GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2005

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HOUSE BILL 1860 Corrected Copy 5/16/06 Committee Substitute Favorable 7/6/06 Committee Substitute #2 Favorable 7/11/06

Short Title: Stroke Advisory Council.	(Public)
Sponsors:	
Referred to:	
May 10, 2006	
A BILL TO BE ENTITLED AN ACT TO DIRECT THE SECRETARY OF HEALTH AND HUMAN TO ESTABLISH AND APPOINT A STROKE ADVISORY COUNCIL. Whereas streke is one of the leading causes of long term disability	
Whereas, stroke is one of the leading causes of long-term disability Whereas, as many as twenty-five percent of stroke survivors are produced; and	permanently
Whereas, stroke is the third leading cause of death in North Carolin Whereas, North Carolina is situated in the country's "Stroke Belt," Carolina ranking fourth in the nation for stroke-related death; and	
Whereas, 5,000 North Carolinians die of stroke each year; and Whereas, nearly thirty percent of all people who have strokes a than 65 years of age; and	are younger
Whereas, as the population of North Carolina ages, death and dissipations will increase dramatically if this State does not implement strategies sound research that will improve the outcomes of stroke victims across this State does not implement strategies sound research that will improve the outcomes of stroke victims across this State does not implement strategies and the stroke victims across this State does not implement strategies and the stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across this State does not implement strategies are stroke victims across the stroke victims across this stroke victims across the victims across the stroke victims across the stroke victims across the stroke victims across the stroke victims across the strok	es based on State; and
recommended the establishment of coordinated systems of care as a means of the level of medical treatment that patients receive; and	f improving
Whereas, in agreement with the Institute of Medicine report, natio experts from a wide range of disciplines have concluded that improving the of stroke care through the development of statewide stroke care systems means of reducing the burden of stroke on a community basis; and	organization

Whereas, there has not been an appreciable change in the organization of

SECTION 1. G.S. 143-509 is amended by adding the following new

stroke care in the State over recent years; Now, therefore,

The General Assembly of North Carolina enacts:

subdivision to read:

"§ 143-509. Powers and duties of Secretary.

The Secretary of the Department of Health and Human Services has full responsibilities for supervision and direction of the emergency medical services program and, to that end, shall accomplish all of the following:

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- "(13) Establish and maintain a Stroke Advisory Council, which shall advise the Secretary regarding the development of a statewide system of stroke care that shall include, among other items, a system for identifying and disseminating information about the location of primary stroke centers. The Secretary shall appoint the members of the Stroke Advisory Council as follows:
 - a. Three physicians, one upon the recommendation of the North Carolina Medical Society, one upon the recommendation of the North Carolina College of Emergency Physicians, and one who specializes in the treatment of strokes.
 - <u>b.</u> A hospital administrator recommended by the North Carolina Hospital Association.
 - <u>c.</u> <u>A representative from the American Heart Association.</u>
 - d. A representative from the North Carolina Association of Rescue and Emergency Medical Services.
 - e. Other relevant experts as the Secretary deems beneficial to achieve the goals of the Stroke Advisory Council."

SECTION 2. Not later than February 15, 2007, the Department of Health and Human Services shall report to the Joint Legislative Commission on Governmental Operations, the House of Representatives Appropriations Subcommittee on Health and Human Services, the Senate Appropriations Committee on Health and Human Services, and the Fiscal Research Division on the development of a statewide system of stroke care.

SECTION 3. Notwithstanding any other provision of law to the contrary, the members of the Stroke Advisory Council shall, for the 2006-2007 fiscal year only, serve without compensation and without reimbursement for travel, food, and lodging.

SECTION 4. This act is effective when it becomes law.