

HOUSE BILL No. 1213

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-18-2-109.1; IC 16-41-17.5.

Synopsis: Statewide stroke plan. Requires the Indiana department of health (state department) to establish and implement a statewide stroke plan. Sets forth requirements of the plan and requirements for certain health care providers to report stroke data. Requires the state department to establish a data base for the reported data and sets forth additional requirements. Requires the state department to annually report certain stroke data to the governor and the executive director of the legislative services agency.

Effective: July 1, 2024.

Zent

January 9, 2024, read first time and referred to Committee on Public Health.



Second Regular Session of the 123rd General Assembly (2024)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2023 Regular Session of the General Assembly.

HOUSE BILL No. 1213

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 16-18-2-109.1, AS AMENDED BY P.L.32-2021,
- 2 SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
- 3 JULY 1, 2024]: Sec. 109.1. "Emergency medical dispatch agency", for
- 4 purposes of IC 16-31-3.5 **and IC 16-41-17.5**, has the meaning set forth
- 5 in ~~IC 16-31-3.5-1~~ **IC 16-31-3.5-1(c)**.
- 6 SECTION 2. IC 16-41-17.5 IS ADDED TO THE INDIANA CODE
- 7 AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE
- 8 JULY 1, 2024]:
- 9 **Chapter 17.5. Prevention and Treatment Programs: Statewide**
- 10 **Stroke Plan**
- 11 **Sec. 1. (a) The state department shall establish and implement**
- 12 **a statewide stroke plan for the purpose of achieving continuous**
- 13 **quality improvements in stroke response and treatment in Indiana.**
- 14 **(b) The state department shall coordinate with national health**
- 15 **organizations that specialize in stroke quality improvement in the**
- 16 **establishment of the statewide plan.**
- 17 **Sec. 2. The statewide plan required under section 1 of this**



1 chapter must include the following:

2 (1) A statewide stroke data base that compiles information
3 and statistics on stroke care in Indiana, in accordance with
4 stroke consensus metrics developed and approved by the
5 American Heart Association, the American Stroke
6 Association, the Centers for Disease Control and Prevention,
7 and the Joint Commission.

8 (2) Use of the Get With The Guidelines-Stroke program
9 maintained by the American Heart Association and the
10 American Stroke Association or a nationally recognized data
11 set platform that includes strong confidentiality standards
12 under subdivision (1) and this subdivision.

13 Sec. 3. (a) A hospital that is licensed under IC 16-21 and
14 certified as a:

- 15 (1) comprehensive stroke center;
16 (2) thrombectomy-capable stroke center; or
17 (3) primary stroke center;

18 as described in IC 16-31-2-9.5(b) shall report to the state
19 department data concerning each stroke case and the treatment of
20 these individuals in Indiana with a confirmed diagnosis of a stroke.
21 A hospital described under this subsection that provides
22 mechanical endovascular thrombectomy shall report data
23 concerning the process, any complications, and outcomes of the
24 procedure.

25 (b) The following may report the data described in subsection
26 (a) to the state department:

- 27 (1) A hospital that is licensed under IC 16-21 and that is
28 certified as an acute stroke ready hospital.
29 (2) An emergency medical dispatch agency.

30 (c) The state department shall do the following:

- 31 (1) Develop and maintain a data base for the storage of data
32 reported under this section.
33 (2) Establish a procedure for hospitals and emergency
34 medical dispatch agencies to report the data under this
35 section.
36 (3) Encourage and facilitate the sharing of information and
37 data by health care providers and health care systems for the
38 purpose of improving the quality of care provided to stroke
39 patients in Indiana.
40 (4) Establish a data oversight process and plan for the
41 purpose of achieving quality improvement in the treatment
42 and care of individuals who have experienced a stroke



- 1 through the following:
- 2 (A) Analysis of the data reported and included in the
- 3 stroke data base.
- 4 (B) Identification of potential interventions to improve
- 5 stroke care in certain geographic regions of Indiana.
- 6 (C) Determination of recommendations to improve stroke
- 7 care in Indiana.
- 8 **Sec. 4.** The state department shall establish and disseminate
- 9 evidence based treatment and community based care guidelines for
- 10 health care providers that provide follow-up care for a patient who
- 11 received acute treatment for a stroke upon the patient's hospital
- 12 discharge.
- 13 **Sec. 5. (a)** Before June 30 of each year, the state department
- 14 shall report the following to the governor and, in an electronic
- 15 format under IC 5-14-6, the executive director of the legislative
- 16 services agency:
- 17 (1) Information concerning the stroke data collected under
- 18 this chapter for the previous calendar year.
- 19 (2) Any recommendations of the state department to improve
- 20 stroke care in Indiana.
- 21 (b) The state department shall post the report required under
- 22 subsection (a) on the state department's website.
- 23 **Sec. 6.** Nothing in this chapter may be construed to require the
- 24 disclosure of confidential health information in violation of the
- 25 federal Health Insurance Portability and Accountability Act.

