

WEST VIRGINIA LEGISLATURE

2018 REGULAR SESSION

Introduced

Senate Bill 510

BY SENATORS MAYNARD, TAKUBO, STOLLINGS, CLINE,

BOSO, AND PLYMALE

[Introduced February 8, 2018; Referred
to the Committee on Health and Human Resources]

1 A BILL to amend and reenact §16-5B-18 of the Code of West Virginia, 1931, as amended, relating
 2 to designation of hospitals for stroke treatment; adding a designation as a thrombectomy-
 3 capable stroke center; modifying the makeup of the advisory committee; requiring
 4 approval of legislative rules by the advisory committee prior to filing; providing for a
 5 database; and prohibiting certain inspections of hospitals conducted by the Department of
 6 Health and Human Resources.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5B. HOSPITALS AND SIMILAR INSTITUTIONS.

**§16-5B-18. Designation of comprehensive, primary, ~~and acute~~ and thrombectomy-capable
 stroke-ready hospitals; reporting requirements; rulemaking.**

1 (a) A hospital, as that term is defined in section one of this article, may ~~apply to be~~
 2 recognized by the Department of Health and Human Resources ~~to be recognized and certified as~~
 3 a comprehensive stroke center, a primary stroke center, ~~or~~ an acute stroke-ready hospital or
 4 thrombectomy-capable stroke center. The appropriate designation shall be ~~granted by the~~
 5 ~~Department of Health and Human Resources~~ based upon a hospital meeting the criteria
 6 recognized by the American Heart Association, the Joint Commission or other nationally
 7 recognized organization and as set forth in legislative rules as provided in subsection (d) of this
 8 section.

9 (b) The Department of Health and Human Resources shall gain access to, and utilize, a
 10 nationally recognized stroke database that compiles information and statistics on stroke care that
 11 align with the stroke consensus metrics developed and approved by the American Heart
 12 Association and the American Stoke Association, for the purpose of improving stroke care and
 13 access across the State of West Virginia. The Department of Health and Human Resources may
 14 not require data which is more comprehensive than that which a facility is required to maintain to
 15 allow them to retain their stroke facility designation.

16 ~~(b)~~ (c) The Department of Health and Human Resources shall provide annually, by June

17 1, a list of all hospitals they have designated pursuant to the provisions of subsection (a) of this
18 section to the medical director of each licensed emergency medical service agency in this state.
19 This list shall be maintained by the Department of Health and Human Resources and shall be
20 updated annually on its website.

21 ~~(e)~~ (d) The Secretary of the Department of Health and Human Resources shall establish
22 by legislative rule, as set forth in subsection (d) of this section, prehospital care protocols related
23 to assessment, treatment and transport of patients identified as stroke patients. These protocols
24 shall be applicable to all emergency medical service agencies, as defined in §16-4C-3 of this
25 code. These protocols shall include development and implementation of plans for the triage and
26 transport within specified timeframes of onset of symptoms of acute stroke patients to the nearest
27 comprehensive, thrombectomy-capable stroke center, primary or acute stroke ready hospital.

28 ~~(d)~~ (e) The Secretary of the Department of Health and Human Resources shall propose
29 rules for legislative approval in accordance with the provisions of §29A-3 1 *et seq.* of this code to
30 accomplish the goals of this section. These rules shall be proposed after consultation with and
31 approval by an advisory committee selected by the Secretary of the Department of Health and
32 Human Resources.

33 (f) The advisory committee as set forth in subsection (d) of this section shall consist of no
34 more than 14 members. Membership on the advisory committee shall consist of:

35 (1) A representative of the Department of Health and Human Resources;

36 (2) A representative of an association with the primary purpose of promoting better heart
37 health;

38 (3) A registered emergency medical technician; ~~hospitals located in rural areas of the state~~
39 and ~~hospitals located in urban areas of this state~~

40 (4) Either an administrator or physician representing a critical access hospital;

41 (5) Either an administrator or physician representing a teaching or academic hospital;

42 (6) A representative of an association with the primary purpose of representing the
43 interests of all hospitals throughout the state; and

44 (7) A clinical and administrative representative of hospitals from each level of stroke center
45 certification by a national certifying body (CSC, TSC, PSC, and ASRH).

46 (g) These rules shall include:

47 (1) An application process for recognition of hospitals who have been certified as a stroke
48 center by a nationally certifying body;

49 (2) The criteria for designation and certification as a comprehensive stroke center, a primary
50 stroke center or an acute stroke ready center thrombectomy-capable stroke center or, an acute
51 stroke ready center as determined by criteria of the American Heart Association, the Joint
52 Commission or other national certifying organization;

53 (3) A means for providing a list of designated hospitals to emergency medical service
54 agencies;

55 (4) Protocols for assessment, treatment and transport of stroke patients by licensed
56 emergency medical service agencies; and

57 ~~(5) Any other requirements necessary to accomplish the intent of this section.~~

58 (h) Nothing in this section may permit the Department of Health and Human Resources to
59 conduct inspections of hospitals in relation to recognition as a stroke center as set forth in this
60 section: *Provided*, That nothing in this section may preclude inspections of hospitals by the
61 Department of Health and Human Resources which are otherwise authorized by this code.

NOTE: The purpose of this bill is to add a designation as a thrombectomy-capable stroke center. It also modifies the make-up of the advisory committee, requires approval of legislative rules by the advisory committee prior to filing and prohibits certain inspections of hospitals conducted by the Department of Health and Human Resources.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.