

**FISCAL NOTE  
PUBLIC COST**

- I. Department Title: Missouri Department of Health and Senior Services  
Division Title: Division of Regulation and Licensure  
Chapter Title: Chapter 40- Comprehensive Emergency Medical Services System**

<b>Rule Number and Name:</b>	<b>19 CSR 30-40.792 Adult Trauma and Pediatric Field Triage and Transport Protocol</b>
<b>Type of Rulemaking:</b>	<b>Proposed Rule</b>

**II. SUMMARY OF FISCAL IMPACT**

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
<b>ground service licensees (public)</b>	<b>\$0 to \$250,000 for the first year and annually thereafter.</b>
	<b>Total= \$0 to \$250,000 for the first year and annually thereafter.</b>

**III. WORKSHEET**

\$0-\$250,000- range for the first year and annually thereafter.

**IV. ASSUMPTIONS**

There are approximately 220 ground services licensed in Missouri with 201 of these ground services being public and twenty-nine (29) of these services being private. There are approximately twelve (12) air services licensed in Missouri with all of these air services being private. Ground and air services have been transporting to trauma centers without a specific transport protocol for many years as section 190.243, RSMo required this and most medical directors included this transport into the services' medical protocols.

Additionally, several emergency medical service ("EMS") regions have had community plans in place, which were approved by the department, regarding where to transport trauma patients in their EMS regions. There are currently three EMS regions (Kansas City, St. Louis and Central Missouri) with department approved community plans. In these regions, EMS can follow the department approved community plans pursuant to this proposed rule and do not have to follow this proposed rule. Therefore, there should not be much of a cost for these regions because most if not all of the services will be utilizing the department approved plan for trauma transport in their regions not the department trauma transport protocol.

The department is providing this fiscal note as there may be differences between the criteria that medical directors currently rely on in their medical protocols to determine what is a trauma and what medical criteria will now be required through this proposed rule. The EMS services can still use their local and regional process, but there is a potential for there to be more trauma transport if the medical criteria in this proposed rule is different from what the services currently have in their medical protocols.

EMS services get paid for their ambulance calls through patients by the patients' insurance/Medicaid/Medicare. However, there still may be costs associated with staffing/ambulances related to this proposed rule for those three (3) EMS regions (Northwest, Southwest and Southeast) that will follow this proposed rule or any other ground or air service that does not want to follow their community plans in the EMS regions that have community plans already approved by the department.

It is difficult to know what this cost may be at this time. Therefore, the department is projecting a range from \$0 to \$250,000 annually based on any trauma transports that will result based on the differences in the new trauma criteria in this proposed rule that will prompt transport to a trauma center different than the medical directors' medical protocols. Additionally, any payment the service receives for the transport will subtracted from the cost to the EMS service. Thus, the net result after payment to the respective EMS services will be a range from \$0 to \$250,000 for publicly owned ambulance services.