



ALASKA STATE LEGISLATURE

Representative Genevieve Mina

Chair, House Health and Social Services Committee

Serving House District 19: Airport Heights, Mountain View, & Russian Jack

HB 27 Sponsor Statement

"An Act relating to medical care for major emergencies."

A coordinated statewide system of care enhances the chance of survival in life-threatening, time-critical emergencies in adults and children. Trauma and specific medical emergencies addressed within this system ensure that Alaskans receive care from the "right person, at the right place, at the right time."

Trauma, strokes, and heart attacks represent the leading causes of death in Alaska. In 2022 alone, 744 Alaskans died from trauma, 217 died from strokes, and 510 died from cardiovascular disease such as a heart attack. By enabling a statewide systems of care approach for major emergencies, death rates caused by these time-sensitive emergencies can improve. Importantly, these are conditions for which interventions exist that can markedly alter their otherwise dismal prognoses.

HB 27 seeks to expand the scope of the Section of Rural and Community Health Systems within the Department of Health to include strokes and severe heart attacks in:

- Developing training programs for ambulance and first responder services on a standardized protocol.
- Communicating the urgency of the patient's condition to the local receiving hospital or clinic.
- Assist in establishing statewide guidelines, helping physicians and advanced practice practitioners determine if local treatment is appropriate or to expedite transport to the suitable treatment facility.

This legislation also focuses on expanding AS 18.08.010 and AS 18.08.200, allowing the Department of Health (DOH) to replicate those systems and processes that have improved trauma care and apply those principles to stroke and severe heart attacks.

With the success of the Trauma Center program, HB 27 will ensure that the receiving specialty hospitals meet DOH-adopted national criteria for being a voluntary stroke or heart attack center. It also establishes a registry specific to these major emergencies, a means to measure outcomes, and guide changes that will inevitably be needed.

The overall goal of HB 27 is that a trauma, cardiac, or stroke patient returns home as a functional member of the community and embraces life changes that will improve their future health.

Session: State Capitol Room 416 • Juneau, AK 99801-1182 • (907) 465-3424

Interim: 1500 W. Benson Blvd. • Anchorage, AK 99503

Rep. Genevieve.Mina@akleg.gov

HOUSE BILL NO. 27

IN THE LEGISLATURE OF THE STATE OF ALASKA

THIRTY-FOURTH LEGISLATURE - FIRST SESSION

BY REPRESENTATIVE MINA

Introduced: 1/22/25

Referred: Health and Social Services, Finance

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to medical care for major emergencies."**

2 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

3 * **Section 1.** AS 18.08.010 is amended to read:

4 **Sec. 18.08.010. Administration.** The department is responsible for the
5 development, implementation, and maintenance of a statewide comprehensive
6 emergency medical services system and, accordingly, shall

7 (1) coordinate public and private agencies engaged in the planning and
8 delivery of emergency medical services, including trauma care **and care for major**
9 **emergencies**, to plan an emergency medical services system;

10 (2) assist public and private agencies to deliver emergency medical
11 services, including trauma care **and care for major emergencies**, through the award
12 of grants in aid;

13 (3) conduct, encourage, and approve programs of education and
14 training designed to upgrade the knowledge and skills of health personnel involved in
15 emergency medical services, including trauma care **and care for major emergencies**;

1 (4) establish and maintain a process under which hospitals and clinics
2 could represent themselves to be trauma centers **or otherwise capable of treating**
3 **major emergencies** because they voluntarily meet criteria adopted by the department;
4 criteria adopted by the department to implement this paragraph must be based on an
5 applicable national evaluation system.

6 * **Sec. 2.** AS 18.08.200 is amended by adding a new paragraph to read:

7 (15) "major emergency" includes a heart attack or stroke.



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HB 27 Sectional Analysis

"An Act related to medical care for major emergencies."

Section 1. Amends AS 18.08.010

Section 1, subsections 1-3 adds "major emergencies" to the existing emergency medical services (EMS) system. Currently, only trauma care appears in statute, and the addition of "major emergencies" will allow the Department of Health (DOH) to include time-sensitive emergencies such as heart attacks and strokes to their EMS review system.

Section 1, subsection 4, addresses the trauma center designation status for hospitals and clinics and gives the statutory authority for DOH to adopt criteria for those health centers to represent themselves as being capable of treating major emergencies.

Section 2. Amends AS 18.08.200 by adding a new paragraph:

This is the definition section for the chapter, and "major emergency" is added and defined as heart attack and stroke.

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Fiscal Note

State of Alaska
2025 Legislative Session

Bill Version: HB 27
Fiscal Note Number: _____
() Publish Date: _____

Identifier: HB027-DOH-EP-02-14-25
Title: MEDICAL MAJOR EMERGENCIES
Sponsor: MINA
Requester: (H) HSS

Department: Department of Health
Appropriation: Public Health
Allocation: Emergency Programs
OMB Component Number: 2877

Expenditures/Revenues

Note: Amounts do not include inflation unless otherwise noted below. (Thousands of Dollars)

	FY2026 Appropriation Requested	Included in Governor's FY2026 Request	Out-Year Cost Estimates					
			FY 2026	FY 2027	FY 2028	FY 2029	FY 2030	FY 2031
OPERATING EXPENDITURES								
Personal Services	135.8		135.8	135.8	135.8	135.8	135.8	135.8
Travel	4.8		4.8	4.8	4.8	4.8	4.8	4.8
Services	95.0		74.0	74.0	74.0	74.0	74.0	74.0
Commodities	5.0		2.0	2.0	2.0	2.0	2.0	2.0
Capital Outlay								
Grants & Benefits								
Miscellaneous								
Total Operating	240.6	0.0	216.6	216.6	216.6	216.6	216.6	216.6

Fund Source (Operating Only)

1002 Fed Rcpts (Fed)	28.9		26.0	26.0	26.0	26.0	26.0	26.0
1003 GF/Match (UGF)	211.7		190.6	190.6	190.6	190.6	190.6	190.6
Total	240.6	0.0	216.6	216.6	216.6	216.6	216.6	216.6

Positions

Full-time	1.0		1.0	1.0	1.0	1.0	1.0	1.0
Part-time								
Temporary								

Change in Revenues

None								
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimated SUPPLEMENTAL (FY2025) cost: 0.0 *(separate supplemental appropriation required)*

Estimated CAPITAL (FY2026) cost: 0.0 *(separate capital appropriation required)*

Does the bill create or modify a new fund or account? No
(Supplemental/Capital/New Fund - discuss reasons and fund source(s) in analysis section)

ASSOCIATED REGULATIONS

Does the bill direct, or will the bill result in, regulation changes adopted by your agency? **Yes**
If yes, by what date are the regulations to be adopted, amended or repealed? **07/01/26**

Why this fiscal note differs from previous version/comments:

Not applicable, initial version.

Prepared By: <u>Lindsey Kato, Director</u>	Phone: <u>(907)269-2042</u>
Division: <u>Public Health</u>	Date: <u>02/14/2025</u>
Approved By: <u>Pam Halloran, Assistant Commissioner</u>	Date: <u>02/14/25</u>
Agency: <u>Department of Health</u>	

FISCAL NOTE ANALYSIS

STATE OF ALASKA
2025 LEGISLATIVE SESSION

BILL NO. HB027

Analysis

HB027 amends AS 18.08.010 by adding care for “other major emergencies” in the same vein as trauma care. AS 18.08.200 adds “major emergency” to definitions, defining it as heart attack or stroke.

This legislation creates a comprehensive care system across the state, aiming to standardize and support patient care from the onset of symptoms to the delivery of life-saving treatment for time-sensitive emergencies for heart attacks and strokes. Achieving this, requires collaboration among various agencies, including EMS air and ground agencies, village clinics, sub-regional clinics, critical access hospitals, and specialty care hospitals capable of providing definitive treatment.

To accomplish the objectives of this bill will require one additional full time position in the trauma systems unit within the Division of Public Health. The position will support coordination of multiple stakeholder committees to build this process. Additionally, funding for IT systems enhancements will be required to implement tracking and reporting of heart attack and stroke.

Cost estimates:

Personnel - (1) Full-time, range 20, step C, Anchorage, Public Health Specialist 2 \$135.8

Travel - Convene community partners to implement all aspects of the legislation; there are 13 critical access hospitals and 4 community hospitals outside of Anchorage/Mat-Su. Not all are anticipated to sign up immediately and not all at once. \$4.8 per year for 4 trips

Services - cover the costs associated with chargebacks, telecom, IT, the initial IT system enhancement and annual maintenance costs associated. \$20.0 per year.

IT system enhancement – Image Trend is the vendor for EMS and the Trauma registry. Based on current contract, the initial cost of adding the enhanced capability and data transfer is \$75.0 for year one. Maintenance costs for the system in year two and forward is \$54.0.

Commodities - supplies and materials, the first year includes addition commodities costs for computer equipment for the new position. \$5.0 for year one, \$2.0 year two and forward.

If this bill were to pass, Article 7 – 7AAC 26.710-750 would require regulation changes.



AK Lic # 2175103

NAICS 813212-Voluntary Health Organizations

510 (c)(3)

Public charity 509 (a)(2), IRS Exempt status

admin@alaskastrokecoalition.com

January 22, 2025

Letter of Support: HB27

Representative Mina,

The Executive Team of the **Alaska Stroke Coalition** are writing to express our **wholehearted endorsement** of House Bill 27. This is critical legislation which aims to incorporate Stroke and Heart Attack into the currently established statewide system of care for major emergencies, ensuring that Alaskans receive *timely* and *effective* assistance during these life-threatening medical emergencies.

Our Call to Action:

Rep. Mina, we thank you for championing HB 27 and join you in advocating for its passage. The State of Alaska is in a unique position as our governing body to bring the voices and interests of the diverse pool of stakeholders in AK healthcare together to the table and work with them towards a common goal. We encourage our legislative body to embrace this opportunity; passage of this bill will make a profound impact on the health outcomes of our state. Let's work together to ensure that Alaskans facing major emergencies receive the care they deserve, in emergent fashion.

Why do we support HB 27?

1. **Streamlined Communication & Coordination:** Alaska is unique due to its expansive geography, mercurial weather, and diverse population distribution. By streamlining care pathways, communication, and coordination among emergency responders, clinics, and hospitals, we can significantly reduce the time between diagnosis and treatment. Every

minute counts in these critical situations, and this bill will help save lives and reduce disability.

2. **Standardized Treatment Guidelines, Education, & Training:** The proposed expansion of the Office of Emergency Medical Services to include strokes and severe heart attacks is a game-changer. Standardized guidelines & protocols for hospitals, clinics, as well as ambulance and first responder services will ensure that all Alaskans receive consistent, high-quality care. This standardization, when aligned with national best practice guidelines, will empower our front line heroes to act swiftly and effectively.
3. **Data Driven Change:** Supporting the collection and analysis of performance data around stroke and cardiac arrest will help map out a course of action to improve adherence to the best practice standards, benchmark our performance against national trends, and guide our care system optimization efforts.
4. **Improved Survival Rates:** HB 27 addresses the urgent need for a comprehensive statewide approach to cardiac and stroke emergencies. The lives saved through the successes of the trauma program could be doubled with the inclusion of cardiac and stroke as time sensitive emergencies.
5. **Community Well-Being:** When a trauma, cardiac, or stroke patient returns home as a functional member of the community, it benefits us all. HB 27 isn't just about saving lives; it's about reducing disability through timely treatment and preserving the quality of life for survivors and their families. Most people don't die from stroke, but they are permanently disabled. By supporting this bill, we invest in the well-being of our fellow Alaskans.

Stroke & Healthcare Burden:

The CDC defines 'stroke' as "damage to the brain from interruption of its blood supply" and declares it a "medical emergency". Strokes are a medical emergency, every minute 1.9 million neurons die without oxygen and permanent brain cell death occurs within 4-6 minutes. Early recognition and treatment are necessary for preventing or limiting long term disability and/or death. Even the smallest delays in care can have huge consequences for the person experiencing a stroke. Treatment delays of just 15 minutes can mean the difference between leaving the hospital capable of independent living or permanent reliance on others for the activities of daily life. A third of the patients who experience stroke are under the age of 65 and most of these patients can never return to work, resulting in both a loss of income potential and a significant reliance on medical resources for support. In a state like Alaska where our demographics skew younger, this has a profound impact.

Call To ACTION

Data drives change, without data we don't know how we are performing and applying current US Stroke measures. Our most recent report on stroke care in Alaska was published in 2019 referencing 2016 data. We must track data to truly know where we stand and how we compare with other States as well as within regions in Alaska. We can only do this if/when we recognize strokes for the devastating risks they are, address as a life threatening emergency and communicate as a medical emergency. By recognizing as an emergency, we can update standards and compliance with current standards, impact, and improve care our residents and those that seek treatment for Strokes deserve.

Our Mission at **Alaska Stroke Coalition** is to *improve stroke care across the state by promoting collaboration, education and innovation. Through our partnership with healthcare providers, stroke survivors and community stakeholders, we aim to reduce the impact of stroke on individuals and families by enhancing prevention, treatment and rehabilitation efforts. Our ultimate goal is to achieve the best possible outcomes for stroke patients and improve the overall quality of life in Alaska.*

With this in mind HB 27 is crucial to improving stroke care for all Alaskans.

Thank you for your dedication to public service, and we appreciate your consideration of our perspective.

Sincerely,

Dr. Lucy He, Dr. Robert Lada, Kevin Myrick RN, Amber Simonetti RN, Kelly Isaacs RN

Executive Team, Alaska Stroke Coalition

Representative Genevieve Mina

State Capitol Room 416

Juneau, AK 99801

representative.genevieve.mina@akleg.gov

DATE: February 5, 2025

SUBJECT: Strong Support for House Bill 27 – Major Medical Emergencies

Dear Representative Mina,

My name is Brian Webb, and I am writing to you as a 46-year paramedic and critical care flight paramedic in Alaska. Today, I submit this letter as an Alaska EMS clinician in full support of House Bill 27.

As a paramedic, my foremost duty is to provide the highest quality prehospital care to my patients. And in our ultra-rural state, time-sensitive medical emergencies require a well-coordinated, statewide system to ensure that patients receive the right care at the right facility—when every second counts.

Since the passage of House Bill 168 in 2010, which established trauma centers and a trauma care fund, Alaska EMS has been better equipped to make critical transport decisions. This has enhanced our training and skills, and enabled us to deliver trauma patients to the most appropriate facility, optimizing outcomes. However, a crucial gap remains in our system—one that HB 27 seeks to address. That gap is in the treatment of major medical emergencies, particularly heart attacks and strokes, which continue to be the third and fifth leading causes of death in Alaska.

Just as trauma care operates under the “golden hour” principle, cardiac and cerebrovascular emergencies are similarly constrained by time. When a heart attack or stroke occurs, the clock starts ticking, and every minute can mean the difference between life and death, recovery or permanent disability. HB 27 aims to apply the same principles that have transformed trauma care into these equally critical conditions by formally defining major medical emergencies to include heart attacks and strokes.

While I cannot speak about the voluntary designation of receiving facilities as cardiac and stroke centers, I can unequivocally state that the impact on EMS and critical care transport will be overwhelmingly positive. Just as HB 168 provided the resources and training necessary to improve trauma care, HB 27 will ensure that EMS providers have the tools, education, and protocols needed to deliver these patients to the most appropriate facility in the best possible

condition. This legislation has the potential to reduce morbidity and mortality rates for these time-sensitive emergencies.

With the expansion of the medical emergencies scope of the Alaska Trauma Service within the Department of Health, HB 27 will enhance training programs for ambulance services and first responders. Standardizing protocols enhance our ability for treating these patients and effectively communicating the urgency of their condition to local hospitals and clinics will mirror the successful trauma care improvements established in 2010.

Passing HB 27 will empower Alaska EMS providers to give our patients the best possible chance of returning home, functional and intact, after experiencing these critical time-sensitive medical emergencies.

I urge the legislature to enact HB 27.

Sincerely,

Brian L. Webb, FF2, Paramedic, NRP, FP-C, CCEMT-P, TP-C, COSS
Anchorage, AK
brian.webbak59@gmail.com

January 28, 2025

Office of Representative Genevieve Mina
House District 19
Alaska State Capitol, Room 42
Juneau Alaska 99801-1182


Dear Representative Mina,

I am writing today in support of House Bill 27 an "An Act relating to medical care for major emergencies." I am a registered nurse who lives and works in Juneau providing care to Alaskans since 1999. During my over 25-year career I have worked in emergency departments but mostly have provided critical care during air medical transport. I am a member of the Alaska Trauma System Review Committee, the Alaska Stroke Coalition and the Alaska Office of EMS Medical Director's Advisory Committee.

Trauma, stroke, and myocardial infarctions remain leading causes of death and disability for Alaskans. Combined with primary prevention and public health effort's, timely access to appropriate care reduces the burden of illness and injury. Stroke occurs most commonly as the result of a blocked blood vessel and less frequently from bleeding in the brain. During this time precious cells are dying, and they cannot be regenerated. Opening the blood vessels of the heart or brain when a clot forms is time critical, lifesaving and prevents permanent disability. A system of care approach and treatment in centers with experience and verification of the specialty skill set these patients deserve improves patient outcome and reduces disability. In Alaska we have not yet standardized care for stroke to allow for all patients to get access to the care they need.

The "hub and spoke system" of rural clinics with support from our regional facilities and specialty centers in Alaska and beyond is the backbone of our trauma system of care. We can and should expand this capability to other time sensitive medical emergencies. I support HB 27 without reservation. Please contact me if I can help with questions or offer additional support for this important bill.

Respectfully,


Rick Janik BSN, RN, CFRN, EMT
PO Box 22502
Juneau Alaska 99801