

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2013

SESSION LAW 2013-44  
SENATE BILL 456

AN ACT TO REQUIRE THE DEPARTMENT OF HEALTH AND HUMAN SERVICES TO DESIGNATE QUALIFIED HOSPITALS AS PRIMARY STROKE CENTERS, AS RECOMMENDED BY THE JUSTUS-WARREN HEART DISEASE AND STROKE PREVENTION TASK FORCE.

Whereas, stroke is the fourth leading cause of death and a leading cause of disability among North Carolinians; and

Whereas, North Carolina is part of the "stroke belt," an eight to 12 state region that historically has had substantially higher stroke death rates compared to the rest of the nation; and

Whereas, the rapid identification, diagnosis, and treatment of stroke can save the lives of stroke patients and in some cases reverse neurological damage such as paralysis and speech and language impairments, leaving stroke patients with few or minimal neurological deficits; and

Whereas, the designation of acute care hospitals as primary stroke centers is designed to improve the efficiency of care for stroke patients and increase the use of acute stroke therapies such as thrombolytic therapies in order to reduce stroke-related complications, reduce morbidity and mortality, improve long-term outcomes, and increase patient satisfaction; and

Whereas, 30 acute care hospitals in North Carolina have received Joint Commission certification as primary stroke centers; and

Whereas, all North Carolinians should be able to access the high quality stroke care offered by primary stroke centers and should, therefore, know which acute care hospitals in this State have been certified as primary stroke centers by the Joint Commission; Now, therefore,

The General Assembly of North Carolina enacts:

**SECTION 1.** Article 5 of Chapter 131E of the General Statutes is amended by adding a new section to read:

**§ 131E-78.5. Designation as primary stroke center.**

(a) The Department shall designate as a primary stroke center any hospital licensed under this Article that demonstrates to the Department that the hospital is certified by the Joint Commission or other nationally recognized accrediting body that requires conformance to best practices for stroke care in order to be identified as a primary stroke center. A hospital that is certified by the Joint Commission or other nationally recognized accrediting body that requires conformance to best practices for stroke care in order to be identified as a primary stroke center shall report the certification to the Department within 90 days of receiving that certification. A hospital shall inform the Department of any changes to its certification status within 30 days of any change.

(b) Each hospital designated as a primary stroke center pursuant to this section shall make efforts to coordinate the provision of appropriate acute stroke care with other hospitals licensed in this State through a formal written agreement. The agreement shall, at a minimum, address (i) transportation of acute stroke patients to hospitals designated as primary stroke centers and (ii) acceptance by hospitals designated as primary stroke centers of acute stroke patients initially treated at hospitals that are not capable of providing appropriate stroke care.

(c) The Department shall maintain within the Division of Health Service Regulation, Office of Emergency Services, a list of the hospitals designated as primary stroke centers in accordance with this section and post the list on the Department's Internet Web site. Annually



on June 1, the Department shall transmit this list to the medical director of each licensed emergency medical services provider in this State.

(d) A hospital licensed under this Article shall not advertise or hold itself out to the public as a primary stroke center unless certified as a primary stroke center by the Joint Commission or other nationally recognized accrediting body that requires conformance to best practices for stroke care in order to be identified as a primary stroke center.

(e) Nothing in this section shall be construed to do any of the following:

(1) Establish a standard of medical practice for stroke patients.

(2) Restrict in any way the authority of any hospital to provide services authorized under its hospital license.

(f) The Department may adopt rules to implement the provisions of this section."

**SECTION 2.** This act becomes effective October 1, 2013.

In the General Assembly read three times and ratified this the 2<sup>nd</sup> day of May, 2013.

s/ Daniel J. Forest  
President of the Senate

s/ Paul Stam  
Speaker Pro Tempore of the House of Representatives

s/ Pat McCrory  
Governor

Approved 4:49 p.m. this 8<sup>th</sup> day of May, 2013