauma registry; AND 3 THE STATE PRIMARY ADULT RESOURCE CENTER AT LEAST 4 \$10,000,000 FROM THE REMAINING BALANCE IN THE FUND EACH FISCAL YEAR. 5 (3) The methodology developed under paragraph (1) of this subsection 6 shall: 7 (i) Take into account: 8 1. The amount of uncompensated care provided by trauma 9 physicians; 10 2. The amount of undercompensated care attributable to the treatment of Medicaid enrollees in trauma centers: 11 12 3. The cost of maintaining trauma physicians on-call; 13 4. The number of patients served by trauma physicians in 14 trauma centers; 15 The number of Maryland residents served by trauma 5. 16 physicians in trauma centers; and 17 6. The extent to which trauma-related costs are otherwise subsidized by hospitals, the federal government, and other sources; and 18 19 Include an incentive to encourage hospitals to continue to 20 subsidize trauma-related costs not otherwise included in hospital rates. 21The methodology developed under paragraph (1) of this subsection shall 22use the following parameters to determine the amount of reimbursement made to trauma physicians and trauma centers from the Fund: 2324The cost incurred by a Level II trauma center to maintain 25 trauma surgeons, orthopedic surgeons, and neurosurgeons on-call shall be reimbursed: 26 At a rate of up to [30%] **35**% of the reasonable [cost 27 equivalents COMPENSATION EQUIVALENT hourly rate for the specialty, inflated to the current year by the physician compensation component of the Medicare economic index as 28 29 designated by the Centers for Medicare and Medicaid Services; and
- B. For the minimum number of trauma physicians required to be on-call, as specified by the Maryland Institute for Emergency Medical Services Systems in its criteria for Level II trauma centers;

| 1<br>2<br>3          | 2. The cost incurred by a Level III trauma center to maintain trauma surgeons, orthopedic surgeons, neurosurgeons, and anesthesiologists on—call shall be reimbursed:   |
|----------------------|---|
| 4<br>5<br>6<br>7     | A. At a rate of up to [35%] <b>40%</b> of the reasonable [cost equivalents] <b>COMPENSATION EQUIVALENT</b> hourly rate for the specialty, inflated to the current year by the physician compensation component of the Medicare economic index as designated by the Centers for Medicare and Medicaid Services; and  |
| 8<br>9<br>10         | B. For the minimum number of trauma physicians required to be on–call, as specified by the Maryland Institute for Emergency Medical Services Systems in its criteria for Level III trauma centers;  |
| 11<br>12<br>13<br>14 | 3. The cost incurred by a Level I trauma center or pediatric trauma center to maintain trauma surgeons, orthopedic surgeons, and neurosurgeons on-call when a post-graduate resident is attending in the trauma center shall be reimbursed:   |
| 15<br>16<br>17<br>18 | A. At a rate of up to [30%] <b>35</b> % of the reasonable [cost equivalents] <b>COMPENSATION EQUIVALENT</b> hourly rate for the specialty, inflated to the current year by the physician compensation component of the Medicare economic index as designated by the Centers for Medicare and Medicaid Services; and |
| 19<br>20<br>21<br>22 | B. When a post-graduate resident is [permitted] AUTHORIZED to be in the trauma center, as specified by the Maryland Institute for Emergency Medical Services Systems in its criteria for Level I trauma centers or pediatric trauma centers;  |
| 23<br>24<br>25       | 4. The cost incurred by a Maryland Trauma Specialty Referral Center to maintain trauma surgeons on–call in the specialty of the Center when a post–graduate resident is attending in the Center shall be reimbursed:  |
| 26<br>27<br>28<br>29 | A. At a rate of up to [30%] <b>35</b> % of the reasonable [cost equivalents] <b>COMPENSATION EQUIVALENT</b> hourly rate for the specialty, inflated to the current year by the physician compensation component of the Medicare economic index as designated by the Centers for Medicare and Medicaid Services; and |
| 30<br>31<br>32<br>33 | B. When a post–graduate resident is [permitted] AUTHORIZED to be in the Center, as specified by the Maryland Institute for Emergency Medical Services Systems in its criteria for a Maryland Trauma Specialty Referral Center; and  |

 $\,$  5. A. A Level II trauma center is eligible for a maximum  $35\,$  of [24,500] **26,280** hours of trauma on–call per year;



32 (VI) THE COMMISSION, IN CONSULTATION WITH THE HEALTH
33 SERVICES COST REVIEW COMMISSION, MAY CHANGE THE PERCENTAGE OF THE
34 REASONABLE COMPENSATION EQUIVALENT PAID TO TRAUMA HOSPITALS IF:

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|          | 8 HOUSE BILL 1439  |  |  |  |
|----------|--|--|--|--|
| 1        | 1. The Commission determines that the current  |  |  |  |
| 2        | PERCENTAGE OF REASONABLE COMPENSATION EQUIVALENT INFLATED TO THE   |  |  |  |
| 3        | CURRENT YEAR BY THE PHYSICIAN COMPENSATION COMPONENT OF THE MEDICARE   |  |  |  |
| 4        | FEE SCHEDULE COVERS LESS THAN $50\%$ OF ALLOWABLE ON–CALL COSTS; AND   |  |  |  |
| 5        | 2. The Commission reports on its intention to  |  |  |  |
| 6        | CHANGE THE PERCENTAGE OF REASONABLE COMPENSATION EQUIVALENT TO BE  |  |  |  |
| 7        | PAID FOR ON-CALL COSTS TO THE SENATE FINANCE COMMITTEE AND THE HOUSE   |  |  |  |
| 8        | HEALTH AND GOVERNMENT OPERATIONS COMMITTEE, IN ACCORDANCE WITH §   |  |  |  |
| 9        | 2–1257 OF THE STATE GOVERNMENT ARTICLE, AT LEAST 60 DAYS BEFORE ANY  |  |  |  |
| 10       | ADJUSTMENT TO THE ALLOWABLE HOURS;   |  |  |  |
| 11       | (VII) THE COMMISSION, IN CONSULTATION WITH THE HEALTH  |  |  |  |
| 12       | SERVICES COST REVIEW COMMISSION, MAY CHANGE THE NUMBER OF ALLOWABLE  |  |  |  |
| 13       | HOURS OF TRAUMA ON-CALL EACH YEAR IF THE COMMISSION REPORTS ON ITS   |  |  |  |
| 14       | INTENTION TO CHANGE THE NUMBER OF ALLOWABLE HOURS TO THE SENATE  |  |  |  |
| 15       | FINANCE COMMITTEE AND THE HOUSE HEALTH AND GOVERNMENT OPERATIONS   |  |  |  |
| 16       | COMMITTEE, IN ACCORDANCE WITH § 2-1257 OF THE STATE GOVERNMENT   |  |  |  |
| 17       | ARTICLE, AT LEAST 60 DAYS BEFORE ANY ADJUSTMENT TO THE ALLOWABLE HOURS;                                      |  |  |  |
| 18       | (VIII) THE COMMISSION MAY MODIFY THE PERCENTAGE PAID   |  |  |  |
| 19       | FOR ON-CALL OUT OF THE MAXIMUM NUMBER OF HOURS ALLOWED FOR ON-CALL   |  |  |  |
| 20       | CARE NOT MORE THAN ONCE EACH YEAR; AND   |  |  |  |
| 21<br>22 | [(vi)] (IX) The total reimbursement to emergency physicians from the Fund may not exceed \$300,000 annually. |  |  |  |
| 23       | (5) In order to receive reimbursement, a trauma physician OR A TRAUMA  |  |  |  |
| 24       | HEALTH CARE PRACTITIONER in the case of costs of uncompensated care under                                    |  |  |  |
| 25       | subsection (b)(2)(i) of this section, or a trauma center in the case of on-call costs under                  |  |  |  |
| 26       | subsection (b)(2)(iii) of this section, shall apply to the Fund on a form and in a manner                    |  |  |  |
| 27       | approved by the Commission and the Health Services Cost Review Commission.                                   |  |  |  |
| 28       | (6) (i) The Commission and the Health Services Cost Review   |  |  |  |
| 29       | Commission shall adopt regulations that specify the information that trauma physicians,                      |  |  |  |
| 30       | TRAUMA HEALTH CARE PRACTITIONERS, and trauma centers must submit to receive                                  |  |  |  |
| 31       | money from the Fund.   |  |  |  |
|          |  |  |  |  |

32 (ii) The information required shall include:

1. The name and federal tax identification number of the trauma physician rendering the service;

2. The date of the service;

| 1                    | 3.   | Appropriate codes describing the service;   |  |
|----------------------|--|---|--|
| 2                    | 2. 4.  | Any amount recovered for the service rendered;  |  |
| 3                    | 5.   | The name of the trauma patient;   |  |
| 4                    | 6.   | The patient's trauma registry number; and   |  |
| 5<br>6               |  | Any other information the Commission and the Health ion consider necessary to disburse money from the Fund.   |  |
| 7<br>8<br>9          | (iii) It is the intent of the General Assembly that trauma physicians and trauma centers shall cooperate with the Commission and the Health Services Cost Review Commission by providing information required under this paragraph in a timely and complete manner.  |   |  |
| 11<br>12<br>13       | (e) (1) Except as provided in paragraph (2) of this subsection and notwithstanding any other provision of law, expenditures from the Fund for costs incurred in any fiscal year may not exceed revenues of the Fund.   |   |  |
| 14<br>15<br>16<br>17 | (2) (i) The Commission, in consultation with the Health Services Cost Review Commission and the Maryland Institute for Emergency Medical Services Systems, shall develop a process for the award of grants to <b>LEVEL I</b> , Level II, and Level III trauma centers [in the State to be used for equipment primarily used] in the delivery of trauma care. |   |  |
| 19<br>20             | * *  | The Commission shall issue grants under this paragraph o the Fund from prior fiscal years.  |  |
| 21<br>22<br>23       | 2 in a fiscal year may not exceed  | The total amount of grants awarded under this paragraph 10% of the balance remaining in the Fund at the end of the the fiscal year in which grants are awarded. |  |
| 24<br>25             | ` '  | process developed by the Commission for the award of grants ude:  |  |
| 26<br>27             |  | Grant applications and review and selection criteria for  |  |
| 28<br>29             |  | Review by the Commission, if necessary, for any project thresholds; and   |  |
| 30<br>31             |  | Any other procedure determined necessary by the   |  |
| 32                   | 2 (iv) Befor   | re awarding grants under this subsection in a fiscal year, the  |  |

Commission shall report to the Senate Finance Committee and the House Health and

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(VI)

Government Operations Committee, in accordance with § 2–1257 of the State Government 1 2Article, on the process that the Commission has developed for awarding grants in that fiscal 3 vear. (f) On or before November 1 of each year, the Commission and the Health 4 Services Cost Review Commission shall report to the General Assembly, in accordance with 5 § 2–1257 of the State Government Article, on: 6 7 The amount of money in the Fund on the last day of the previous fiscal (1) 8 year; 9 (2)The amount of money applied for by trauma physicians, TRAUMA **HEALTH CARE PRACTITIONERS**, and trauma centers during the previous fiscal year; 10 11 (3) The amount of money distributed in the form of trauma physician, 12 TRAUMA HEALTH CARE PRACTITIONER, and trauma center reimbursements during the 13 previous fiscal year; 14 **(4)** Any recommendations for altering the manner in which trauma 15 physicians, TRAUMA HEALTH CARE PRACTITIONERS, and trauma centers are 16 reimbursed from the Fund: 17 (5)The costs incurred in administering the Fund during the previous fiscal year; [and] 18 19 The amount that each hospital that participates in the Maryland (6) 20 trauma system and that has a trauma center contributes toward the subsidization of trauma-related costs for its trauma center; AND 21 22HEALTH **(7)** THE **AMOUNT** THE **SERVICES** COST REVIEW 23**COMMISSION ALLOWED:** 24(I)IN HOSPITAL RATES FOR TRAUMA STANDBY; 25IN ALLOWABLE TRAUMA CENTER COSTS FOR REIMBURSING (II)26 THE TRAUMA DIRECTOR AND TRAUMA STAFF; 27 (III) FOR MARYLAND INSTITUTE MAINTAINING FOR EMERGENCY MEDICAL SERVICES SYSTEMS TRAUMA PROTOCOLS; 28 29 (IV) FOR MAINTAINING SPECIALIZED TRAUMA STAFF; 30 FOR PROCURING SPECIALIZED TRAUMA EQUIPMENT; AND (V)

FOR PROVIDING TRAUMA EDUCATION AND TRAINING.

#### **Article - State Finance and Procurement** 1 2 7–118. 3 In its annual submission of the proposed budget, the Department of Budget (a) 4 and Management shall provide, for informational purposes, a budget presentation that includes a description of the proposed expenditures under the Maryland Emergency 5 6 Medical System Operations Fund for the: 7 (1)Maryland Institute for Emergency Medical Services Systems: R Adams Cowley Shock Trauma Center; 8 (2)9 (3) Maryland Fire and Rescue Institute; AND 10 **(4)** Aviation Division of the Special Operations Bureau, Department of 11 State Police; and 12 grants under the Senator William H. Amoss Fire, Rescue, and (5)13 Ambulance Fund. 14 Article - Transportation 15 13 - 954.16 (b) (1) In addition to the registration fee otherwise required by this title, the 17 owner of any motor vehicle registered under this title shall pay a surcharge of [\$17.00] 18 \$24.50 per year for each motor vehicle registered. 19 [\$2.50] **\$10** of the surcharge collected under paragraph (1) of this 20subsection shall be paid into the Maryland Trauma Physician Services Fund established 21under § 19–130 of the Health – General Article. 22 13-955. 23 (a) In this section, "Fund" means the Maryland Emergency Medical System 24Operations Fund. 25 (b) There is a Maryland Emergency Medical System Operations Fund. (1)

28 (3) The Fund is a continuing, nonlapsing fund which is not subject to § 7–302 of the State Finance and Procurement Article.

all transactions and performing year—end reconciliation.

The Comptroller shall administer the Fund, including accounting for

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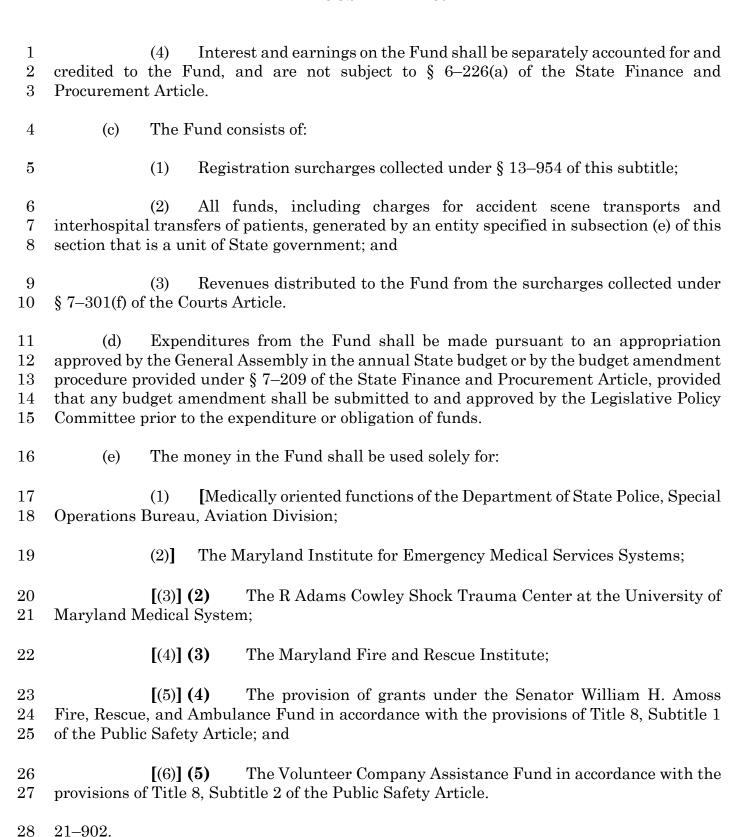
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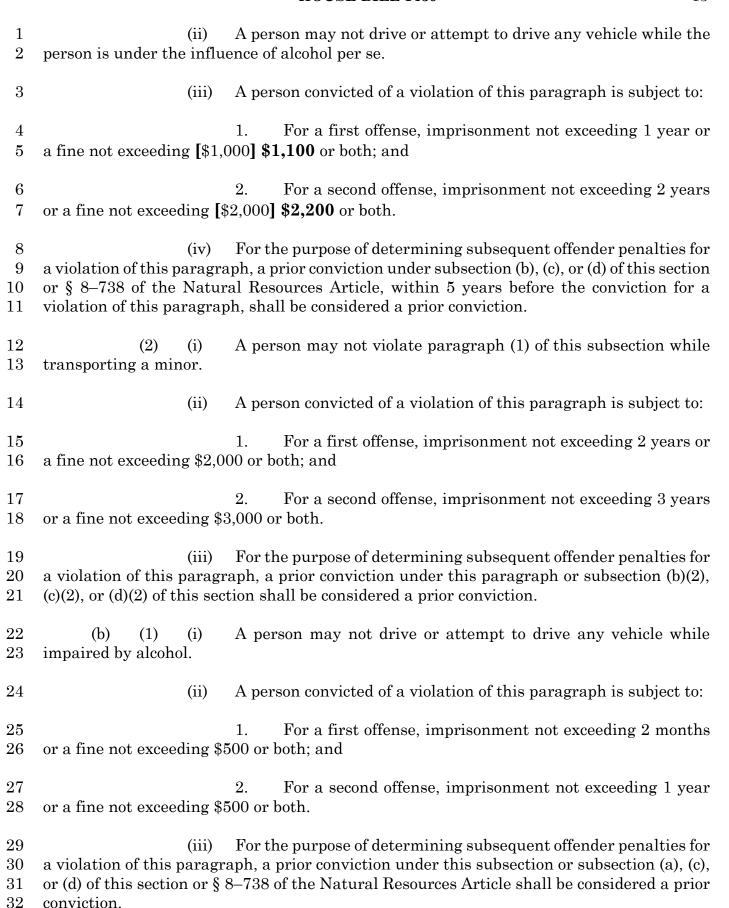
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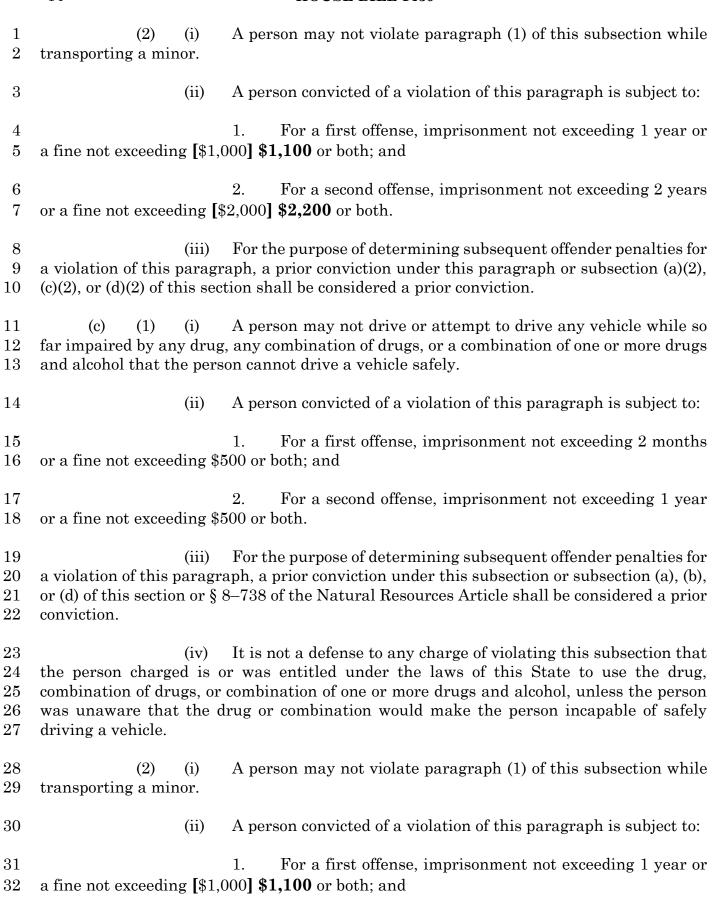
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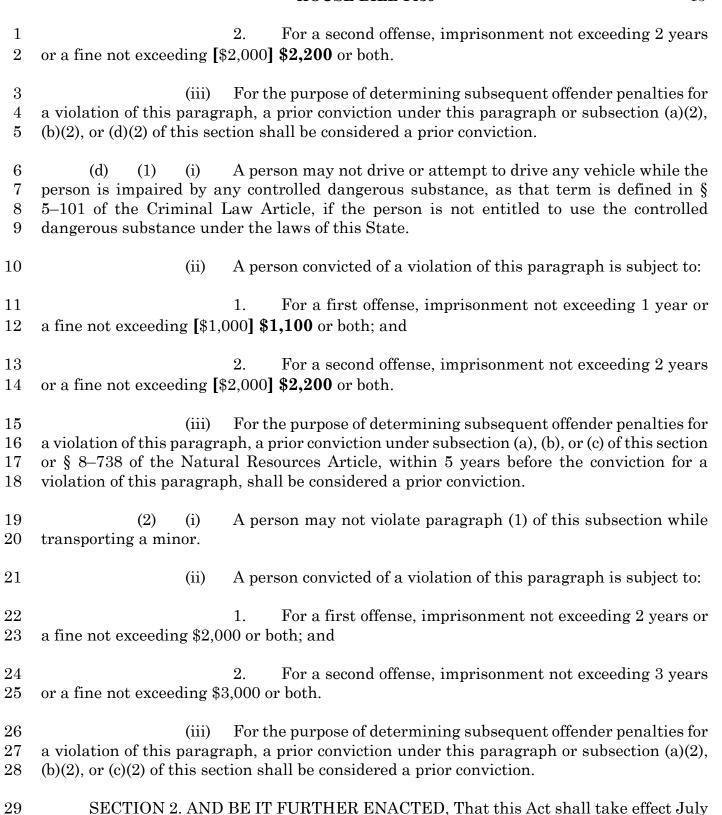
(i)



A person may not drive or attempt to drive any vehicle while







1, 2024.