

SENATE
STATE OF MINNESOTA
EIGHTY-EIGHTH SESSION

S.F. No. 1929

(SENATE AUTHORS: HAYDEN, Lourey, Rest and Koenen)

DATE	D-PG	OFFICIAL STATUS
02/25/2014	5850	Introduction and first reading Referred to Health, Human Services and Housing

A bill for an act

1.1 relating to health; establishing a covered driver assessment; depositing revenues
 1.2 into a new account in the state government special revenue fund; providing
 1.3 funding to trauma hospitals and other related services; proposing coding for new
 1.4 law in Minnesota Statutes, chapters 16A; 144; 297I.
 1.5

1.6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.7 Section 1. **[16A.728] TRAUMA HOSPITAL AND EMS ACCOUNT.**

1.8 A trauma hospital and emergency medical service (EMS) account is created in the
 1.9 state government special revenue fund. The commissioner shall deposit to the credit of the
 1.10 account all money made available to the account. Money in the account shall be transferred
 1.11 annually to the commissioner of health for the purposes specified in section 144.6081.

1.12 **EFFECTIVE DATE.** This section is effective July 1, 2014.

1.13 Sec. 2. **[144.6081] LEVEL OF READINESS TRAUMA HOSPITAL AND EMS**
 1.14 **INITIATIVES.**

1.15 Subdivision 1. **Distribution.** (a) The commissioner, through the state Trauma
 1.16 Advisory Council established under section 144.608, shall manage and distribute the
 1.17 annual transfer from the trauma hospital and emergency medical services (EMS) account
 1.18 under section 16A.728. The annual transfer shall be distributed as provided by this
 1.19 section, beginning with the 2015 calendar year.

1.20 (b) Prior to distributing funds under this section, the commissioner may use up to
 1.21 \$..... of each annual transfer from the trauma hospital and EMS account for costs related
 1.22 to operation of the overall statewide trauma system.

2.1 Subd. 2. **Payments to trauma hospitals.** The commissioner shall distribute
2.2 75 percent of the annual transfer as annual payments to trauma hospitals located in
2.3 Minnesota. Trauma hospitals shall use these payments to maintain a level of readiness
2.4 for trauma and emergency medical service (EMS) care, including trauma and EMS
2.5 staffing costs, education, equipment, and EMS registry costs. The commissioner shall
2.6 distribute payments to trauma hospitals in proportion to their share of trauma patients with
2.7 a calculated injury severity score (ISS) of greater than eight, for the calendar year prior
2.8 to the calendar year during which the annual payment is made, and calculated using an
2.9 established and recognized injury severity score model recommended by the state Trauma
2.10 Advisory Council. Trauma patients and the corresponding ISS must be calculated and
2.11 submitted by each trauma hospital to the commissioner through the statewide trauma
2.12 registry established under section 144.6071.

2.13 Subd. 3. **Air and ground ambulance services.** The commissioner shall distribute
2.14 15 percent of the annual transfer as annual payments to emergency ambulance services
2.15 licensed under chapter 144E. The transfer must be divided equally between air medical
2.16 and ground emergency ambulance services. For each type of ambulance service, the
2.17 annual payment must be distributed to ambulance services in proportion to their share
2.18 of trauma patients transported with a Glasgow coma scale score of seven or below,
2.19 for the calendar year prior to the calendar year for which the annual payment is made.
2.20 Trauma patients and their corresponding Glasgow coma scale scores must be reported
2.21 electronically by each ambulance service to the Emergency Medical Services Regulatory
2.22 Board according to section 144E.123, subdivision 1. The Emergency Medical Services
2.23 Regulatory Board must provide these data elements to the commissioner at intervals
2.24 necessary to ensure timely distribution of funds.

2.25 Subd. 4. **Trauma coordination and training.** (a) The commissioner shall distribute
2.26 five percent of the annual transfer as annual payments to regional trauma advisory councils
2.27 (RTACs) recognized by the state Trauma Advisory Council. The commissioner shall
2.28 distribute the allocation equally among the eight regional EMS regions.

2.29 (b) The commissioner shall distribute five percent of the annual transfer as an annual
2.30 payment to the comprehensive advanced life support (CALS) training program to be
2.31 used for trauma coordination and training.

2.32 **EFFECTIVE DATE.** This section is effective January 1, 2015.

2.33 Sec. 3. **[297L.07] COVERED DRIVER ASSESSMENT; TRAUMA HOSPITAL**
2.34 **AND EMS ACCOUNT.**

3.1 Subdivision 1. **Assessment on policies.** (a) Each licensed insurer engaged in writing
3.2 insurance shall pay a covered driver assessment to the commissioner of commerce equal to
3.3 \$10 per vehicle for every 12 months of coverage, on each policy issued or renewed during
3.4 a calendar year for automobile insurance as defined in section 65B.14, subdivision 2.

3.5 (b) The covered driver assessment amount collected under this subdivision must
3.6 not be considered a premium for any other purpose. The amount of the covered driver
3.7 assessment must be stated separately on either a billing or policy declaration or document
3.8 containing similar information sent to an insured.

3.9 Subd. 2. **Deposit of revenues.** The commissioner of commerce shall deposit
3.10 revenues from the covered driver assessment into the trauma hospital and EMS account
3.11 established under section 16A.728.

3.12 **EFFECTIVE DATE.** This section is effective July 1, 2014, and applies to policies
3.13 offered, issued, or renewed on or after that date.