House File 548

H-1195

1 Amend House File 548 as follows:

2 l. By striking everything after the enacting clause 3 and inserting:

4 <Section 1. <u>NEW SECTION</u>. 135.191 Stroke care — 5 continuous quality improvement.

6 1. A nationally certified comprehensive stroke 7 center or a nationally certified primary stroke center 8 operating in the state shall report to the statewide 9 stroke database data consistent with nationally 10 recognized guidelines on the treatment of individuals 11 with confirmed cases of stroke within the state. If 12 a nationally certified comprehensive stroke center 13 or nationally certified primary stroke center does 14 not comply with this subsection by reporting data 15 consistent with nationally recognized guidelines, the 16 department may request a review of the certification of 17 the comprehensive stroke center or the primary stroke 18 center by the certifying entity.

19 2. The department, in partnership with the 20 university of Iowa college of public health, department 21 of epidemiology, shall do all of the following:

*a.* Maintain or utilize a statewide stroke database
that compiles information and statistics on stroke
care which aligns with nationally recognized stroke
consensus metrics.

26 b. Utilize the get with the guidelines-stroke 27 data set platform or a data tool with equivalent data 28 measures and with confidentiality standards consistent 29 with federal and state law and other health information 30 and data collection, storage, and sharing requirements 31 of the department.

32 c. Partner with national voluntary health 33 organizations and stroke advocacy organizations that 34 plan for achieving stroke care quality improvement to 35 avoid duplication and redundancy.

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Encourage nationally certified acute 1 d. 2 stroke-ready hospitals and emergency medical services 3 agencies to report data consistent with nationally 4 recognized guidelines on the treatment of individuals 5 with confirmed cases of stroke within the state. 6 Sec. 2. CONTINGENT IMPLEMENTATION - UTILIZATION OF 7 EXISTING RESOURCES. Implementation of this Act shall 8 not require the appropriation of additional funding 9 to the department of public health, but is contingent 10 upon the utilization of existing resources by the 11 department.> Title page, line 2, after <stroke> by inserting 12 2.

13 <, and providing for contingent implementation>

SALMON of Black Hawk