

IN THE SENATE

SENATE BILL NO. 1329

BY HEALTH AND WELFARE COMMITTEE

AN ACT

1 RELATING TO TIME SENSITIVE EMERGENCIES; AMENDING CHAPTER 10, TITLE 56,  
2 IDAHO CODE, BY THE ADDITION OF A NEW SECTION 56-1024, IDAHO CODE, TO  
3 STATE LEGISLATIVE INTENT; AMENDING CHAPTER 10, TITLE 56, IDAHO CODE,  
4 BY THE ADDITION OF A NEW SECTION 56-1025, IDAHO CODE, TO DEFINE TERMS;  
5 AMENDING CHAPTER 10, TITLE 56, IDAHO CODE, BY THE ADDITION OF A NEW SEC-  
6 TION 56-1026, IDAHO CODE, TO CREATE THE IDAHO TIME SENSITIVE EMERGENCY  
7 SYSTEM; AMENDING CHAPTER 10, TITLE 56, IDAHO CODE, BY THE ADDITION OF  
8 A NEW SECTION 56-1027, IDAHO CODE, TO CREATE THE IDAHO TIME SENSITIVE  
9 EMERGENCY SYSTEM COUNCIL AND TO PROVIDE FOR MEMBERSHIP OF THE COUNCIL;  
10 AMENDING CHAPTER 10, TITLE 56, IDAHO CODE, BY THE ADDITION OF A NEW  
11 SECTION 56-1028, IDAHO CODE, TO PROVIDE FOR DUTIES OF THE COUNCIL AND  
12 TO PROVIDE RULEMAKING AUTHORITY; AMENDING CHAPTER 10, TITLE 56, IDAHO  
13 CODE, BY THE ADDITION OF A NEW SECTION 56-1029, IDAHO CODE, TO PROVIDE  
14 FOR THE DESIGNATION OF TRAUMA, STROKE AND HEART ATTACK CENTERS AND TO  
15 PROVIDE CRITERIA FOR DESIGNATION; AMENDING CHAPTER 10, TITLE 56, IDAHO  
16 CODE, BY THE ADDITION OF A NEW SECTION 56-1030, IDAHO CODE, TO CREATE  
17 REGIONAL TIME SENSITIVE EMERGENCY COMMITTEES AND TO PROVIDE FOR MEMBER-  
18 SHIP AND DUTIES OF THE COMMITTEES; AMENDING THE HEADING FOR CHAPTER 20,  
19 TITLE 57, IDAHO CODE, TO REVISE TERMINOLOGY; AMENDING SECTION 57-2001,  
20 IDAHO CODE, TO REVISE TERMINOLOGY AND TO REVISE PROVISIONS RELATING TO  
21 PURPOSES OF THE TIME SENSITIVE EMERGENCY REGISTRY; AMENDING SECTION  
22 57-2002, IDAHO CODE, TO ADD AND REVISE DEFINITIONS AND TO MAKE TECHNICAL  
23 CORRECTIONS; AMENDING SECTION 57-2003, IDAHO CODE, TO REVISE TERMI-  
24 NOLOGY; AMENDING SECTION 57-2004, IDAHO CODE, TO REVISE TERMINOLOGY;  
25 AMENDING SECTION 57-2005, IDAHO CODE, TO REVISE TERMINOLOGY AND TO MAKE  
26 A TECHNICAL CORRECTION; AMENDING SECTION 57-2006, IDAHO CODE, TO REVISE  
27 TERMINOLOGY AND TO MAKE TECHNICAL CORRECTIONS; AND AMENDING SECTION  
28 57-2007, IDAHO CODE, TO REVISE TERMINOLOGY.  
29

30 Be It Enacted by the Legislature of the State of Idaho:

31 SECTION 1. That Chapter 10, Title 56, Idaho Code, be, and the same is  
32 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
33 ignated as Section 56-1024, Idaho Code, and to read as follows:

34 56-1024. IDAHO TIME SENSITIVE EMERGENCY SYSTEM OF CARE -- STATEMENT  
35 OF INTENT. Time sensitive emergencies, specifically blunt trauma injuries,  
36 strokes and heart attacks, were three (3) of the top five (5) causes of deaths  
37 in Idaho in 2011. Numerous studies throughout the United States have demon-  
38 strated that organized systems of care improve patient outcomes, thus reduc-  
39 ing the frequency of preventable death and improving the functional status  
40 of the patient. The institute of medicine's report "Hospital-Based Emer-  
41 gency Care: At the Breaking Point" recommended improving the care of criti-  
42 cal illness through regionalization by transporting critically ill patients

1 to designated specialized care centers when appropriate. Early treatment  
 2 and transfer when necessary will save the lives of Idahoans stricken with  
 3 these emergency conditions. Trauma systems of care are well understood as  
 4 they have existed in many other states for decades. It is the intent of this  
 5 legislation to create an integrated and responsive system of care for Idaho  
 6 citizens. The trauma component will serve as the initial framework in a de-  
 7 liberate, incremental implementation approach for a comprehensive system of  
 8 care for time sensitive emergencies in Idaho. The time sensitive emergency  
 9 system in Idaho is intended to be voluntary and inclusive. The system will be  
 10 designed such that all facilities, and in particular critical access hospi-  
 11 tals, have the opportunity to participate.

12 SECTION 2. That Chapter 10, Title 56, Idaho Code, be, and the same is  
 13 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
 14 ignated as Section 56-1025, Idaho Code, and to read as follows:

15 56-1025. DEFINITIONS. As used in sections 56-1024 through 56-1030,  
 16 Idaho Code:

- 17 (1) "EMS agency" means any organization licensed by the EMS bureau that  
 18 operates an air medical service, ambulance service or nontransport service.  
 19 (2) "EMS bureau" means the bureau of emergency medical services of the  
 20 department of health and welfare.  
 21 (3) "Council" means the Idaho time sensitive emergency system council.  
 22 (4) "TSE" means time sensitive emergency, specifically trauma, stroke  
 23 and heart attack.

24 SECTION 3. That Chapter 10, Title 56, Idaho Code, be, and the same is  
 25 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
 26 ignated as Section 56-1026, Idaho Code, and to read as follows:

27 56-1026. IDAHO TIME SENSITIVE EMERGENCY SYSTEM -- CREATION. There is  
 28 hereby created a time sensitive emergency system within the department of  
 29 health and welfare.

30 SECTION 4. That Chapter 10, Title 56, Idaho Code, be, and the same is  
 31 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
 32 ignated as Section 56-1027, Idaho Code, and to read as follows:

33 56-1027. IDAHO TIME SENSITIVE EMERGENCY SYSTEM COUNCIL -- CREATION --  
 34 COMPOSITION. (1) There is hereby created the Idaho time sensitive emergency  
 35 system council hereinafter known as the "council." Council members shall be  
 36 appointed by the governor with the approval of the board of health and wel-  
 37 fare. Council members shall be selected to assure equitable geographic, ru-  
 38 ral and clinical specialty representation.

39 (2) The membership of the council shall include the following:

- 40 (a) One (1) representative from a facility that either holds or is seek-  
 41 ing designation as an Idaho trauma center. The representative may be  
 42 the medical director, the coordinator or the program manager responsi-  
 43 ble for the respective facility's trauma program;  
 44 (b) One (1) representative from a facility that either holds or is seek-  
 45 ing designation as an Idaho stroke facility. The representative may be

1 the medical director, the coordinator or the program manager responsi-  
2 ble for the respective facility's stroke program;

3 (c) One (1) representative from a facility that either holds or is seek-  
4 ing designation as an Idaho heart attack center. The representative may  
5 be the medical director, the coordinator or the program manager respon-  
6 sible for the respective facility's heart attack program;

7 (d) One (1) representative from an EMS agency licensed by the depart-  
8 ment that serves a primarily urban response area;

9 (e) One (1) representative from an EMS agency licensed by the depart-  
10 ment that serves a primarily rural response area;

11 (f) One (1) representative from an air medical EMS agency licensed by  
12 the department;

13 (g) One (1) administrator of an Idaho hospital that either holds or is  
14 seeking Idaho trauma, stroke or heart attack designation;

15 (h) One (1) chief executive officer or administrator of an Idaho criti-  
16 cal access hospital that either holds or is seeking Idaho trauma, stroke  
17 or heart attack designation;

18 (i) One (1) licensed health care provider who routinely works in the  
19 emergency department of a hospital that serves a primarily urban area  
20 that either holds or is seeking trauma, stroke or heart attack designa-  
21 tion;

22 (j) One (1) licensed health care provider who routinely works in the  
23 emergency department of a hospital that serves a primarily rural area  
24 that either holds or is seeking trauma, stroke or heart attack designa-  
25 tion; and

26 (k) One (1) Idaho citizen with an interest in furthering the quality of  
27 trauma, stroke and heart attack care in Idaho.

28 (3) The chair of each regional TSE committee shall be added as a voting  
29 member of the council when the regional TSE committee is implemented and the  
30 chair is selected.

31 (4) Members of the council shall serve four (4) year terms with half of  
32 the members initially appointed, as determined by lot, serving two (2) year  
33 terms. If a vacancy occurs, the governor shall appoint a replacement to fill  
34 the unexpired term. Members may be reappointed and may be removed for cause  
35 by the governor.

36 (5) The governor shall appoint a chair who shall serve a term of two (2)  
37 years. The council may elect other officers as it may deem necessary and ap-  
38 propriate. The council shall meet at least semiannually and at the call of  
39 the chair.

40 SECTION 5. That Chapter 10, Title 56, Idaho Code, be, and the same is  
41 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
42 ignated as Section 56-1028, Idaho Code, and to read as follows:

43 56-1028. IDAHO TIME SENSITIVE EMERGENCY SYSTEM COUNCIL -- DUTIES --  
44 RULEMAKING. The duties of the council shall be as follows:

45 (1) Develop, implement and monitor a statewide system that includes  
46 trauma, stroke and heart attack facilities;

47 (2) Provide oversight of the system, assuring adherence to standards  
48 established by the council;

1 (3) Establish substate system regions that provide more effective ac-  
2 cess to the system. In the designation of these regions, specific considera-  
3 tion shall be given to geography and patient referral patterns for the facil-  
4 ities and agencies included therein;

5 (4) Establish a regional TSE committee in each substate region;

6 (5) Develop the standards and criteria each facility is required to  
7 meet concerning personnel, equipment, resources, data collection and orga-  
8 nizational capabilities;

9 (6) Develop procedures for and the duration of the designation of a  
10 trauma, stroke or heart attack facility, including application procedures,  
11 verification procedures, complaint investigation and emergency suspension  
12 or revocation of designation;

13 (7) Develop operational procedures for the regional TSE committees;

14 (8) Facilitate the implementation of nationally accepted standards  
15 throughout the system;

16 (9) Set procedures for the acquisition of data needed to successfully  
17 manage the system;

18 (10) Promulgate rules to fulfill the purpose of this act; and

19 (11) Collaborate and cooperate with the EMS bureau, the EMS physician  
20 commission, local governments, local EMS agencies and associations to ad-  
21 dress recruitment and retention concerns of local EMS providers.

22 SECTION 6. That Chapter 10, Title 56, Idaho Code, be, and the same is  
23 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
24 ignated as Section 56-1029, Idaho Code, and to read as follows:

25 56-1029. IDAHO TRAUMA, STROKE AND HEART ATTACK CENTERS -- DESIGNA-  
26 TION. (1) The council shall designate a hospital as a trauma, stroke or heart  
27 attack center when such hospital, upon proper application and verification,  
28 has been found by the council to meet the applicable level of trauma, stroke  
29 or heart attack center criteria as established by the council.

30 (2) In developing trauma, stroke and heart attack center designation  
31 criteria, the council shall use, as is practicable, appropriate peer-re-  
32 viewed or evidence-based research including, but not limited to, the most  
33 recent guidelines of the American college of surgeons committee on trauma,  
34 American college of cardiology and American heart association for heart at-  
35 tack centers, or the joint commission's primary stroke center certification  
36 program criteria for stroke centers, or primary and comprehensive stroke  
37 center recommendations as published by the American stroke association or  
38 other nationally recognized authoritative standards.

39 (3) Participation criteria shall be published in rules promulgated by  
40 the council.

41 (4) The council shall conduct a periodic verification review of every  
42 trauma, heart attack and stroke facility. Verification reviews shall be co-  
43 ordinated for the different types of centers to the extent practicable with  
44 hospital resources. No person who has a substantial conflict of interest  
45 in the operation of any trauma, stroke and heart attack center under review  
46 shall participate in the verification review of the facility.

47 (5) The council shall coordinate an on-site review as necessary to as-  
48 sure that a hospital meets the criteria for the desired designation. The  
49 council may waive an on-site review when a hospital has been verified by a

1 nationally recognized accrediting body to meet or exceed standards estab-  
2 lished by the council.

3 (6) The council may deny, place on probation, suspend or revoke any des-  
4 ignation when it has reasonable cause to believe that there has been mis-  
5 representation or falsification of information or a substantial failure to  
6 comply with the criteria for designation promulgated by the council. If the  
7 council has reasonable cause to believe that a hospital is not in compliance  
8 with such provisions, it may require the facility to submit additional docu-  
9 mentation or undergo additional site reviews to verify compliance.

10 (7) No hospital may hold itself out to the public as an Idaho trauma cen-  
11 ter, stroke or heart attack facility unless it is designated as such by the  
12 council.

13 (8) A hospital aggrieved because of the council's decision shall be en-  
14 titled to appeal to the council in the manner prescribed by the council and  
15 shall be afforded reasonable notice and opportunity for a fair hearing.

16 SECTION 7. That Chapter 10, Title 56, Idaho Code, be, and the same is  
17 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
18 ignated as Section 56-1030, Idaho Code, and to read as follows:

19 56-1030. REGIONAL TIME SENSITIVE EMERGENCY COMMITTEES -- MEMBERSHIP  
20 -- DUTIES. (1) Pursuant to section 56-1028(4), Idaho Code, each substate re-  
21 gion designated by the council shall have a time sensitive emergency commit-  
22 tee.

23 (2) Membership of each regional TSE committee shall be based on the  
24 needs of the region and can be modified as the regional TSE committee deter-  
25 mines, but each regional committee shall be initially comprised as follows:

26 (a) Each facility that is designated or is seeking designation by the  
27 council as a trauma center, stroke facility or heart attack facility may  
28 appoint one (1) representative for each of the designations that the fa-  
29 cility holds or is seeking to hold to the regional committee for the re-  
30 gion in which the facility is located;

31 (b) Each air medical EMS agency that provides patient transport within  
32 the region may appoint one (1) representative;

33 (c) Each hospital that either holds or is seeking Idaho trauma, stroke  
34 or heart attack designation may appoint the hospital administrator;

35 (d) Each EMS agency with a response area in the region may appoint one  
36 (1) representative; and

37 (e) The regional committee shall include a pediatrician or an expert in  
38 children's trauma.

39 (3) Members of a regional committee shall elect a chair to serve a term  
40 of two (2) years.

41 (4) The duties of each regional committee shall be as follows:

42 (a) Implement care guidelines, policies, procedures and protocols for  
43 the regional TSE system;

44 (b) Conduct regional quality improvement, including receipt of reports  
45 prepared by the council containing trauma, stroke and heart attack data  
46 and making recommendations to facilities within the region based upon  
47 those reports;

48 (c) Advise the council concerning the statewide system;

1 (d) Establish trauma, stroke and heart attack education and prevention  
2 programs;

3 (e) Provide advice concerning trauma, stroke and heart attack care to  
4 health care facilities and other providers of health care;

5 (f) Perform other duties required by Idaho code and council rules; and

6 (g) Conduct other activities needed to ensure optimal delivery of  
7 trauma, stroke and heart attack care services within the region.

8 SECTION 8. That the Heading for Chapter 20, Title 57, Idaho Code, be,  
9 and the same is hereby amended to read as follows:

10 CHAPTER 20

11 TRAUMA TIME SENSITIVE EMERGENCY (TSE) REGISTRY

12 SECTION 9. That Section 57-2001, Idaho Code, be, and the same is hereby  
13 amended to read as follows:

14 57-2001. PURPOSE OF THE REGISTRY. (1) The specific issues to be iden-  
15 tified and evaluated through the ~~trauma~~ TSE registry are:

16 (a) ~~Injury~~ Trauma, stroke and heart attack TSE surveillance;

17 (b) Geographic patterns of trauma incidence;

18 (c) Types of ~~injuries~~ TSEs treated in hospitals in Idaho;

19 (d) Areas or regions of the state where improvements in the emergency  
20 medical system may be needed;

21 (e) Public education and prevention needs and efforts; and

22 (f) Other factors to consider in recommending, designing or implement-  
23 ing a statewide ~~trauma~~ TSE system.

24 (2) The data collected by the ~~trauma~~ TSE registry shall be of such a na-  
25 ture as to allow the department to identify at least the following:

26 (a) Lack of aAccess to care and improvement of the availability and de-  
27 livery of prehospital, hospital and post-acute TSE care;

28 (b) Performance of the out-of-hospital and hospital emergency medical  
29 systems;

30 (c) Costs of ~~trauma~~ TSE care; and

31 (d) Outcomes of persons who are victims of ~~trauma~~ TSEs.

32 (3) The department shall evaluate the data collected, as well as data  
33 collected from other relevant sources, and, beginning one (1) year after the  
34 effective date of this chapter, shall prepare an annual report. The data  
35 shall be used to regularly produce and disseminate aggregated and de-iden-  
36 tified analytical reports and for recommending benchmark quality measures  
37 and outcomes and needed educational resources to the TSE system of care state  
38 board.

39 SECTION 10. That Section 57-2002, Idaho Code, be, and the same is hereby  
40 amended to read as follows:

41 57-2002. ~~TRAUMA~~ TSE REGISTRY -- DEFINITIONS. When used in this chap-  
42 ter:

43 (1) "Confidential information" means information which may identify a  
44 patient, health care facility or health care practitioner.

1 (2) "Contractor" means that individual, partnership, corporation or  
2 other entity performing ~~trauma~~ TSE registry services under a contractual  
3 agreement with the department.

4 (3) "De-identified information" means records and information con-  
5 tained in the ~~trauma~~ TSE registry, including compilations and analyses  
6 thereof, ~~which does that do~~ not contain information which might identify a  
7 patient, health care facility or health care practitioner.

8 (4) "Department" means the bureau of emergency medical services and  
9 preparedness of the Idaho department of health and welfare.

10 (5) "Heart attack" means STEMI, which is a common name for ST-elevation  
11 myocardial infarction, a more precise definition for a type of heart attack  
12 that is caused by a prolonged period of blocked blood supply that affects a  
13 large area of the heart and has a substantial risk of death and disability  
14 calling for a quick response.

15 (6) "Stroke" means an interruption of blood flow to the brain causing  
16 paralysis, slurred speech and/or altered brain function usually caused by a  
17 blockage in a blood vessel that carries blood to the brain (ischemic stroke)  
18 or by a blood vessel bursting (hemorrhagic).

19 (7) "Trauma" is the result of an act or event that damages, harms or  
20 hurts a human being resulting in intentional or unintentional damage to the  
21 body resulting from acute exposure to mechanical, thermal, electrical, or  
22 chemical energy or from the absence of such essentials as heat or oxygen.

23 (8) "TSE" means a time sensitive emergency, specifically trauma, heart  
24 attack or stroke.

25 (69) "Trauma TSE registry" means the population-based data system that  
26 provides ongoing and systematic collection, analysis, interpretation, and  
27 dissemination of information related to injury trauma, stroke and heart at-  
28 tack for system improvement, prevention and research activities. Elements  
29 in the registry shall describe the nature and scope of the injury ~~problem,~~  
30 illness or health condition, identify the incidence and prevalence of trau-  
31 matic injury, illness or health condition, severity of injury, performance  
32 of out-of-hospital and hospital emergency medical systems, patient outcome,  
33 and the impact of trauma, stroke and heart attack on the health care system.

34 (710) "Trauma TSE system" means the organized approach to treat-  
35 ing injured patients that establishes and promotes standards for patient  
36 transportation, equipment, and information analysis for effective and co-  
37 ordinated ~~trauma~~ TSE care. Trauma TSE systems represent a continuum of care  
38 that is fully integrated into the emergency medical services system and is a  
39 coordinated effort between out-of-hospital and hospital providers with the  
40 close cooperation of medical specialists in each phase of care. The focus is  
41 on prevention, coordination of acute care, and aggressive rehabilitation.  
42 Ideally, sSystems are designed to be inclusive of all injured patients with  
43 a TSE requiring acute care facilities, striving to meet the needs of the  
44 patient, regardless of the severity of injury, geographic location or popu-  
45 lation density. Ultimately, a ~~trauma~~ A TSE system seeks to prevent injuries  
46 from happening and the reduction of death and disability when it does happen.

47 SECTION 11. That Section 57-2003, Idaho Code, be, and the same is hereby  
48 amended to read as follows:

1           57-2003. ESTABLISHMENT OF TRAUMA TSE REGISTRY. The department, or an  
2 authorized contractor of the department, shall:

3           (1) Establish a ~~trauma~~ TSE registry to collect and analyze information  
4 on the incidence, severity, causes and outcomes of ~~trauma TSEs~~, and other  
5 such data necessary to evaluate trauma, strokes and heart attacks and the  
6 health system's response to it;

7           (2) Establish the data elements and data dictionary, including child  
8 specific data elements that hospitals must report, and the time frame and  
9 format for reporting by adoption of rules in the manner provided in chapter  
10 52, title 67, Idaho Code;

11           (3) Support, where necessary, data collection and abstraction by pro-  
12 viding:

13           (a) A data collection system and technical assistance to each hospital;  
14 and

15           (b) Funding or, at the discretion of the department, personnel for col-  
16 lection and abstraction for each hospital.

17           SECTION 12. That Section 57-2004, Idaho Code, be, and the same is hereby  
18 amended to read as follows:

19           57-2004. PARTICIPATION IN PROGRAM. (1) Each licensed hospital shall  
20 report each case of ~~trauma~~ TSE which meets the inclusion criteria to the de-  
21 partment or the authorized contractor of the department within one hundred  
22 eighty (180) days of treatment.

23           (2) Each report of ~~trauma~~ TSE shall include information as defined by  
24 the department.

25           (3) The department or authorized contractor of the department shall  
26 have physical access to all records which would identify reportable cases  
27 and/or establish characteristics, treatment or medical status of reportable  
28 cases in the event that there has been a failure to report as delineated in  
29 subsections (1) and (2) of this section.

30           (4) Nothing in this chapter shall prevent the department or authorized  
31 contractor from identifying and reporting cases using data linkages with  
32 death records, other ~~trauma~~ registries, and other potential sources.

33           SECTION 13. That Section 57-2005, Idaho Code, be, and the same is hereby  
34 amended to read as follows:

35           57-2005. CREATION OF TRAUMA TSE REGISTRY FUND -- PURPOSE. There is  
36 hereby created and established in the state treasury a fund to be known as  
37 the "Trauma Time Sensitive Emergencies (TSE) Registry Fund" to which shall  
38 be deposited the revenues derived from grants, appropriations or other  
39 sources of funds. All moneys now or hereafter in the ~~trauma~~ TSE registry fund  
40 are hereby dedicated for the purpose of contracting for and obtaining the  
41 services of a continuous registry of all trauma time sensitive emergency in-  
42 cident patients in the state of Idaho and maintaining a cooperative exchange  
43 of information with other states providing a similar ~~trauma~~ TSE incident  
44 registry. The department of health and welfare, bureau of emergency medical  
45 services and preparedness, is charged with the administration of this fund  
46 for the purposes specified herein. All claims against the fund shall be



1 examined, audited and allowed in the manner now or hereafter provided by law  
2 for claims against the state of Idaho.

3 SECTION 14. That Section 57-2006, Idaho Code, be, and the same is hereby  
4 amended to read as follows:

5 57-2006. CONFIDENTIALITY. (1) Information and records contained in  
6 the ~~trauma~~ TSE registry shall be kept confidential and may be released only  
7 as provided by this chapter and the rules of the department.

8 (2) The department and an authorized contractor may enter into agree-  
9 ments to exchange confidential information with other ~~trauma~~ TSE registries  
10 in order to obtain complete reports of Idaho residents treated in other  
11 states and to provide information to other states regarding their residents  
12 treated in Idaho. Agreements sharing information from the ~~trauma~~ TSE reg-  
13 istry shall include a provision requiring the receiving agency to keep such  
14 information confidential.

15 (3) The department and an authorized contractor may, in their discre-  
16 tion, publish or furnish to health researchers and the public, de-identified  
17 information including compilations and analyses thereof.

18 (4) The department and an authorized contractor may furnish confi-  
19 dential information to other ~~trauma~~ TSE registries, federal ~~trauma~~ TSE  
20 programs, or health researchers in order to perform and collaborate with  
21 research studies. Persons and entities receiving confidential information  
22 for research purposes must comply with rules of the department relating to  
23 the confidentiality of ~~trauma~~ TSE registry records and information.

24 (5) The department and an authorized contractor may furnish confiden-  
25 tial information relating to a specific licensed hospital, including compi-  
26 lations and analyses of such confidential information, to the specific li-  
27 censed hospital to which it relates.

28 (6) ~~Trauma~~ TSE registry records and information shall not be available  
29 for purposes of litigation except by order of the court. Any such order  
30 shall contain such protective provisions as are reasonable and necessary  
31 to prevent the public or further disclosure of the records and information  
32 and shall contain a provision requiring the destruction of the records and  
33 information when no longer needed for the litigation.

34 SECTION 15. That Section 57-2007, Idaho Code, be, and the same is hereby  
35 amended to read as follows:

36 57-2007. LIABILITY. (1) No action for damages arising from the disclo-  
37 sure of confidential information may be maintained against any reporting en-  
38 tities or employees of such entities that participate in good faith in the  
39 reporting of ~~trauma~~ TSE registry data in accordance with this chapter.

40 (2) No license of a health care facility or health care practitioner may  
41 be denied, suspended or revoked for the good faith disclosure of confiden-  
42 tial information in accordance with this chapter.

43 (3) The immunity granted in subsections (1) and (2) of this section  
44 shall not be construed to apply to the unauthorized disclosure of confiden-  
45 tial information when such disclosure is due to gross negligence or willful  
46 misconduct of the reporting entities.