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FISCAL IMPACT REPORT

SPONSOR: Sanchez DATE TYPED: 2/23/03 HB _____

SHORT TITLE: Stroke Task Force SB SJM 31

ANALYST: Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
	NFI				

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

Responses Received From
Department of Health (DOH)

SUMMARY

Synopsis of Bill

Senate Joint Memorial 31 requests the Secretary of Health to appoint a Stroke Task Force to evaluate potential strategies for stroke awareness, pre-hospital and acute stroke treatment, and to develop a statewide needs assessment outlining relevant resources for response, diagnosis and treatment in the pre-hospital and acute care settings. The task force would be composed of eighteen members that include consumers, stroke survivors, physicians, hospital administrators and others. The duties of the task force are consistent with the purposes identified above, including an exploration of funding opportunities to support implementation of the task force recommendations.

SJM 31 would require that the Stroke Task Force report its findings to the Department of Health, the Interim Legislative Health and Human Services Committee and the Governor prior to the first session of the forty-seventh legislature and that copies of memorial be transmitted to the Governor and the Secretary of Health.

Significant Issues

DOH concurs with the data provided in the text of SJM 31 because of the following:

- Stroke is the third leading cause of death in the United States today, ranking only behind heart disease and cancer.
- Stroke is the leading cause of severe long-term disability in the United States and each year more than 750,000 Americans suffer a new or recurrent stroke,
- Newly available treatments may reduce the number of deaths and disabilities caused by stroke.
- There are five links in the Stroke Chain of Survival and the American Stroke Association believes that by strengthening the Chain of Survival improves the outcomes for Stroke patients. The Stroke Chain of Survival includes:
 - Rapid recognition and reaction to stroke warning signs;
 - Rapid start of pre-hospital care;
 - Rapid emergency medical services system transport and hospital pre-notification;
 - Rapid diagnosis and treatment at the hospital; and,
 - Appropriate rehabilitation.
- Americans will pay approximately forty-nine billion dollars in the coming year for stroke-related medical and disability costs that may be reduced through improved response, diagnosis, and treatment for stroke.

Currently, the EMS Fund Act supports EMS Services statewide to ensure basic infrastructure to provide services in rural and frontier areas of the state. These funds pay for equipment, training and education, and other ongoing expenses. Many areas of the state are volunteer organizations and struggle to maintain adequate service. Also, as is true for nurses and trauma physicians, there is a workforce shortage of EMT Paramedics and EMT Intermediates in rural areas. Over the past few years, fiscal shortages have threatened EMS Service operations in some areas of the state. The ongoing fragile nature of these services and of many hospitals are challenges to providing many of the Chain of Survival services necessary to create positive outcomes with stroke events and other severe illness and injury events in the state.

ADMINISTRATIVE IMPLICATIONS

SJM 31 would require DOH to solicit committee members from the representative groups, convene and staff meetings. DOH would also need to maintain records that will contribute to a final report, develop meeting materials, perform research, and compile draft reports. A final report would be due by mid-fall fiscal year 2004. Existing staff may accomplish administrative functions.

OTHER SUBSTANTIVE ISSUES

Recent advances have been made in the area of early Stroke diagnosis and intervention. There are new medications that if administered early can mitigate brain damage and or prevent it altogether. Hospital Emergency Departments have been using these medications for several years now. Also, EMS Services can make a big difference by identifying Stroke patient's early, providing rapid transportation, and possibly beginning the delivery of medications. Another aspect

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is the early identification of patients that are more susceptible to Stroke through injury prevention education and training.

The creation of a Stroke Task Force is very appropriate at this time since both the American Stroke Association and the American Heart Association have initiatives toward improving the Chain of Survival for stroke patients

BD/yr