

Stricken language would be deleted from and underlined language would be added to the law as it existed prior to this session of the General Assembly.

1 State of Arkansas  
2 85th General Assembly  
3 Regular Session, 2005  
4

As Engrossed: S2/15/05 H3/2/05

# A Bill

SENATE BILL 326

5 By: Senator Steele  
6 By: Representatives J. Martin, Borhauer, Bright, D. Creekmore, S. Prater  
7

## For An Act To Be Entitled

10 AN ACT TO CREATE AN ACUTE STROKE CARE TASK FORCE;  
11 TO COORDINATE STATEWIDE EFFORTS TO COMBAT THE  
12 DEBILITATING EFFECTS OF STROKES ON ARKANSANS; TO  
13 IMPROVE HEALTH CARE FOR STROKE VICTIMS; AND FOR  
14 OTHER PURPOSES.

## Subtitle

18 AN ACT TO CREATE AN ACUTE STROKE CARE  
19 TASK FORCE.  
20  
21

22 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:  
23

24 Section 1. Arkansas Code Title 20, Chapter 9, is amended to add an  
25 additional subchapter to read as follows:

26 20-9-1001. Title.

27 This subchapter shall be known and may be cited as the "Acute Stroke  
28 Care Act of 2005".  
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30 20-9-1002. Findings.

31 The General Assembly finds that:

32 (1) The citizens of the State of Arkansas are entitled to the  
33 maximum protection practicable from the effects of strokes;

34 (2) Each year about seven hundred thousand (700,000) Americans  
35 experience a new or recurrent stroke;

36 (3) On average, a stroke strikes someone every forty-five (45)



1 seconds and someone dies of a stroke every three and one-tenth (3.1) minutes;

2 (4) Stroke is the leading cause of serious, long-term disability  
3 in the United States, with about four million seven hundred thousand  
4 (4,700,000) stroke survivors alive today;

5 (5) Stroke is the third leading cause of death in the United  
6 States, causing fifty-seven and seven-tenths (57.7) deaths per one hundred  
7 thousand (100,000) population; and

8 (6) In Arkansas, the death rate from stroke is seventy-five and  
9 nine-tenths (75.9) per one hundred thousand (100,000), the highest in the  
10 nation.

11  
12 20-9-1003. Acute Stroke Care Task Force -- Creation.

13 (a) There is created an Acute Stroke Care Task Force to consist of  
14 twelve (12) members.

15 (b) The Director of the Department of Health shall appoint:

16 (1) One (1) member to represent the Department of Health;

17 (2) One (1) member to represent the American Heart Association  
18 and the American Stroke Association;

19 (3) One (1) member to represent the Arkansas Minority Health  
20 Commission;

21 (4) One (1) member to represent the Arkansas Hospital  
22 Association;

23 (5) One (1) member to represent the Arkansas Foundation for  
24 Medical Care;

25 (6) One (1) member to represent the University of Arkansas for  
26 Medical Sciences College of Public Health;

27 (7) One (1) member to represent the Division of Medical Services  
28 of the Department of Human Services;

29 (8) One (1) member to represent emergency medical services;

30 (9) One (1) member to represent the Arkansas Medical Society;

31 (10) One (1) member to represent the medical insurance industry;

32 (11) One (1) member to represent the community at large; and

33 (12) One (1) member to represent the Arkansas Medical, Dental,  
34 and Pharmacy Association.

35 (c)(1) Except for the initial members, task force members shall serve  
36 three year terms.

1           (2) The initial members shall be assigned by lot so as to  
2 stagger terms to equalize as nearly as possible the number of members to be  
3 appointed each year.

4           (d) If a vacancy occurs, the Director of the Department of Health  
5 shall appoint a person who represents the same constituency as the member  
6 being replaced.

7           (e) The task force shall elect one (1) of its members to act as chair  
8 for a term of one (1) year.

9           (f) A majority of the members shall constitute a quorum for the  
10 transaction of business.

11           (g) The task force shall meet as necessary to further the intent and  
12 purpose of this subchapter.

13           (h) The Department of Health shall provide office space and staff for  
14 the task force.

15           (i) Members of the task force shall serve without pay but may receive  
16 expense reimbursement in accordance with § 25-16-902, if funds are available.

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18           20-9-1004. Powers and duties.

19           The Acute Stroke Care Task Force shall:

20           (1) Make recommendations to the State Board of Health consistent  
21 with the intent and purpose of this subchapter;

22           (2) Pursue both public and private funding to further the intent  
23 of this subchapter; and

24           (3) Develop standards and policy recommendations considering,  
25 but not limited to, the following:

26           (A) Methods for raising public awareness of the prevalence  
27 and treatment considerations for strokes;

28           (B) The professional development of emergency medical  
29 services professionals to identify victims of potential stroke;

30           (C) The professional development of emergency room and  
31 hospital personnel to identify and treat victims of potential stroke;

32           (D) Methods for encouraging the use of thrombolytics,  
33 clot-busting drugs, or other accepted or emerging treatments, when  
34 appropriate;

35           (E) Methods for ensuring that a comprehensive range of  
36 stroke recovery services are available to Arkansans as they recover physical

1 and mental functions affected by a Stroke;

2 (F) Methods for developing stroke treatment centers; and

3 (G) Methods for developing a stroke registry for Arkansas.

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5 20-9-1005. State Board of Health -- Powers and duties.

6 The State Board of Health after consultation with the Acute Stroke Care  
7 Task Force and if funds are available may promulgate rules to further the  
8 intent of this subchapter.

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10 */s/ Steele*