

LEGISLATURE OF NEBRASKA
ONE HUNDRED FIFTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 1035

Introduced by Riepe, 12.

Read first time January 17, 2018

Committee: Health and Human Services

- 1 A BILL FOR AN ACT relating to the Stroke System of Care Act; to amend
- 2 sections 71-474, 71-4204, 71-4205, and 71-4209, Revised Statutes
- 3 Cumulative Supplement, 2016; to provide for designation of
- 4 endovascular therapy capable stroke centers; to harmonize
- 5 provisions; and to repeal the original sections.
- 6 Be it enacted by the people of the State of Nebraska,

1 Section 1. Section 71-474, Revised Statutes Cumulative Supplement,
2 2016, is amended to read:

3 71-474 A person may not advertise to the public, by way of any
4 medium, that a hospital is a comprehensive stroke center, an endovascular
5 therapy capable stroke center, a primary stroke center, or an acute
6 stroke-ready hospital unless the hospital is listed as such by the
7 Department of Health and Human Services under the Stroke System of Care
8 Act.

9 Sec. 2. Section 71-4204, Revised Statutes Cumulative Supplement,
10 2016, is amended to read:

11 71-4204 The department shall designate hospitals as comprehensive
12 stroke centers, endovascular therapy capable stroke centers, primary
13 stroke centers, or ~~and~~ acute stroke-ready hospitals based on
14 certification from the American Heart Association, the Joint Commission
15 on Accreditation of Healthcare Organizations, ~~or~~ another nationally
16 recognized, guidelines-based organization that provides certification for
17 stroke care, or the department as such certification existed on the
18 effective date of this act July 21, 2016. The department shall compile
19 and maintain a list of such hospitals and post the list on the
20 department's web site. Before June 1 of each year, the department shall
21 send the list to the physician medical director of each emergency medical
22 service licensed pursuant to the Emergency Medical Services Practice Act.

23 Sec. 3. Section 71-4205, Revised Statutes Cumulative Supplement,
24 2016, is amended to read:

25 71-4205 A hospital that is designated as a comprehensive stroke
26 center, an endovascular therapy capable stroke center, or a primary
27 stroke center may enter into a coordinating stroke care agreement with an
28 acute stroke-ready hospital to provide appropriate access to care for
29 acute stroke patients. The agreement shall be in writing and shall
30 include, at a minimum:

31 (1) A transfer agreement for the transport and acceptance of any

1 stroke patient seen by the acute stroke-ready hospital for stroke
2 treatment therapies which the acute stroke-ready hospital is not capable
3 of providing; and

4 (2) Communication criteria and protocol with the acute stroke-ready
5 hospital.

6 Sec. 4. Section 71-4209, Revised Statutes Cumulative Supplement,
7 2016, is amended to read:

8 71-4209 (1) The department shall establish a stroke system of care
9 task force to address matters of triage, treatment, and transport of
10 possible acute stroke patients. The task force shall include
11 representation from the department, including a program created by the
12 department to address chronic disease prevention and control issues
13 including cardiovascular health, the Emergency Medical Services Program
14 created by the department, and the Office of Rural Health, the American
15 Stroke Association, the Nebraska State Stroke Association, hospitals
16 designated as comprehensive stroke centers under the Stroke System of
17 Care Act, hospitals designated as primary stroke centers under the act,
18 hospitals designated as endovascular therapy capable stroke centers under
19 the act, rural hospitals, physicians, and emergency medical services
20 licensed pursuant to the Emergency Medical Services Practice Act.

21 (2) The task force shall provide advice and recommendations to the
22 department regarding the implementation of the Stroke System of Care Act.
23 The task force shall focus on serving both rural and urban areas. The
24 task force shall provide advice regarding protocols for the assessment,
25 stabilization, and appropriate routing of stroke patients by emergency
26 medical services and for coordination and communication between
27 hospitals, comprehensive stroke centers, primary stroke centers, and
28 other support services necessary to assure all residents of Nebraska have
29 access to effective and efficient stroke care.

30 (3) The task force shall recommend eligible essential health care
31 services for acute stroke care provided through telehealth as defined in

1 section 71-8503.

2 Sec. 5. Original sections 71-474, 71-4204, 71-4205, and 71-4209,

3 Revised Statutes Cumulative Supplement, 2016, are repealed.