1 STATE OF OKLAHOMA 2 2nd Session of the 59th Legislature (2024) 3 HOUSE BILL 3038 By: Stinson 4 5 6 AS INTRODUCED 7 An Act relating to hospitals; creating the Heart Attack System of Care Act; requiring the State 8 Department of Health to designate certain hospitals; providing certain criteria for designation; providing 9 certain requirements for application; mandating dissemination of certain hospital list to emergency 10 medical services; requiring certain training for emergency medical services; providing for 11 noncodification; providing for codification; and providing an effective date. 12 1.3 14 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: 15 A new section of law not to be SECTION 1. NEW LAW 16 codified in the Oklahoma Statutes reads as follows: 17 This act shall be known and may be cited as the "Heart Attack 18 System of Care Act". 19 SECTION 2. A new section of law to be codified NEW LAW 20 in the Oklahoma Statutes as Section 1-726.1 of Title 63, unless 21 there is created a duplication in numbering, reads as follows: 22 The State Department of Health shall recognize hospitals 23 that meet the criteria set forth in this act and shall be designated

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as one of the following:

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- 1. Level 1 Heart Attack Center defined as a hospital that has received certification by a nationally recognized certifying organization, such as the American Heart Association or the Joint Commission Comprehensive Heart Attack Center Certification, or American College of Cardiology (ACC) Chest Pain Center with primary percutaneous coronary intervention (PCI) and resuscitation;
- 2. Level 2 Heart Attack Center defined as a hospital that received certification by a nationally recognized certifying organization, such as the American Heart Association or the Joint Commission Primary Heart Attack Center or the American College of Cardiology (ACC) Chest Pain Center with PCI; or
- 3. Level 3 Heart Attack Center defined as a hospital that has received certification by a nationally recognized certifying organization, such as the American Heart Association or the Joint Commission Acute Heart Attack Ready Center or the American College of Cardiology (ACC) Chest Pain Center.
- B. A hospital shall apply to the Department for recognition of such designation and shall demonstrate to the satisfaction of the Department that the hospital meets the applicable criteria set forth in this act.
- C. Self-designation by any health care facility is not considered a recognized indicator of certification and shall not be recognized by the state.

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- D. The Department shall not limit the number of hospitals seeking recognition of such designation as set forth in this act.
- E. The Department shall verify, track, and monitor that the hospital maintains its certification as one of the above centers with the:
 - 1. American Heart Association;
- 2. The Joint Commission a not-for-profit organization that sets quality standards, conducts on-site evaluations, and delivers an interactive educative experience designed to provide solutions and resources to support continuous improvement across all health care settings; and
- 3. the ACC or another Department-approved, nationally recognized guidelines-based certifying or accrediting body for health care organizations.
- F. The Department may suspend or revoke a hospital's designation if the Department determines that the hospital is not in compliance with the requirements of this act.
- G. At least annually, the Department shall send the list of
 American Heart Association and the Joint Commission centers
 accreditations to the medical director of each licensed emergency
 medical services (EMS) provider in this state. The Department shall
 maintain a copy of the list in the office designated with the
 Department to oversee emergency medical services and shall post a

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list of approved and verified centers that are designated to receive and treat acute coronary syndrome (ACS) and cardiac arrest patients.

- H. All EMS authorities across the state shall establish prehospital care protocols related to the assessment, treatment, transport, and routing of ACS patients by EMS providers in this state. Routing protocols for triage and transport of ACS patients should include the distance to the nearest PCI-capable center designated to receive and treat ACS patients or other time-sensitive cardiac patients.
- I. All EMS authorities across the state shall establish, as part of current training requirements, protocols to assure that licensed EMS providers and 9-1-1 dispatch personnel receive training on the assessment, triage, and treatment of ACS patients. shall include the use of an ACS screening instrument, including, but not limited to, an electrocardiogram and other cardiac life-saving equipment.
 - Each EMS provider must comply with all sections of this act. J.
- In no way shall this act be construed to require disclosure Κ. of any confidential information or other data in violation of the Federal Health Insurance Portability and Accountability Act of 1996.

SECTION 3. This act shall become effective November 1, 2024.

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