

**HOUSE BILL NO. 1339**

Introduced by

Representatives Porter, Delmore, Hawken

Senators Erbele, Nelson

1 A BILL for an Act to create and enact a new chapter to title 23 of the North Dakota Century  
2 Code, relating to hospital designation as a primary stroke center and related services offered by  
3 emergency medical services operations.

4 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

5 **SECTION 1.** A new chapter to title 23 of the North Dakota Century Code is created and  
6 enacted as follows:

7 **Primary stroke centers.**

- 8 1. Effective January 1, 2010, the state department of health shall designate qualified  
9 hospitals as primary stroke centers. A hospital seeking designation as a primary  
10 stroke center shall apply to the department for that designation and shall  
11 demonstrate to the department that the hospital meets the applicable criteria  
12 established by the department.
- 13 2. The criteria established by the department for designation as a primary stroke  
14 center must include a requirement that the hospital be certified as a primary stroke  
15 center by the joint commission on accreditation of health care organizations or by a  
16 similar accrediting or certifying organization possessing hospital standards  
17 recognized nationally by the health care industry and accepted by the department.
- 18 3. The department may suspend or revoke a hospital's designation as a primary  
19 stroke center, after notice and opportunity for a hearing, if the department  
20 determines the hospital is not in compliance with the requirements of this chapter.
- 21 4. Annually, the state department of health shall provide a list of hospitals designated  
22 as primary stroke centers to each emergency medical services operation licensed  
23 in this state. The department shall post to the department's web site a list of the  
24 hospitals designated as primary stroke centers.

1           **Stroke system of care task force.**

- 2           1.   The state department of health shall establish a stroke system of care task force.  
3           The purpose of the task force is to encourage and ensure the establishment of an  
4           effective stroke system of care throughout the state. The state health officer, or the  
5           officer's designee, shall serve on the task force. The state health officer shall  
6           appoint members to the task force who represent rural hospitals, physicians who  
7           treat patients in rural areas, and members representing emergency medical  
8           services operations that provide services in rural areas of the state. Members of  
9           the task force serve at the pleasure of the state health officer.
- 10          2.   Before April 1, 2010, the stroke system of care task force shall provide the state  
11          department of health with recommendations regarding the establishment of an  
12          effective stroke system of care in the rural areas of this state. The initial  
13          recommendations must include:
- 14               a.   Protocols for the triage, stabilization, and appropriate routing of stroke  
15               patients by emergency medical services operations in rural areas; and
- 16               b.   A plan to provide for coordination and communication between rural hospitals,  
17               primary stroke centers, and other support services in order to assure that  
18               residents of all regions of the state have access to effective and efficient  
19               stroke care.
- 20          3.   The state health council may adopt rules, based on the task force's  
21          recommendations.

22           **Stroke triage - Emergency medical services.**

- 23          1.   Before January 1, 2011, the state department of health shall adopt a nationally  
24          recognized standardized stroke-triage assessment tool. The department shall post  
25          this standardized stroke-triage assessment tool to the department's website and  
26          shall provide a copy to each emergency medical services operation licensed in this  
27          state. As a term of licensure under chapter 23-27, each licensed emergency  
28          medical services operation shall adopt and implement a stroke-triage assessment  
29          tool that is substantially similar to the standardized stroke-triage assessment tool  
30          adopted by the department.

- 1           2.   The department shall work with the stroke task force to establish protocols related  
2                   to the assessment, treatment, and transport of stroke patients by emergency  
3                   medical services operations licensed by the state. The protocols may include  
4                   regional transport plans for the triage and transport of stroke patients to the  
5                   closest, most appropriate facility, including the bypass of health care facilities not  
6                   designated as primary stroke centers when it is safe to do so.
- 7           3.   Effective April 1, 2012, each emergency medical services operation licensed under  
8                   chapter 23-27 shall comply with this chapter.

9           **Reports.** Semiannually, each hospital designated as a primary stroke center shall  
10 provide the state department of health a report on the center's quality initiatives. The data in  
11 the report is an exempt record and is not subject to the state's open records law. However, the  
12 department shall make the data in these reports available to state and local government entities  
13 that have responsibility for the management and administration of emergency medical services  
14 throughout the state. Annually, the department shall compile the report data in aggregate form  
15 as a report card and post this report card to the department's website. The results of this report  
16 card may be used by the department to conduct training.

17           **Standard of care.** This chapter is not a medical practice guideline and may not be  
18 used to restrict the authority of a hospital to provide services for which the hospital has been  
19 licensed. This chapter must be interpreted to recognize that all patients should be treated  
20 individually based on each patient's needs and circumstances.

21           **Advertisement.** A person may not advertise to the public that a hospital is a primary  
22 stroke center unless the hospital has been designated as such under this chapter.