

# **WEST VIRGINIA LEGISLATURE**

## **2016 REGULAR SESSION**

### **Committee Substitute**

**for**

### **House Bill 4388**

(BY DELEGATES ROHRBACH, ELLINGTON, HOUSEHOLDER,  
BATES, BYRD, SOBONYA, SUMMERS, UPSON  
AND B. WHITE)

[Originating in the House Committee on Health and  
Human Resources on February 18, 2016.]



1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section  
2 designated §16-5B-18, relating to designating certain hospitals as stroke centers;  
3 designating based upon certain criteria; establishing protocols; setting forth reporting  
4 requirements; establishing protocols; creating an advisory committee and permitting  
5 rulemaking.

*Be it enacted by the Legislature of West Virginia:*

1 That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new section,  
2 designated §16-5B-18, to read as follows:

**ARTICLE 5B. HOSPITALS AND SIMILAR INSTITUTIONS.**

**§16-5B-18. Designation of Comprehensive, Primary and Acute Stroke Ready Hospitals.**

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

7 (b) The department shall provide annually by June 1, a list of hospitals it has designated  
8 pursuant to the provisions of subsection (a) to the medical director of each licensed emergency  
9 medical service agency. This list shall be maintained by the department and updated annually  
10 on its website.

11 (c) The secretary of the department may establish by legislative rule, as set forth in  
12 subsection (d) of this section, prehospital care protocols related to assessment, treatment and  
13 transport of patients identified as stroke patients. These protocols shall be applicable to all  
14 emergency medical service agencies, as defined in section three, article four-c of this  
15 chapter. These protocols shall include development and implementation of plans for the triage

16 and transport within specified timeframes of onset of symptoms of acute stroke patients to the  
17 nearest comprehensive, primary or acute stroke ready hospital.

18 (d) The secretary may propose rules for legislative approval in accordance with the  
19 provisions of article three, chapter, twenty-nine-a of this code to implement the provisions of this  
20 section. The secretary shall consult with an advisory committee selected by the secretary. The  
21 advisory committee shall consist of representatives of the department, an association with the  
22 primary purpose of promoting better heart health, a registered emergency medical technician,  
23 hospitals located in rural areas of the state and hospitals located in urban areas of this state.

24 The rules may include:

25 (1) An application process;

26 (2) The criteria for designation and certification as a comprehensive stroke center, a  
27 primary stroke center or an acute stroke ready center;

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

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

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