

HOUSE No. 4640

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, April 16, 2020.

The committee on Public Health, to whom were referred the petition (accompanied by bill, House, No. 1858) of Paul Brodeur and Jason M. Lewis relative to pre-hospital care protocols and point-of-entry plans related to the assessment, treatment and transport of stroke patients by licensed emergency medical services' providers, and the petition (accompanied by bill, House, No. 3491) of Mark J. Cusack and others for legislation to establish safeguards to prevent death and disability from stroke, reports recommending that the accompanying bill (House, No. 4640) ought to pass.

For the committee,

JOHN J. MAHONEY.

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**In the One Hundred and Ninety-First General Court
(2019-2020)**

An Act to create a stroke system of care.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Notwithstanding any general or special law to the contrary, the department
2 of public health shall promulgate regulations that implement a statewide standard pre-hospital
3 care protocol related to the assessment, treatment, and transport of stroke patients by emergency
4 medical services providers to a hospital designated to care for stroke patients. Such protocol shall
5 be based on national evidence-based guidelines for transport of stroke patients, consider crossing
6 state lines, and include plans for the triage and transport of suspected stroke patients, including,
7 but not limited to, those who may have an emergent large vessel occlusion, to an appropriate
8 facility within a specified time frame of onset of symptoms.

9 The protocol shall include statewide criteria for designating hospitals in a system,
10 including but not limited to a thrombectomy-capable designation or other tiered designation as
11 the department shall determine, to treat stroke level patients based on patient acuity and may
12 include additional criteria to determine the most appropriate destination for the level of care
13 required. In developing criteria, the department shall consider:

14 (i) Designation models and criteria developed by The Joint Commission, DNV GL
15 Healthcare, and any other national certifying body recognized by the federal Centers for
16 Medicare and Medicaid Services;

17 (ii) Designation models and criteria adopted by other states, taking into account the
18 differences in geography and health care resources of such other states; and

19 (iii) the clinical and operational capability of a facility to provide stroke services,
20 including emergency and ancillary stroke services.

21 The department and regional emergency medical services councils, as defined in section
22 1 of chapter 111C, shall annually review and update, if appropriate, their pre-hospital care
23 protocols and point-of-entry plans to ensure stroke patients are transported to the most
24 appropriate facility in accordance with this section.

25 SECTION 2. The department of public health, in consultation with the center for health
26 information and analysis, shall incorporate national evidence-based quality and utilization
27 metrics for stroke care into the standard quality measure set established under section 14 of
28 chapter 12C of the General Laws. The department shall consider current stroke data that is
29 reported to the department of public health and measures in current use in national quality
30 improvement programs including, but not limited to, the federal Centers for Medicare and
31 Medicaid Services, the National Quality Forum, or other nationally recognized data platforms.

32 SECTION 3. Not later than 3 months after the effective date of this act, the department of
33 public health shall promulgate regulations pursuant to section 1 of this act.