SLS 22RS-717 ORIGINAL

2022 Regular Session

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SENATE BILL NO. 411

BY SENATORS WHITE AND BARROW

HEALTH CARE. Provides relative to the Louisiana Emergency Response Network. (8/1/22)

AN ACT

2 To amend and reenact R.S. 40:2841, 2842(3), 2843(A), 2844(B)(3), (17), (20), and (23), (C), and (D), and 2845(A)(1) and (2)(b) and (C)(1), relative to the Louisiana Emergency 3 4 Response Network; to provide for legislative purpose; to provide for definitions; to 5 provide for the Louisiana Emergency Response Network; to provide for the 6 governing board; to provide for an annual report; and to provide for related matters. 7 Be it enacted by the Legislature of Louisiana: 8 Section 1. R.S. 40:2841, 2842(3), 2843(A), 2844(B)(3), (17), (20), and (23), (C), and 9 (D), and 2845(A)(1) and (2)(b) and (C)(1) are hereby amended and reenacted to read as 10 follows: 11 §2841. Legislative purpose The legislature declares that in order to safeguard the public health, safety, 12 13 and welfare of the people of this state against unnecessary trauma and time-sensitive related deaths and incidents of morbidity due to trauma, stroke, and ST-segment 14 myocardial infarction (STEMI), a comprehensive, coordinated statewide system 15 16 for access to regional trauma-patient trauma, stroke, and STEMI patient care

throughout the state be established. This system shall be compatible and interfaced

1	with the Governor's Office of Homeland Security and Emergency Preparedness.
2	§2842. Definitions
3	As used in this Chapter the following terms shall have the following
4	meanings:
5	* * *
6	(3) "Louisiana Emergency Response Network" (LERN) means the statewide
7	system of regional trauma-patient trauma, stroke, and STEMI patient care that is
8	an organized, seamless, coordinated effort among each component of care including
9	pre-hospital, acute care, post-acute care, rehabilitation, and injury prevention in a
10	defined geographic area which provides access to local health systems for time-
11	sensitive patient care treatment and is integrated with local public health systems and
12	the Governor's Office of Homeland Security and Emergency Preparedness.
13	* * *
14	§2843. Louisiana Emergency Response Network; creation; domicile
15	A. The Louisiana Emergency Response Network is hereby created as a
16	network which, through its board, shall direct the efforts to decrease trauma-related
17	trauma, stroke, and STEMI-related deaths and incidents of morbidity and
18	mortality due to trauma, stroke, and STEMI in Louisiana. By maximizing the
19	integrated delivery of optimal resources for patients who ultimately need acute
20	trauma, stroke, and STEMI care, the network shall address the daily demands of
21	trauma, stroke, and STEMI care and form the basis for disaster preparedness. The
22	resources required for each component of the system shall be clearly identified,
23	deployed, and studied to ensure that all injured patients gain access to the appropriate
24	level of care in a timely, coordinated, and cost-effective manner.
25	* * *
26	§2844. Governing board; membership, appointment, terms, compensation, vacancies
27	* * *
28	B. The network shall be governed by a board of twenty-nine members which
29	shall include:

1	* * *
2	(3) One member from nominees submitted by the Metropolitan Hospital
3	Council of New Orleans Louisiana Hospital Association to represent hospitals with
4	one hundred beds or more.
5	* * *
6	(17) One 211 member of the Louisiana Alliance of Information and Referral
7	Systems. One member who is an EMS practitioner from a list of nominees
8	submitted by the Louisiana Association of Nationally Registered Emergency
9	Medical Technicians (LANREMT).
10	* * *
11	(20) One member of the Louisiana Hospital Association rehabilitation
12	constituency group to represent hospitals providing rehabilitation services.
13	* * *
14	(23) One medical director of an emergency medical services agency from
15	nominees submitted by the Louisiana Association of EMS Physicians Chapter of
16	the National Association of EMS Physicians (NAEMSP).
17	* * *
18	C.(1) The Except as provided in Paragraphs (B)(15) and (16) of this
19	Section, members listed in Paragraphs (B)(1) through (14) and (17) through (24) of
20	this Section shall be appointed by the governor from a list of qualified candidates
21	nominated by the respective organizations. Each organization shall submit a list
22	of at least four nominees to the governor.
23	(2) The organizations listed in Paragraphs (B)(1) through (14) and (17)
24	through (24) of this Section shall each submit a list of at least four nominees for the
25	respective board position to the governor.
26	(3) The members listed in Paragraphs (B)(15) and (16) of this Section shall
27	be appointed by the speaker of the House of Representatives and the president of the
28	Senate, respectively.

29

D. All members of the board shall serve terms of three years, except for

1	initial terms beginning on the effective date of this Chapter, and determined by lot
2	at the first meeting of the board as follows:
3	(1) Six shall serve until July 1, 2005.
4	(2) Seven shall serve until July 1, 2006.
5	(3) Seven shall serve until July 1, 2007.
6	* * *
7	§2845. Board; functions, powers, and duties
8	A. The board shall:
9	(1) Establish and maintain a statewide trauma system that shall include a
10	centralized communication center for resource coordination of medical capabilities
11	for participating trauma centers, as defined by R.S. 40:2171, participating stroke
12	and STEMI centers, as defined by rule, and emergency medical services.
13	(2) Provide for implementation of a network and plan designed to achieve:
14	* * *
15	(b) A reduction in the number and severity of disabilities caused by trauma,
16	stroke, and STEMI.
17	* * *
18	C.(1) The board shall submit an annual written report to the Senate and
19	House committees on health and welfare at least thirty days prior to each regular
20	session. The report shall include a summary of the data relevant to the goals set forth
21	in Paragraph (A)(2) of this Section and all other information relevant to
22	trauma-patient trauma, stroke, and STEMI patient care and its delivery in
23	Louisiana through the network.
24	* * *
	The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Brandi Cannon.

DIGEST 2022 Regular Session

SB 411 Original

White

<u>Present law</u> provides for the Louisiana Emergency Response Network (LERN), a comprehensive, coordinated statewide system for access to regional trauma-patient care throughout the state. <u>Present law</u> further provides for the system to be compatible and

Page 4 of 5

interfaced with the Governor's Office of Homeland Security and Emergency Preparedness. Proposed law retains present law and expands the scope to include patient care for strokes and ST-segment myocardial infarction (STEMI).

<u>Present law</u> provides for a governing board of 29 members and provides for the qualifications of the membership. <u>Proposed law</u> changes the nominating entity for the member representing hospitals with 100 beds or more <u>from</u> the Metropolitan Hospital Council of New Orleans <u>to</u> the La. Hospital Association. <u>Proposed law</u> further removes the 211 member of the La. Alliance of Information and Referral Systems and adds one EMS practitioner from a list of nominees submitted by the La. Association of Nationally Registered Emergency Medical Technician.

<u>Present law</u> provides that all members of the board shall serve terms of three years except for the terms of the initial board members. <u>Proposed law</u> retains <u>present law</u> and repeals outdated language relative to the initial terms.

<u>Present law</u> provides for the establishment and maintenance of a statewide trauma system, which shall include a centralized communication center for resource coordination of medical capabilities for participating trauma centers and emergency medical services. <u>Proposed law</u> retains <u>present law</u> and expands the scope to include participating stroke and STEMI centers.

<u>Present law</u> provides for an annual written report to the Senate and House committees on health and welfare at least 30 days prior to each regular session which shall include a summary of the data relevant to the goals of <u>present law</u> and all other information relevant to trauma-patient care and its delivery in this state through the network. <u>Proposed law</u> retains <u>present law</u> and expands the scope to include data regarding patient care for strokes and STEMI.

(Amends R.S. 40:2841, 2842(3), 2843(A), 2844(B)(3), (17), (20), and (23), (C), and (D), and 2845(A)(1) and (2)(b) and (C)(1))