

1 10A NCAC 13P .0905 is proposed for amendment as follows:

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3 **10A NCAC 13P .0905 RENEWAL DESIGNATION PROCESS**

4 (a) Hospitals may utilize one of two options to achieve Trauma Center renewal:

- 5 (1) undergo a site visit conducted by OEMS to obtain a four-year renewal designation; or
 6 (2) undergo a verification visit by the ACS, in conjunction with the OEMS, to obtain a three-year
 7 renewal designation.

8 (b) For hospitals choosing Subparagraph (a)(1) of this Rule:

- 9 (1) prior to the end of the designation period, the OEMS shall forward to the hospital an RFP for
 10 completion. The hospital shall, within 10 business days of receipt of the RFP, define for OEMS the
 11 Trauma Center's trauma primary catchment area.
 12 (2) hospitals shall complete and submit an electronic copy of the RFP to the OEMS and the specified
 13 site surveyors at least 30 days prior to the site visit. The RFP shall include information that supports
 14 compliance with the criteria contained in Rule .0901 of this Section as it relates to the Trauma
 15 Center's level of designation.
 16 (3) all criteria defined in Rule .0901 of this Section, as it relates to the Trauma Center's level of
 17 designation, shall be met for renewal designation.
 18 (4) a site visit shall be conducted within 120 days prior to the end of the designation period. The hospital
 19 and the OEMS shall agree on the date of the site visit.
 20 (5) the composition of a Level I or II site survey team shall be the same as that specified in ~~Rule .0904(l)~~
 21 Rule .0904 of this Section.
 22 (6) the composition of a Level III site survey team shall be the same as that specified in ~~Rule .0904(l)~~
 23 Rule .0904 of this Section.
 24 (7) on the day of the site visit, the hospital shall make available all requested patient medical charts.
 25 (8) the primary reviewer of the site review team shall give a verbal post-conference report representing
 26 a consensus of the site review team. The primary reviewer shall complete and submit to the OEMS
 27 a written consensus report within 30 days of the site visit.
 28 (9) the report of the site survey team and a staff recommendation shall be reviewed by the NC
 29 Emergency Medical Services Advisory Council at its next regularly scheduled meeting following
 30 the site visit. Based upon the site visit report and the staff recommendation, the NC Emergency
 31 Medical Services Advisory Council shall recommend to the OEMS that the request for Trauma
 32 Center renewal be:
 33 (A) approved;
 34 (B) approved with a contingency(ies) due to a deficiency(ies) requiring a focused review;
 35 (C) approved with a contingency(ies) not due to a deficiency(ies) requiring a consultative visit;
 36 or
 37 (D) denied.

1 (10) hospitals with a deficiency(ies) shall have up to 10 business days prior to the NC Emergency
 2 Medical Services Advisory Council meeting to provide documentation to demonstrate compliance.
 3 If the hospital has a deficiency that cannot be corrected in this period prior to the NC Emergency
 4 Medical Services Advisory Council meeting, the hospital shall be given 12 months by the OEMS to
 5 demonstrate compliance and undergo a focused review that may require an additional site visit. The
 6 need for an additional site visit is on a case-by-case basis based on the type of deficiency. The
 7 hospital shall retain its Trauma Center designation during the focused review period. If compliance
 8 is demonstrated within the prescribed time period, the hospital shall be granted its designation for
 9 the four-year period from the previous designation's expiration date. If compliance is not
 10 demonstrated within the 12 month time period, the Trauma Center designation shall not be renewed.
 11 To become redesignated, the hospital shall submit an updated RFP and follow the initial applicant
 12 process outlined in Rule .0904 of this Section.

13 (11) the final decision regarding trauma center renewal shall be rendered by the OEMS.

14 (12) the OEMS shall notify the hospital in writing of the NC Emergency Medical Services Advisory
 15 Council's and OEMS' final recommendation within 30 days of the NC Emergency Medical Services
 16 Advisory Council meeting.

17 (13) hospitals with a deficiency(ies) shall submit an action plan to the OEMS to address the
 18 deficiency(ies) within 10 business days following receipt of the written final decision on the trauma
 19 recommendations.

20 (c) For hospitals choosing Subparagraph (a)(2) of this Rule:

21 (1) at least six months prior to the end of the Trauma Center's designation period, the trauma center
 22 shall notify the OEMS of its intent to undergo an ACS verification visit. It shall simultaneously
 23 define in writing to the OEMS its trauma primary catchment area. Trauma Centers choosing this
 24 option shall then comply with all the ACS' verification procedures, as well as any additional state
 25 criteria as defined in Rule .0901 of this Section, that apply to their level of designation.

26 (2) when completing the ACS' documentation for verification, the Trauma Center shall ensure access
 27 to the ACS on-line PRQ (pre-review questionnaire) to OEMS. The Trauma Center shall
 28 simultaneously complete any documents supplied by OEMS and forward these to the OEMS.

29 (3) the Trauma Center shall make sure the site visit is scheduled to ensure that the ACS' final written
 30 report, accompanying medical record reviews and cover letter are received by OEMS at least 30
 31 days prior to a regularly scheduled NC Emergency Medical Services Advisory Council meeting to
 32 ensure that the Trauma Center's state designation period does not terminate without consideration
 33 by the NC Emergency Medical Services Advisory Council.

34 (4) any in-state review for a hospital choosing Subparagraph (a)(2) of this Rule, except for the OEMS
 35 staff, shall be from outside the local or adjacent RAC in which the hospital is located.

36 (5) the composition of a Level I, II, or III site survey team for hospitals choosing Subparagraph (a)(2)
 37 of this Rule shall be as follows:

- 1 (A) ~~one out-of-state~~ trauma surgeon who is a Fellow of the ACS, experienced as a site surveyor,
2 who shall be the primary reviewer;
- 3 (B) ~~one out-of-state~~ emergency physician who works in a designated trauma center, is a
4 member of the American College of Emergency Physicians or the American Academy of
5 Emergency Medicine, and is boarded in emergency medicine by the American Board of
6 Emergency Physicians or the American Osteopathic Board of Emergency Medicine;
- 7 (C) ~~one out-of-state~~ trauma program ~~manager with an equivalent license from another state;~~
8 manager; and
- 9 (D) OEMS staff.
- 10 (6) the date, time, and all proposed members of the site visit team shall be submitted to the OEMS for
11 review at least 45 days prior to the site visit. The OEMS shall approve the site visit schedule if the
12 schedule does not conflict with the ability of attendance by required OEMS staff. The OEMS shall
13 approve the proposed site visit team members if the OEMS determines there is no conflict of interest,
14 such as previous employment, by any site visit team member associated with the site visit.
- 15 (7) all state Trauma Center criteria shall be met as defined in Rule .0901 of this Section for renewal of
16 state designation. ACS' verification is not required for state designation. ACS' verification does not
17 ensure a state designation.
- 18 (8) The ACS final written report and supporting documentation described in Subparagraph (c)(4) of this
19 Rule shall be used to generate a report following the post conference meeting for presentation to the
20 NC Emergency Medical Services Advisory Council for renewal designation.
- 21 (9) the final written report issued by the ACS' verification review committee, the accompanying medical
22 record reviews from which all identifiers shall be removed and cover letter shall be forwarded to
23 OEMS within 10 business days of its receipt by the Trauma Center seeking renewal.
- 24 (10) the OEMS shall present its summary of findings report to the NC Emergency Medical Services
25 Advisory Council at its next regularly scheduled meeting. The NC Emergency Medical Services
26 Advisory Council shall recommend to the Chief of the OEMS that the request for Trauma Center
27 renewal be:
- 28 (A) approved;
- 29 (B) approved with a contingency(ies) due to a deficiency(ies) requiring a focused review;
- 30 (C) approved with a contingency(ies) not due to a deficiency(ies); or
- 31 (D) denied.
- 32 (11) the OEMS shall send the hospital written notice of the NC Emergency Medical Services Advisory
33 Council's and OEMS' final recommendation within 30 days of the NC Emergency Medical Services
34 Advisory Council meeting.
- 35 (12) the final decision regarding trauma center designation shall be rendered by the OEMS.
- 36 (13) hospitals with contingencies as the result of a deficiency(ies), as determined by OEMS, shall have
37 up to 10 business days prior to the NC Emergency Medical Services Advisory Council meeting to

1 provide documentation to demonstrate compliance. If the hospital has a deficiency that cannot be
2 corrected in this time period, the hospital, may undergo a focused review to be conducted by the
3 OEMS whereby the Trauma Center shall be given 12 months by the OEMS to demonstrate
4 compliance. Satisfaction of contingency(ies) may require an additional site visit. The need for an
5 additional site visit is on a case-by-case basis based on the type of deficiency. The hospital shall
6 retain its Trauma Center designation during the focused review period. If compliance is
7 demonstrated within the prescribed time period, the hospital shall be granted its designation for the
8 three-year period from the previous designation's expiration date. If compliance is not demonstrated
9 within the 12 month time period, the Trauma Center designation shall not be renewed. To become
10 redesignated, the hospital shall submit a new RFP and follow the initial applicant process outlined
11 in Rule .0904 of this Section.

12 (14) hospitals with a deficiency(ies) shall submit an action plan to the OEMS to address the
13 deficiency(ies) within 10 business days following receipt of the written final decision on the trauma
14 recommendations.

15 (d) If a Trauma Center currently using the ACS' verification process chooses not to renew using this process, it must
16 notify the OEMS at least six months prior to the end of its state trauma center designation period of its intention to
17 exercise the option in Subparagraph (a)(1) of this Rule. Upon notification, the OEMS shall extend the designation for
18 one additional year to ensure consistency with hospitals using Subparagraph (a)(1) of this Rule.

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20 *History Note: Authority G.S. 131E-162; 143-508(d)(2);*
21 *Temporary Adoption Eff. January 1, 2002;*
22 *Eff. April 1, 2003;*
23 *Amended Eff. April 1, 2009; January 1, 2009; January 1, 2004;*
24 *Readoption Eff. January 1, 2017;*
25 *Amended Eff. April 1, 2024; July 1, 2021.*