Amendment No. 505

Assembly Amendment to Assembly Bill No. 360 (BDR 40-392)								
Proposed by: Assembly Committee on Health and Human Services								
Amends:	Summary: No	Title: Yes Preamble: Delete Joint Sponsorship:	No Digest: Yes					

ASSEMBLY	ACT	TION	Initial and Date	SENATE ACTIO	ON Initial and Date
Adopted		Lost		Adopted	Lost
Concurred In		Not		Concurred In	Not
Receded		Not		Receded	Not

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) *green bold italic underlining* is new language proposed in this amendment; (3) red strikethrough is deleted language in the original bill; (4) purple double strikethrough is language proposed to be deleted in this amendment; (5) orange double underlining is deleted language in the original bill that is proposed to be retained in this amendment; and (6) green bold is newly added transitory language.

LJM/RBL Date: 4/20/2007

A.B. No. 360—Establishes the State Program for Vascular Health. (BDR 40-392)



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ASSEMBLY BILL NO. 360–ASSEMBLYMEN OCEGUERA, KOIVISTO, ANDERSON, BEERS, BOBZIEN, BUCKLEY, CARPENTER, CLABORN, GERHARDT, GOEDHART, HOGAN, HORNE, KIHUEN, LESLIE, MANENDO, MARVEL, MCCLAIN, MUNFORD, OHRENSCHALL, PARKS, PIERCE, SEGERBLOM AND STEWART

MARCH 15, 2007

JOINT SPONSORS: SENATORS WIENER, CARLTON, COFFIN, HORSFORD, TITUS AND WOODHOUSE

Referred to Committee on Health and Human Services

SUMMARY—Establishes the State Program for Vascular Health. (BDR 40-392)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

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EXPLANATION - Matter in **bolded italics** is new; matter between brackets [omitted material] is material to be omitted.

AN ACT relating to public health; requiring the Health Division of the Department of Health and Human Services to establish the State Program for Vascular Health; requiring the Administrator of the Division to appoint a Coordinator for Vascular Health; creating the Advisory Committee for Vascular Health; requiring the Advisory Committee to adopt a State Plan for the Recommended Prevention and Treatment of Stroke; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Section 11 of this bill requires the Health Division of the Department of Health and Human Services to establish the State Program for Vascular Health. Sections 12 and 13 of this bill provide for the appointment of a Coordinator for Vascular Health and prescribe the duties of the Coordinator. Sections 14 and 15 of this bill create the Advisory Committee for Vascular Health and prescribe the duties of the Committee. [Section 16 of this bill requires the Advisory Committee to adopt a State Plan for the Recommended Treatment and Prevention of Stroke.] Sections 18 and 19 of this bill set forth the powers and duties of the Health Division related to the State Program for Vascular Health . [and the State Plan for the Recommended Prevention and Treatment of Stroke.]

Existing law requires the licensure of hospitals and other medical facilities before the hospital or facility may operate in this State. (NRS 449.030) Certain licensed facilities are required to amend their licenses to operate before the facilities may offer certain additional services. (NRS 449.087) Section 20 of this bill requires a licensed facility to amend its license before offering services as a center for the treatment of stroke.] Section 18 requires the Health Division to conduct public education campaigns and to submit an annual report to the Governor and the Legislative Counsel Bureau summarizing information about the Coordinator, the Committee, the public education campaigns, activities undertaken for the Program and recommendation. Section 19 authorizes the Health

Division to enter into contracts and to apply for and accept gifts, grants, donations and bequests.

[WHEREAS, Cardiovascular disease is the number one killer of men and women in this country and stroke is the third leading cause of death in this country; and

WHEREAS, Stroke is the leading cause of serious, long term disability and can result in both physical and emotional devastation, leaving many victims struggling with the activities of daily living; and

WHEREAS, Heart attacks and strokes are life and death emergencies in which every second counts because today victims of heart attacks and strokes can benefit from medical treatments that are effective if administered in a timely manner after the heart attack or the first enset of symptoms of a stroke; and

WHEREAS, Advances in the prevention and treatment of stroke, heart disease and other vascular disease have improved the quality of life for millions of American mon and women; and

WHEREAS, The Institute of Medicine of the National Academies has concluded that the fragmentation of the delivery of health care services for victims of stroke frequently results in suboptimal treatment, concerns for the safety of the victims and the inefficient use of health care resources; and

WHEREAS, The Institute of Medicine has recommended the establishment of a coordinated system of care that integrates services for the prevention and treatment of stroke; and

WHEREAS, The main purpose of such a coordinated system includes the establishment and recognition of stroke centers, emergency medical services, protocols and field triage, proper transfer of victims of stroke between health facilities and the statewide collection of data relating to stroke; and

WHEREAS, The establishment of a State Program for Vascular Health is necessary to:

- 1. Încrease public knowledge and awareness of the prevention and treatment of stroke and heart attack and the recognition of the onset of symptoms to ensure effective medical treatment in a timely manner; and
- 2. Develop a coordinated system to effectuate true change in the way victims of stroke and heart attack are treated statewide and to ensure that those victims have access to the most advanced treatment; and

WHEREAS, The members of the 74th Session of the Legislature hereby recognize the importance of vascular health and the establishment of a State Program for Vascular Health, now therefore,]

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 439 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 19, inclusive, of this act.

Sec. 2. As used in sections 2 to 19, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 3 to 10, inclusive, of this act have the meanings ascribed to them in those sections.

Sec. 3. "Committee" means the Advisory Committee for Vascular Health created by section 14 of this act.

Sec. 4. "Coordinator" means the Coordinator for Vascular Health appointed pursuant to section 12 of this act.

Sec. 5. "Hospital" has the meaning ascribed to it in NRS 449.012.

- 1 Sec. 6. ["Plan" means the State Plan for the Recommended Prevention and 2345678 Treatment of Stroke adopted pursuant to section 16 of this act. (Deleted by amendment.) Sec. 7. "Primary prevention" means the treatment of risk factors for stroke,
 - heart disease and other vascular disease in the general population before the onset of any symptoms.
 - "Program" means the State Program for Vascular Health Sec. 8. established pursuant to section 11 of this act.
 - Sec. 9. "Provider of health care" has the meaning ascribed to it in NRS 629.031.
 - Sec. 10. "Secondary prevention" means the treatment of patients who have developed symptoms of stroke, heart disease or other vascular disease that is designed to prevent the onset of additional symptoms and attacks of the condition.
 - Sec. 11. The Health Division shall establish the State Program for Vascular Health to increase public knowledge and raise public awareness relating to vascular health, including, without limitation, the prevention and treatment of stroke, heart disease and other vascular disease. The Program must not limit or otherwise address options concerning the transfer of a patient.

The Administrator shall appoint a Coordinator for Vascular Health. The Coordinator must have fat least the following education and experience:

- (a) A backelor's degree in public health policy or a related field; and
- (b) At least 5 years of work experience in the area of public health policy or a related field.
- → If the qualifications of the applicants are equal, preference must be given to a person with a master's degree or graduate degree in medicine, public health policy or a related field, or a person with more than 5 years of work experience in
- public health policy or a related field.

 2. The Coordinator is in the unclassified service of the State and serves at the pleasure of the Administrator.] appropriate education and experience in public health or a related field.
 - **Sec. 13.** $\not\vdash$ The Coordinator shall:
- [(a)] 1. Facilitate discussion and collaboration concerning the proper care of victims of stroke, heart disease and other vascular disease among:
- [(1)] (a) Providers of health care who provide services to victims of stroke, heart disease and other vascular disease;
 - (b) Physicians who provide emergency medical services;
- [(3)] (c) County and local agencies that provide emergency medical services;
 - $\frac{(d)}{(d)}$ (d) Hospitals;

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- (5) (e) The Board of Medical Examiners and other boards responsible for issuing a license to a provider of health care;
 - [(6)] (f) Providers of health insurance; and
- $\frac{(7)}{(g)}$ Any other person deemed appropriate by the Coordinator who provides services to victims of stroke, heart disease and other vascular disease.
- [(b)] 2. Establish a comprehensive plan for the prevention of stroke, heart disease and other vascular disease with an emphasis on developing a policy for primary prevention and secondary prevention to eliminate the disparities in vascular health among populations that are disproportionately affected by stroke, heart disease and other vascular disease.
- [(e)] 3. Identify appropriate methods by which to promote vascular health among populations that are disproportionately affected by stroke, heart disease and other vascular disease.

1 [(d)] 4. Assist the Health Division with public education campaigns pursuant to section 18 of this act. 2 3 4 (e) Support changes, as the Coordinator determines appropriate, to the system of health care in this State to ensure proper quality of care for victims of stroke, heart disease and other vascular disease and the implementation of measures for the prevention of stroke, heart disease and other vascular disease. 5 6 7 — (f) Implement, monitor and evaluate strategies and programs for the prevention of stroke, heart disease and other vascular disease provided at medical

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- facilities, in the community, at schools and through employers in this State. (g) Offer training and technical assistance to providers of health care and public health professionals, including, without limitation, training to recognize a
- person who has a disproportionate risk of stroke and training for the prevention of stroke, heart disease and other vascular disease.
- (h) Establish a mechanism for evaluating whether a medical facility, including, without limitation, a facility that offers rehabilitative services to victims of stroke, provides proper care to victims of stroke.
- (i) Monitor the quality of strategies for the prevention of stroke, heart disease and other vascular disease throughout this State.
- (i) 5. Assist providers of health care, hospitals and other facilities and organizations in procuring grants of money to improve vascular health.
- [(k) Assist the Health Division in developing and maintaining a database of information relating to victims of stroke pursuant to section 18 of this act.
- (1) 6. Facilitate, monitor and evaluate strategies and programs for the prevention of stroke, heart disease and other vascular disease.
- 7. Perform such other duties relating to vascular health as may be required by the Administrator.
- 2. As used in this section, "medical facility" has the meaning ascribed to it in NRS 449.0151.]
- Sec. 14. 1. The Advisory Committee for Vascular Health is hereby created.
- 2. The Committee consists of [13] 14 members. The [Administrator and the Coordinator serve! State Health Officer serves as an ex officio voting [members] member of the Committee.
 - The Administrator shall appoint to the Committee:
- (a) [Two neurologists who are] A neurologist who is licensed to practice in this State and who fare is experienced in treating victims of stroke, fore of whom must be a resident of northern Nevada and one of whom must be a resident of southern Nevada;
- -(b) Two physicians who are or a physician who is licensed to practice in this State and who [work] works in an emergency room J, one of whom must be a resident of northern Nevada and one of whom must be a resident of southern Nevada:1:
 - (b) A provider of emergency medical services;
- (c) A representative of the Health Division whose primary responsibilities relate to the licensure and certification of persons who provide emergency medical services;
- (d) A representative of a health district created pursuant to NRS 439.362 whose primary responsibilities relate to the licensure and certification of persons who provide emergency medical services;
- (e) [A representative] Two representatives of the American Heart Association or its successor, one of whom is a representative from a local chapter or the state chapter of the American Stroke Association or its successor [, a division of the American Heart Association or its successor;];

- (f) A representative of [an organization committed to the prevention of 1 2 3 4 5 6 7 8 9 ehronie diseases: a school of public health of the Nevada System of Higher Education; (g) <u>A representative from rural Nevada</u>;
 - (h) A representative of hospitals in this State;

(i) A representative of administrators, individual health insurers, group health insurers, nonprofit hospitals, medical and dental service corporations, health maintenance organizations, collectively bargained plans, self-funded plans or other entities that pay claims under a contract for health insurance;

(j) One person selected from the list of nominees provided by the Governor

pursuant to subsection 4;

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[(h)] (k) One person selected from the list of nominees provided by the Majority Leader of the Senate pursuant to subsection 4; and

(1) One person selected from the list of nominees provided by the

Speaker of the Assembly pursuant to subsection 4.

4. On or before May 1 of each odd-numbered year, the Governor, the Majority Leader of the Senate and the Speaker of the Assembly shall each submit to the Administrator a list of nominees containing the name of:

(a) One representative of a population disproportionately affected by heart disease or stroke;

(b) One registered nurse who is licensed to practice professional nursing in this State; and

(c) One person who is a *[victim]* survivor of stroke.

- From among the nominees submitted, the Administrator shall appoint to the Committee one person from each of the three categories listed in this subsection.
- 5. The Committee shall elect a Chairman and a Vice Chairman from among its members. After the initial election, each of those officers holds office for a term of 2 years beginning on July 1 of each odd-numbered year. If a vacancy occurs in the chairmanship or vice chairmanship, the members of the Committee shall elect a replacement for the remainder of the unexpired term.

6. After the initial terms, each member of the Committee serves a term of 2 years beginning on July 1 . [of each odd-numbered year.] A member may be reappointed for additional terms of 2 years.

7. A vacancy on the Committee must be filled for the remainder of the

unexpired term in the same manner as the original appointment.

- 8. The members of the Committee serve without compensation. If sufficient money is available, each member is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally while attending meetings of the Committee or otherwise engaged in the business of the Committee.
- 9. The Health Division shall provide administrative support to the Committee.

Sec. 15. The Committee shall:

- Adopt rules for its own governance.
- Meet at least once each calendar quarter and at other times upon the call of the Chairman.
- 3. Advise and make recommendations to the Coordinator and the Health Division in carrying out the Program.
- On or before May 1 of each year, submit a written report to the Health Division summarizing the activities of the Committee and fthe effectiveness of the Plan.] any recommendations it has made.
 - In carrying out its duties, solicit suggestions and information from:
 - (a) Providers of emergency medical services;

1 (b) Associations of medical professionals; 2 (c) Hospitals; 3 (d) The Health Division; [and] 4 (e) The Board of Medical Examiners and other boards responsible for 5 issuing a license to a provider of health care \(\frac{\frac{1}{2}}{2} \); and 6 (f) Other persons with interests relating to vascular health as deemed 7 necessary by the Committee. 8 Sec. 16. [1. The Committee shall adopt the State Plan for the 9 Recommended Prevention and Treatment of Stroke. The Plan must include, 10 without limitation, recommendations for: (a) Training for practitioners licensed in this State in rapid assessment, 11 12 triage and management of victims of acute stroke. 13 (b) Protocols for the transport of victims of acute stroke to an appropriate hospital by an emergency medical responder. 14 (c) Standards for quality assurance for hospitals and other facilities that 15 provide services to victims of stroke and methods to monitor compliance with the 16 17 standards. 18 (d) The procedure by which a hospital or other facility may amend its license 19 to operate as a center for the treatment of victims of stroke pursuant to NRS 449.087. 20 21 (e) Standards for quality assurance for a hospital or other facility that operates as a center for the treatment of victims of stroke pursuant to NRS 22 23 449.087, including, without limitation, applicable guidelines of the American 24 Stroke Association or its successor. 25 (f) Guidelines for a hospital or other facility to follow when preparing a plan 26 of care for a victim of stroke. 27 (g) The information relating to victims of stroke for inclusion in the database established and maintained by the Health Division pursuant to section 18 of this 28 29 act. 30 (h) Reporting requirements for all hospitals and facilities that provide 31 services to victims of stroke. 32 (i) Guidelines for the establishment of a telemedicine network pursuant to 33 section 18 of this act. 34 (j) Procedures to assist a center for the treatment of victims of stroke in procuring grants of money to implement the standards for quality assurance 35 36 recommended pursuant to paragraph (e). (k) Methods for reducing health care costs associated with stroke, heart 37 38 disease and other vascular disease. 2. The standards for quality assurance recommended pursuant to paragraph (c) of subsection 1 must include, without limitation, a declaration that: 39 40 (a) All victims of stroke should receive rapid triage and an assessment by a 41 competent provider of health care to increase the likelihood of a favorable 42 43 poststroke outcome; (b) Candidacy for reperfusion therapy should be established in a timely 44 manner for all victims of acute ischemic stroke; 45 (c) All victims of stroke deserve access to appropriate rehabilitation services; 46 47 (d) Each person with a disproportionate risk for stroke should be properly 48 evaluated to develop an appropriate plan for the prevention of stroke; and (e) All victims of stroke deserve access to secondary prevention that has 49

3. The Committee shall review the Plan annually and make revisions as it

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proven effective.

deems necessary.] (Deleted by amendment.)

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- **Board.**] (Deleted by amendment.) Sec. 18. The Health Division shall:
- I. [Review all recommendations contained in the Plan periodically and make recommendations to the State Board of Health for the adoption of regulations to earry out a part or parts of the Plan within the jurisdiction of the

Sec. 17. [The State Board of Health shall review all recommendations

contained in the Plan periodically and adopt regulations if deemed necessary by

the Board to earry out a part or parts of the Plan within the jurisdiction of the

- 2. Establish and maintain a database of information relating to victims of stroke in this State. The Health Division shall consider the recommendations contained in the Plan when determining the information for inclusion in the database.
- = 3.1 Conduct public education campaigns to increase public awareness about the signs and symptoms of stroke, heart disease and other vascular disease and the need to call emergency medical services at the onset of symptoms. The campaigns must include, without limitation, providing educational materials and information concerning vascular health in written form, public service announcements and the development and maintenance of a website.
- [4. Establish a system to provide, via telemedicine and other electronic means, triage, assessment and treatment to victims of stroke in rural areas of this State. The Health Division shall consider the guidelines contained in the Plan in establishing the system.
- 5. Provide assistance to facilities licensed to operate as a center for the treatment of victims of stroke pursuant to NRS 449.087 in obtaining grants, gifts and donations.
- —6.] 2. On or before July 1 of each year, prepare and submit a report to the Governor and the Director of the Legislative Counsel Bureau for transmittal to the Legislature which summarizes:
 - (a) The activities of the Coordinator and the Committee;
- (b) The effectiveness of the public education campaigns conducted pursuant to this section;
 - (c) The activities undertaken to carry out the Program; and
- (d) [The effectiveness of the Plan; and (e)] Any recommendations of the Health Division, the Coordinator or the Committee concerning the prevention and treatment of stroke, heart disease and other vascular disease in this State.
 - Sec. 19. 1. The Health Division may:
- (a) Enter into contracts for any service necessary to carry out the provisions of sections 2 to 19, inclusive, of this act; and
- (b) Apply for and accept gifts, grants, donations and bequests from any source to carry out the provisions of sections 2 to 19, inclusive, of this act.
- 2. Any money collected pursuant to subsection 1 and any money appropriated to carry out the provisions of sections 2 to 19, inclusive, of this act:
- (a) Must be deposited in the State Treasury and accounted for separately in the State General Fund; and
- (b) Except as otherwise provided by the terms of a specific gift, grant, donation or bequest, must only be expended to carry out the provisions of sections 2 to 19, inclusive, of this act.
- The Administrator shall administer the account. Any interest or income earned on the money in the account must be credited to the account.
- 4. Any claims against the account must be paid as other claims against the State are paid.

- Sec. 20. [NRS 449.087 is hereby amended to read as follow 1 1. A licensee must obtain the approval of the Health 2 3 4 5 6 7 amend his license to operate a facility before the addition of any of the following (a) The intensive care of newborn babies. (b) The treatment of burns. (c) The transplant of organs. 8 (d) The performance of open-heart surgery. 9 (e) A center for the treatment of trauma. 10 (f) A center for the treatment of victims of stroke. 2. The Health Division shall approve an application to amend a license to allow a facility to provide any of the services described in subsection 1 if the 11 12 applicant satisfies the requirements contained in NRS 449.080. The Health Division 13 may revoke its approval if the licensee fails to maintain substantial compliance with 14 standards approved by the Board for the provision of such services, or with any 15 16 conditions included in the written approval of the Director issued pursuant to the provisions of NRS 439A.100. 17 3. The Board shall consider standards adopted by appropriate national 18 organizations as a guide for adopting standards for the approval of the provision of 19 services pursuant to this section.

 4. In addition to subsection 3, the Board shall consider the 20 21 recommendations of the Advisory Committee for Vascular Health created by 22 section 14 of this act relating to the standards for a center for the treatment of 23 24 victims of stroke.] (Deleted by amendment.) 25 Sec. 21. 1. On or before [September 1, 2007,] March 1, 2008, the 26 Administrator of the Health Division of the Department of Health and Human 27 Services shall appoint the following members to the Advisory Committee for Vascular Health created by section 14 of this act: 28 29 (a) One member each pursuant to paragraphs (a), {(b),} (c), (f), {and (h)} (g), 30 (j), (k) and (l) of subsection 3 of section 14 of this act to an initial term 31 commencing on [September 1, 2007,] March 1, 2008, and expiring on June 30, [2008.] 2009. 32 33 (b) One member each pursuant to paragraphs $\frac{\{(a), \}}{\{(b), (d), \frac{\{(e), \{g\} \text{ and } \{i\}\}}{\{b\}}\}}$ 34 and (i) of subsection 3 of section 14 of this act and two members pursuant to paragraph (e) of subsection 3 of section 14 of this act to an initial term commencing on [September 1, 2007,] March 1, 2008, and expiring on June 30, 35 36 37 <u>12009.</u> 38 The Advisory Committee for Vascular Health created by section 14 of this act shall adopt the State Plan for the Recommended Prevention and Treatment of 39 Stroke pursuant to section 16 of this act on or before March 1, 2008.] 2010.

 2. On or before February 1, 2008, the Governor, the Majority Leader of 40 41 the Senate and the Speaker of the Assembly shall submit lists of nominees for 42 43 appointment to the Advisory Committee for Vascular Health to the Administrator of the Health Division pursuant to subsection 4 of section 14 of 44
 - **Sec. 22.** This act becomes effective on July 1, 2007.

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this act.