

SENATE COMMITTEE OF REFERENCE REPORT

Chairman of Committee

April 17, 2013
Date

Committee on Health & Human Services.

After consideration on the merits, the Committee recommends the following:

SB13-225 be amended as follows, and as so amended, be referred to the Committee on Appropriations with favorable recommendation:

1 Amend printed bill, strike everything below the enacting clause and
2 substitute:

3 "SECTION 1. In Colorado Revised Statutes, **add** 25-3-114,
4 25-3-115, and 25-3-116 as follows:

5 **25-3-114. STEMI task force - creation - membership - duties**
6 **- report - repeal.** (1) (a) THERE IS HEREBY CREATED IN THE DEPARTMENT
7 THE STEMI TASK FORCE. NO LATER THAN AUGUST 1, 2013, THE
8 GOVERNOR SHALL APPOINT FIFTEEN MEMBERS TO THE TASK FORCE AS
9 FOLLOWS:

10 (I) ONE MEMBER WHO IS A COLORADO RESIDENT REPRESENTING A
11 NATIONAL ASSOCIATION WHOSE GOAL IS TO ELIMINATE CARDIOVASCULAR
12 DISEASE AND STROKE;

13 (II) ONE MEMBER WHO IS A CARDIOLOGIST PRACTICING IN THIS
14 STATE;

15 (III) ONE MEMBER WHO IS AN INTERVENTIONAL CARDIOLOGIST
16 PRACTICING IN THE WESTERN SLOPE AREA OF THE STATE;

17 (IV) ONE MEMBER WHO IS AN INTERVENTIONAL CARDIOLOGIST
18 PRACTICING IN THE FRONT RANGE AREA OF THE STATE;

19 (V) ONE MEMBER REPRESENTING A STATEWIDE ASSOCIATION OF
20 CARDIOLOGISTS;

21 (VI) ONE MEMBER REPRESENTING A STATEWIDE ASSOCIATION OF
22 PHYSICIANS;

23 (VII) ONE MEMBER REPRESENTING A STATEWIDE HOSPITAL

1 ASSOCIATION;
2 (VIII) ONE MEMBER REPRESENTING AN EMERGENCY PHYSICIANS
3 ASSOCIATION;
4 (IX) ONE MEMBER WHO IS AN EMERGENCY MEDICAL SERVICE
5 PROVIDER, AS DEFINED IN SECTION 25-3.5-103 (8);
6 (X) ONE MEMBER WHO IS A REGISTERED NURSE INVOLVED IN
7 CARDIAC CARE;
8 (XI) ONE HOSPITAL ADMINISTRATOR FROM A HOSPITAL LOCATED
9 IN A RURAL AREA OF THE STATE;
10 (XII) ONE HOSPITAL ADMINISTRATOR FROM A HOSPITAL LOCATED
11 IN AN URBAN AREA OF THE STATE;
12 (XIII) ONE MEMBER OF THE PUBLIC WHO HAS SUFFERED A STEMI
13 HEART ATTACK; AND
14 (XIV) TWO MEMBERS WITH EXPERTISE IN CARDIOVASCULAR DATA
15 REGISTRIES, ONE OF WHOM IS A CARDIOLOGIST.
16 (b) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OR THE
17 EXECUTIVE DIRECTOR'S DESIGNEE SHALL SERVE AS AN EX OFFICIO MEMBER
18 OF THE TASK FORCE.
19 (2) (a) THE TASK FORCE SHALL STUDY AND MAKE
20 RECOMMENDATIONS FOR DEVELOPING A STATEWIDE PLAN TO IMPROVE
21 QUALITY OF CARE TO STEMI PATIENTS. IN CONDUCTING THE STUDY, THE
22 TASK FORCE SHALL EXPLORE THE FOLLOWING ISSUES, WITHOUT
23 LIMITATION:
24 (I) CREATION OF A STATE DATABASE OR REGISTRY CONSISTING OF
25 DATA ON STEMI CARE THAT MIRRORS THE DATA HOSPITALS SUBMIT TO
26 NATIONALLY RECOGNIZED ORGANIZATIONS;
27 (II) ACCESS TO AGGREGATED STEMI DATA, WHICH MUST
28 EXCLUDE ANY IDENTIFYING OR CONFIDENTIAL INFORMATION ABOUT THE
29 REPORTING HOSPITAL OR PATIENTS TREATED BY THE HOSPITAL, FROM A
30 STATE DATABASE THAT MAY BE DEVELOPED OR FROM A NATIONALLY
31 RECOGNIZED ORGANIZATION;
32 (III) A PLAN THAT WOULD ENCOURAGE RURAL AND URBAN
33 HOSPITALS TO COORDINATE SERVICES FOR THE NECESSARY REFERRAL OR
34 RECEIPT OF PATIENTS REQUIRING STEMI CARE IN THE STATE; AND
35 (IV) THE CRITERIA USED BY NATIONALLY RECOGNIZED BODIES FOR
36 DESIGNATING A HOSPITAL IN STEMI CARE AND WHETHER A DESIGNATION
37 IS APPROPRIATE OR NEEDED TO ASSURE ACCESS TO THE BEST QUALITY
38 CARE FOR COLORADO RESIDENTS WITH STEMI EVENTS..
39 (b) BY JANUARY 31, 2014, THE TASK FORCE SHALL SUBMIT AN
40 INITIAL REPORT, AND BY JULY 31, 2015, THE TASK FORCE SHALL SUBMIT
41 ITS FINAL REPORT, SPECIFYING ITS FINDINGS AND RECOMMENDATIONS TO

1 THE HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE, THE
2 HEALTH, INSURANCE, AND ENVIRONMENT COMMITTEE OF THE HOUSE OF
3 REPRESENTATIVES, OR THEIR SUCCESSOR COMMITTEES, AND THE
4 DEPARTMENT. THE TASK FORCE SHALL INCLUDE IN ITS REPORTS A
5 RECOMMENDATION ON WHETHER A DESIGNATION OF A HOSPITAL IN STEMI
6 CARE IS APPROPRIATE OR NEEDED TO ASSURE ACCESS TO THE BEST
7 QUALITY CARE FOR COLORADO RESIDENTS WITH STEMI EVENTS.

8 (3) THE DEPARTMENT MAY ACCEPT AND EXPEND, SUBJECT TO
9 APPROPRIATION BY THE GENERAL ASSEMBLY, GIFTS, GRANTS, AND
10 DONATIONS TO PAY THE DIRECT EXPENSES OF THE TASK FORCE. THE
11 DEPARTMENT SHALL TRANSMIT ANY MONETARY GIFTS, GRANTS, OR
12 DONATIONS IT RECEIVES TO THE STATE TREASURER FOR DEPOSIT IN THE
13 HEALTH FACILITIES GENERAL LICENSURE CASH FUND, AND THOSE MONEYS
14 MAY BE USED ONLY TO PAY THE DIRECT EXPENSES OF THE TASK FORCE.

15 (4) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE
16 REQUIRES:

17 (a) "DEPARTMENT" MEANS THE DEPARTMENT OF PUBLIC HEALTH
18 AND ENVIRONMENT.

19 (b) "STEMI" MEANS ST-ELEVATION MYOCARDIAL INFARCTION.

20 (5) THIS SECTION IS REPEALED, EFFECTIVE AUGUST 1, 2015.

21 **25-3-115. Stroke advisory board - creation - membership -**
22 **duties - report - repeal.** (1) (a) THERE IS HEREBY CREATED IN THE
23 DEPARTMENT THE STROKE ADVISORY BOARD, THE PURPOSE OF WHICH IS
24 TO EVALUATE POTENTIAL STRATEGIES FOR STROKE PREVENTION AND
25 TREATMENT AND DEVELOP A STATEWIDE NEEDS ASSESSMENT IDENTIFYING
26 RELEVANT RESOURCES. NO LATER THAN AUGUST 1, 2013, THE GOVERNOR
27 SHALL APPOINT SEVENTEEN MEMBERS TO THE STROKE ADVISORY BOARD
28 AS FOLLOWS:

29 (I) SIX PHYSICIANS WHO ARE ACTIVELY INVOLVED IN STROKE CARE
30 AND WHO SATISFY THE FOLLOWING CRITERIA: ONE PHYSICIAN WHO IS
31 BOARD-CERTIFIED IN PRIMARY CARE; ONE PHYSICIAN WHO IS
32 BOARD-CERTIFIED IN VASCULAR NEUROLOGY; ONE PHYSICIAN WHO IS
33 PRIVILEGED AND ACTIVELY PRACTICING INTERVENTIONAL
34 NEURORADIOLOGY; ONE PHYSICIAN WHO IS BOARD-CERTIFIED IN
35 NEUROSURGERY; ONE PHYSICIAN REPRESENTING A STATEWIDE CHAPTER
36 OF EMERGENCY PHYSICIANS; AND ONE PHYSICIAN WHO IS A
37 BOARD-CERTIFIED NEUROLOGIST SERVING PATIENTS IN A RURAL AREA OF
38 THE STATE;

39 (II) ONE MEMBER REPRESENTING A STATEWIDE ASSOCIATION OF
40 PHYSICIANS;

41 (III) ONE MEMBER REPRESENTING A STATEWIDE HOSPITAL

1 ASSOCIATION;
2 (IV) ONE MEMBER WHO IS AN EMERGENCY MEDICAL SERVICE
3 PROVIDER, AS DEFINED IN SECTION 25-3.5-103 (8);
4 (V) ONE MEMBER WHO IS A REGISTERED NURSE INVOLVED IN
5 STROKE CARE;
6 (VI) ONE HOSPITAL ADMINISTRATOR FROM A HOSPITAL LOCATED
7 IN A RURAL AREA OF THE STATE;
8 (VII) ONE HOSPITAL ADMINISTRATOR FROM A HOSPITAL LOCATED
9 IN AN URBAN AREA OF THE STATE;
10 (VIII) ONE REPRESENTATIVE FROM A STROKE REHABILITATION
11 FACILITY;
12 (IX) ONE MEMBER WHO IS A COLORADO RESIDENT REPRESENTING
13 A NATIONAL ASSOCIATION WHOSE GOAL IS TO ELIMINATE
14 CARDIOVASCULAR DISEASE AND STROKE;
15 (X) ONE MEMBER WHO IS A PHYSICAL OR OCCUPATIONAL
16 THERAPIST ACTIVELY INVOLVED IN STROKE CARE;
17 (XI) ONE MEMBER OF THE PUBLIC WHO HAS SUFFERED A STROKE
18 OR IS THE CARE GIVER OF A PERSON WHO HAS SUFFERED A STROKE; AND
19 (XII) ONE MEMBER WHO IS AN EXPERT IN STROKE DATABASE
20 MANAGEMENT.
21 (b) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OR THE
22 EXECUTIVE DIRECTOR'S DESIGNEE SHALL SERVE AS AN EX OFFICIO MEMBER
23 OF THE STROKE ADVISORY BOARD.
24 (2) (a) THE STROKE ADVISORY BOARD SHALL STUDY AND MAKE
25 RECOMMENDATIONS FOR DEVELOPING A STATEWIDE PLAN TO IMPROVE
26 QUALITY OF CARE FOR STROKE PATIENTS. IN CONDUCTING THE STUDY, THE
27 STROKE ADVISORY BOARD SHALL EXPLORE THE FOLLOWING ISSUES,
28 WITHOUT LIMITATION:
29 (I) CREATION OF A STATE DATABASE OR REGISTRY CONSISTING OF
30 DATA ON STROKE CARE THAT MIRRORS THE DATA HOSPITALS SUBMIT TO
31 NATIONALLY RECOGNIZED ORGANIZATIONS;
32 (II) ACCESS TO AGGREGATED STROKE DATA, WHICH MUST
33 EXCLUDE ANY IDENTIFYING OR CONFIDENTIAL INFORMATION ABOUT THE
34 REPORTING HOSPITAL OR PATIENTS TREATED BY THE HOSPITAL, FROM A
35 STATE DATABASE THAT MAY BE DEVELOPED OR FROM A NATIONALLY
36 RECOGNIZED ORGANIZATION BY THE ADVISORY BOARD, BY ANY PERSON
37 WHO SUBMITS A WRITTEN REQUEST FOR THE DATA;
38 (III) EVALUATION OF CURRENTLY AVAILABLE STROKE
39 TREATMENTS AND THE DEVELOPMENT OF RECOMMENDATIONS, BASED ON
40 MEDICAL EVIDENCE, FOR WAYS TO IMPROVE STROKE PREVENTION AND
41 TREATMENT;

1 (IV) A PLAN THAT WOULD ENCOURAGE RURAL AND URBAN
2 HOSPITALS TO COORDINATE SERVICES FOR THE NECESSARY REFERRAL OR
3 RECEIPT OF PATIENTS REQUIRING STROKE CARE IN THE STATE; AND

4 (V) THE CRITERIA USED BY NATIONALLY RECOGNIZED BODIES FOR
5 DESIGNATING A HOSPITAL IN STROKE CARE AND WHETHER A DESIGNATION
6 IS APPROPRIATE OR NEEDED TO ASSURE ACCESS TO THE BEST QUALITY
7 CARE FOR COLORADO RESIDENTS WITH STROKE EVENTS.

8 (b) BY JANUARY 31, 2014, AND BY EACH JANUARY 1 THEREAFTER,
9 THE STROKE ADVISORY BOARD SHALL SUBMIT A REPORT SPECIFYING ITS
10 FINDINGS AND RECOMMENDATIONS TO THE HEALTH AND HUMAN SERVICES
11 COMMITTEE OF THE SENATE, THE HEALTH, INSURANCE, AND ENVIRONMENT
12 COMMITTEE OF THE HOUSE OF REPRESENTATIVES, OR THEIR SUCCESSOR
13 COMMITTEES, AND THE DEPARTMENT. THE STROKE ADVISORY BOARD
14 SHALL INCLUDE IN ITS REPORT A RECOMMENDATION ON WHETHER A
15 DESIGNATION OF A HOSPITAL IN STROKE CARE IS APPROPRIATE OR NEEDED
16 TO ASSURE ACCESS TO THE BEST QUALITY CARE FOR COLORADO
17 RESIDENTS WITH STROKE EVENTS.

18 (3) THE DEPARTMENT MAY ACCEPT AND EXPEND, SUBJECT TO
19 APPROPRIATION BY THE GENERAL ASSEMBLY, GIFTS, GRANTS, AND
20 DONATIONS TO PAY THE DIRECT EXPENSES OF THE STROKE ADVISORY
21 BOARD. THE DEPARTMENT SHALL TRANSMIT ANY MONETARY GIFTS,
22 GRANTS, OR DONATIONS IT RECEIVES TO THE STATE TREASURER FOR
23 DEPOSIT IN THE HEALTH FACILITIES GENERAL LICENSURE CASH FUND, AND
24 THOSE MONEYS MAY BE USED ONLY TO PAY THE DIRECT EXPENSES OF THE
25 STROKE ADVISORY BOARD.

26 (4) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE
27 REQUIRES, "DEPARTMENT" MEANS THE DEPARTMENT OF PUBLIC HEALTH
28 AND ENVIRONMENT.

29 (5) THIS SECTION IS REPEALED, EFFECTIVE SEPTEMBER 1, 2018.
30 PRIOR TO THE REPEAL, THE DEPARTMENT OF REGULATORY AGENCIES
31 SHALL REVIEW THE FUNCTIONS OF THE STROKE ADVISORY BOARD IN
32 ACCORDANCE WITH SECTION 2-3-1203, C.R.S.

33 **25-3-116. Department recognition of national certification -**
34 **suspension or revocation of recognition.** (1) A HOSPITAL THAT HAS AN
35 ACCREDITATION, CERTIFICATION, OR DESIGNATION IN STROKE OR STEMI
36 CARE FROM A NATIONALLY RECOGNIZED ACCREDITING BODY, INCLUDING
37 BUT NOT LIMITED TO A CERTIFICATION AS A COMPREHENSIVE STROKE
38 CENTER OR PRIMARY STROKE CENTER BY THE JOINT COMMISSION ON
39 ACCREDITATION OF HEALTH CARE ORGANIZATIONS AND PROGRAMS OR ITS
40 SUCCESSOR ORGANIZATION OR AN ACCREDITATION AS A STEMI
41 RECEIVING CENTER OR STEMI REFERRAL CENTER BY THE SOCIETY FOR

1 CARDIOVASCULAR PATIENT CARE OR ITS SUCCESSOR ORGANIZATION, MAY
2 SEND INFORMATION AND SUPPORTING DOCUMENTATION TO THE
3 DEPARTMENT. THE DEPARTMENT SHALL MAKE A HOSPITAL'S NATIONAL
4 ACCREDITATION, CERTIFICATION, OR DESIGNATION AVAILABLE TO THE
5 PUBLIC IN A MANNER DETERMINED BY THE DEPARTMENT.

6 (2) THE DEPARTMENT SHALL DEEM A HOSPITAL THAT IS
7 CURRENTLY ACCREDITED, CERTIFIED, OR DESIGNATED BY A NATIONALLY
8 RECOGNIZED ACCREDITING BODY AS SATISFYING THE REQUIREMENTS FOR
9 RECOGNITION AND PUBLICATION BY THE DEPARTMENT. THE DEPARTMENT
10 MAY SUSPEND OR REVOKE A RECOGNITION AND PUBLICATION OF A
11 HOSPITAL'S ACCREDITATION, CERTIFICATION, OR DESIGNATION IF THE
12 DEPARTMENT DETERMINES, AFTER NOTICE AND HEARING IN ACCORDANCE
13 WITH THE "STATE ADMINISTRATIVE PROCEDURE ACT", ARTICLE 4 OF TITLE
14 24, C.R.S., THAT THE HOSPITAL NO LONGER HOLDS AN ACTIVE
15 ACCREDITATION, CERTIFICATION, OR DESIGNATION FROM A NATIONALLY
16 RECOGNIZED CERTIFYING BODY.

17 (3) WHETHER A HOSPITAL ATTAINS A NATIONAL ACCREDITATION,
18 CERTIFICATION, OR DESIGNATION IN STROKE OR STEMI CARE HAS NO
19 BEARING ON, OR CONNECTION WITH, THE LICENSING OR CERTIFICATION OF
20 THE HOSPITAL BY THE DEPARTMENT PURSUANT TO SECTION 25-1.5-103 (1)
21 (a).

22 (4) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE
23 REQUIRES:

24 (a) "DEPARTMENT" MEANS THE DEPARTMENT OF PUBLIC HEALTH
25 AND ENVIRONMENT.

26 (b) "STEMI" MEANS ST-ELEVATION MYOCARDIAL INFARCTION.

27 **SECTION 2.** In Colorado Revised Statutes, 2-3-1203, **add** (3)
28 (ee.5) as follows:

29 **2-3-1203. Sunset review of advisory committees.** (3) The
30 following dates are the dates for which the statutory authorization for the
31 designated advisory committees is scheduled for repeal:

32 (ee.5) SEPTEMBER 1, 2018:

33 (I) THE STROKE ADVISORY BOARD CREATED IN SECTION 25-3-115,
34 C.R.S.;

35 **SECTION 3. Safety clause.** The general assembly hereby finds,
36 determines, and declares that this act is necessary for the immediate
37 preservation of the public peace, health, and safety."

38 Page 1, line 102, strike "INCIDENTS," and substitute "INCIDENTS."

39 Page 1, strike lines 103 through 110.

** ** ** ** **