

No. 2017-4

AN ACT

HB 23

Amending the act of May 29, 2012 (P.L.549, No.54), entitled "An act establishing a Statewide stroke system of care by recognizing primary stroke centers and directing the creation of emergency medical services training and transport protocols; and providing for the powers and duties of the Department of Health," further providing for short title, for definitions, for recognition of centers, for emergency medical services and for biennial report.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. Section 1 of the act of May 29, 2012 (P.L.549, No.54), known as the Primary Stroke Center Recognition Act, is amended to read:

Section 1. Short title.

This act shall be known and may be cited as the [**Primary Stroke Center Recognition**] *Stroke System of Care Act*.

Section 2. Section 2 of the act is amended by adding definitions to read:

Section 2. Definitions.

The following words and phrases when used in this act shall have the meanings given to them in this section unless the context clearly indicates otherwise:

"Acute stroke-ready hospital." A hospital which is designated as an acute stroke-ready hospital by the joint commission or a nongovernmental organization that has been authorized by the Centers for Medicare and Medicaid Services (CMS) to conduct hospital surveys to ensure compliance with the CMS Conditions of Participation.

"Comprehensive stroke center." A facility which is designated as a comprehensive stroke center by the joint commission or a nongovernmental organization that has been authorized by the Centers for Medicare and Medicaid Services (CMS) to conduct hospital surveys to ensure compliance with the CMS Conditions of Participation.

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"Primary stroke center." A facility which is designated as a primary stroke center by the joint commission or a nongovernmental organization that has been authorized by the Centers for Medicare and Medicaid Services (CMS) to conduct hospital surveys to ensure compliance with the CMS Conditions of Participation.

Section 3. Sections 3, 4(a) and (c) and 5(b)(1) and (2) of the act are amended to read:

Section 3. Recognition of centers.

(a) General rule.—Upon application by a licensed acute care hospital, the department shall recognize the hospital as a *comprehensive stroke center*, primary stroke center *or acute stroke-ready hospital* if the hospital is certified as a *comprehensive stroke center*, primary stroke center *or acute stroke-ready hospital* by the joint commission or another nationally recognized accrediting organization that provides certification for stroke

care. The designation shall last as long as the hospital remains certified [as a **primary stroke center**].

(b) Suspension or revocation of recognition.—The department may suspend or revoke [**primary stroke center**] recognition *under subsection (a)* if the department determines that the hospital is not in compliance with provisions of this act requiring accreditation as a *comprehensive stroke center*, primary stroke center *or acute stroke-ready hospital*.

Section 4. Emergency medical services.

(a) List of [**primary**] *all* stroke centers.—The department shall:

(1) Make available a list of [**accredited**] *certified comprehensive stroke centers*, primary stroke centers *and acute stroke-ready hospitals* to each emergency medical services agency medical director in this Commonwealth.

(2) Maintain a copy of the list of *certified comprehensive stroke centers*, primary stroke centers *and acute stroke-ready hospitals* in the office designated with the department to oversee emergency medical services.

(3) Post a list of *certified comprehensive stroke centers*, primary stroke centers *and acute stroke-ready hospitals* on the department's Internet website.

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(c) Protocols.—The department shall establish protocols that are related to prehospital assessment, treatment and transport of stroke patients by licensed emergency medical services providers[.] *that will allow the patient to receive the appropriate care at a certified stroke center in the shortest amount of time*. The protocols shall include plans for triage and transport of acute stroke patients to the closest [**primary**] *certified* stroke center or a facility that can provide appropriate treatment if the [**primary**] *certified* stroke center is not within a specified time frame from onset of symptoms.

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Section 5. Biennial report.

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(b) Contents.—The report shall include:

(1) The number, location and county of [**accredited**] *certified comprehensive stroke centers*, primary stroke centers *and acute stroke-ready hospitals* in this Commonwealth.

(2) Changes in the number and/or locations of *certified comprehensive stroke centers*, primary stroke centers *and acute stroke-ready hospitals* since the last report.

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Section 4. This act shall take effect in 60 days.

APPROVED—The 12th day of June, A.D. 2017

TOM WOLF