

IMPROVING TRAUMA CARE ACT OF 2014

MAY 20, 2014.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. UPTON, from the Committee on Energy and Commerce, submitted the following

R E P O R T

[To accompany H.R. 3548]

[Including cost estimate of the Congressional Budget Office]

The Committee on Energy and Commerce, to whom was referred the bill (H.R. 3548) to amend title XII of the Public Health Service Act to expand the definition of trauma to include thermal, electrical, chemical, radioactive, and other extrinsic agents, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.

CONTENTS

	Page
Amendment	2
Purpose and Summary	2
Background and Need for Legislation	2
Hearings	3
Committee Consideration	3
Committee Votes	3
Committee Oversight Findings	3
Statement of General Performance Goals and Objectives	3
New Budget Authority, Entitlement Authority, and Tax Expenditures	3
Earmark, Limited Tax Benefits, and Limited Tariff Benefits	3
Committee Cost Estimate	3
Congressional Budget Office Estimate	4
Federal Mandates Statement	4
Duplication of Federal Programs	4
Disclosure of Directed Rule Makings	5
Advisory Committee Statement	5
Applicability to Legislative Branch	5
Section-by-Section Analysis of the Legislation	5
Changes in Existing Law Made by the Bill, as Reported	5

AMENDMENT

The amendment is as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the “Improving Trauma Care Act of 2014”.

SEC. 2. TRAUMA DEFINITION.

(a) REVISED DEFINITION UNDER TRAUMA SYSTEMS GRANTS PROGRAMS.—Paragraph (4) of section 1231 of the Public Health Service Act (42 U.S.C. 300d–31) is amended to read as follows:

“(4) TRAUMA.—The term ‘trauma’ means an injury resulting from exposure to—

“(A) a mechanical force; or

“(B) another extrinsic agent, including an extrinsic agent that is thermal, electrical, chemical, or radioactive.”.

(b) REVISED DEFINITION UNDER INTERAGENCY PROGRAM FOR TRAUMA RESEARCH.—Paragraph (3) of section 1261(h) of the Public Health Service Act (42 U.S.C. 300d–61(h)) is amended to read as follows:

“(3) The term ‘trauma’ means an injury resulting from exposure to—

“(A) a mechanical force; or

“(B) another extrinsic agent, including an extrinsic agent that is thermal, electrical, chemical, or radioactive.”.

PURPOSE AND SUMMARY

H.R. 3548, Improving Trauma Care Act, would amend the Public Health Service Act to improve the definition of trauma in Title 42, United States Code, section 300d–31(4) and section 300d–61(h)(3) by including injuries caused by thermal, electrical, chemical, or radioactive force. These injuries commonly are treated by burn centers. Clarifying the definition of “trauma” to make it clear that “trauma” includes burn injuries would allow burn centers to compete for trauma care center grants under applicable Federal programs.

BACKGROUND AND NEED FOR LEGISLATION

Traumatic injuries are understood to include a variety of circumstances including, crash, gunshot, and burn injuries. The current system contains inconsistencies in the definition of what constitutes “trauma” and fails to describe the full range of “traumatic” injuries, which can result in gaps in coverage and provision in care.

Although burn injuries should fall under the definition of trauma, this is not currently the case. Title 42, United States Code, section 300d–31(4), defines “trauma” as an “injury resulting from exposure to a mechanical force.” A burn does not fall into this definition. The issue is further complicated by a second definition of “trauma” in 42 United States Code, section 300d–61(h)(3), which states that the term “trauma” means “any serious injury that could result in loss of life or in significant disability and that would meet pre-hospital triage criteria for transport to a designated trauma center.” Some burns fall under this definition, but the more specific definition in section 300d–31(4) makes it unclear whether they all do.¹

The definition must be modernized to accurately reflect the medical reality of trauma

¹<http://www.ameriburn.org/>.

HEARINGS

The Subcommittee on Health held no hearings on H.R. 3548.

COMMITTEE CONSIDERATION

On February 27, 2014, the Subcommittee on Health met in open markup session and favorably forwarded H.R. 3548 to the full Committee, as amended, by a voice vote.

On April 3, 2014, the Committee on Energy and Commerce met in open markup session and approved H.R. 3548, as amended, by a voice vote.

COMMITTEE VOTES

Clause 3(b) of rule XIII of the Rules of the House of Representatives requires the Committee to list the record votes on the motion to report legislation and amendments thereto. There were no record votes taken in connection with ordering H.R. 3548 reported. A motion by Mr. Upton to order H.R. 3548 reported to the House, was agreed to by a voice vote.

COMMITTEE OVERSIGHT FINDINGS

Pursuant to clause 3(c)(1) of rule XIII of the Rules of the House of Representatives, the Committee has not held oversight hearing on this legislation.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the goal of this legislation is to amend the Public Health Service Act to improve the definition of trauma in Title 42, United States Code, section 300d–31(4) and section 300d–61(h)(3) by including injuries caused by thermal, electrical, chemical, or radioactive force.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

In compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee finds that H.R. 3548 would result in no new or increased budget authority, entitlement authority, or tax expenditures or revenues.

EARMARK, LIMITED TAX BENEFITS, AND LIMITED TARIFF BENEFITS

In compliance with clause 9(e), 9(f), and 9(g) of rule XXI of the Rules of the House of Representatives, the Committee finds that H.R. 3548 contains no earmarks, limited tax benefits, or limited tariff benefits.

COMMITTEE COST ESTIMATE

The Committee adopts as its own the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

CONGRESSIONAL BUDGET OFFICE ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the following is the cost estimate provided by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974:

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, April 15, 2014.

Hon. FRED UPTON,
*Chairman, Committee on Energy and Commerce,
House of Representatives, Washington, DC.*

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 3548, the Improving Trauma Care Act of 2013.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Lisa Ramirez-Branum.
Sincerely,

PETER H. FONTAINE
(For Douglas W. Elmendorf, Director).

Enclosure.

H.R. 3548—Improving Trauma Care Act of 2013

H.R. 3548 would amend the Public Health Service Act to revise the definition of trauma as it applies to grants and activities authorized to provide support for trauma and emergency care. Under current law, the definition of trauma means an injury resulting from exposure to a mechanical force. The bill would expand the definition of trauma to also include an injury resulting from exposure to an extrinsic agent that is thermal, electrical, chemical, or radioactive.

CBO estimates that implementing the legislation would have no significant effect on the federal budget. Enacting H.R. 3548 would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

The bill would not impose intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would impose no costs on state, local, or tribal governments.

The CBO staff contact for this estimate is Lisa Ramirez-Branum. The estimate was approved by Holly Harvey, Deputy Assistant Director for Budget Analysis.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

DUPLICATION OF FEDERAL PROGRAMS

No provision of H.R. 3548 establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section

21 of Public Law 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

DISCLOSURE OF DIRECTED RULE MAKINGS

The Committee estimates that enacting H.R. 3548 would not specifically direct to be completed a rulemaking within the meaning of 5 U.S.C. 551.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act were created by this legislation.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Short title

Section 1 of the legislation cites the bill as the “Improving Trauma Care Act of 2013.”

Section 2. Trauma definition

Section 2 would revise the definition under the Trauma Systems Grant Programs and under Interagency Program for Trauma Research to define trauma as “an injury resulting from exposure to a mechanical force; or another extrinsic agent, including an extrinsic agent that is thermal, electrical, chemical, or radioactive.”

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

FEDERAL HOME LOAN BANK ACT

* * * * *

ELIGIBILITY OF MEMBERS AND NONMEMBER BORROWERS

SEC. 4. (a) CRITERIA FOR ELIGIBILITY.—

(1) * * *

* * * * *

(5) *CERTAIN PRIVATELY INSURED CREDIT UNIONS.—*

(A) IN GENERAL.—Subject to the requirements of subparagraph (B), a credit union shall be treated as an insured depository institution for purposes of determining the eligibility of such credit union for membership in a Federal home loan bank under paragraphs (1), (2), and (3).

(B) CERTIFICATION BY APPROPRIATE SUPERVISOR.—

(i) *IN GENERAL.*—For purposes of this paragraph and subject to clause (ii), a credit union which lacks Federal deposit insurance and which has applied for membership in a Federal home loan bank may be treated as meeting all the eligibility requirements for Federal deposit insurance only if the appropriate supervisor of the State in which the credit union is chartered has determined that the credit union meets all the eligibility requirements for Federal deposit insurance as of the date of the application for membership.

(ii) *CERTIFICATION DEEMED VALID.*—If, in the case of any credit union to which clause (i) applies, the appropriate supervisor of the State in which such credit union is chartered fails to make a determination pursuant to such clause by the end of the 6-month period beginning on the date of the application, the credit union shall be deemed to have met the requirements of clause (i).

(C) *SECURITY INTERESTS OF FEDERAL HOME LOAN BANK NOT AVOIDABLE.*—Notwithstanding any provision of State law authorizing a conservator or liquidating agent of a credit union to repudiate contracts, no such provision shall apply with respect to—

(i) any extension of credit from any Federal home loan bank to any credit union which is a member of any such bank pursuant to this paragraph; or

(ii) any security interest in the assets of such credit union securing any such extension of credit.

(D) *CONDITIONS ON ADVANCES.*—Before making an advance pursuant to section 10 to a credit union which lacks Federal deposit insurance, a Bank shall—

(i) determine the concentration risk exposure of the Bank to such a credit union, including all advances of the Bank to other such credit unions;

(ii) ensure that the advance will not result in a significant risk of insolvency to the Bank; and

(iii) ensure that the Bank—

(I) has sufficient reserves to withstand any potential losses of making such advance;

(II) has priority over the claims and rights of the State in which the credit union is chartered or a conservator or a liquidating agent of the credit union; and

(III) has secure access to the collateral obtained from such credit union in the event of material financial distress or failure of such credit union.

* * * * *

FEDERAL DEPOSIT INSURANCE ACT

* * * * *

SEC. 43. DEPOSITORY INSTITUTIONS LACKING FEDERAL DEPOSIT INSURANCE.

(a) ANNUAL INDEPENDENT AUDIT OF PRIVATE DEPOSIT INSURERS.—

(1) * * *

(2) PROVIDING COPIES OF AUDIT REPORT.—

(A) PRIVATE DEPOSIT INSURER.—The private deposit insurer shall provide a copy of the audit report—

(i) to each depository institution the deposits of which are insured by the private deposit insurer, not later than 14 days after the audit is completed; **[and]**

(ii) to the appropriate supervisory agency of each State in which such an institution receives deposits, not later than 7 days after the audit is completed~~[\.]~~;

(iii) in the case of depository institutions described in subsection (e)(2)(A) the deposits of which are insured by the private insurer which are members of a Federal home loan bank, to the Federal Housing Finance Agency, not later than 7 days after the audit is completed.

* * * * *