



Stroke Care Committee Minutes
Thursday, April 11, 2019
7:00 a.m. - 8:30 a.m.

Chair	Ted Lowenkopf, MD
Members present	Ted Lowenkopf, MD; Hormozd Bozorchami, MD; Shawn Baird, P; Noah Jacobson, RN; Barri Stiber
Members not present	Ritu Sahni, MD
Guests present	Diane Zhitlovosky; Keisha Bigler; Abigail Finetti, RN
OHA staff present	Dana Selover, MD; Stella Rausch-Scott, EMT; David Lehrfeld, MD; Candace Toyama, P
Members on the phone	Elaine Skalabrin, MD; Andy Hoyt
OHA Staff on the phone	Laura Wendel

Agenda Item	<i>Call to Order – Dr. Ted Lowenkopf</i>
The meeting was called to order and roll call was taken.	

Agenda Item	<i>Review October 2018 Minutes – Dr. Ted Lowenkopf</i>
Ted Lowenkopf requested the committee review and approve the January 17, 2019 minutes. Hormozd Bozorchami motioned for the approval of the minutes and Shawn Baird seconded the motion. The motion passed.	

Agenda Item	<i>Membership / Chair review – Dr. Dana Selover</i>
<p>The committee reviewed the membership appointment list. Current vacant positions are:</p> <ul style="list-style-type: none"> - Physician specializing in emergency medical services - (3) Hospital Administrator or Delegate (Primary) <p>The committee discussed how members should be vetted and approved for appointments. The state can appoint members if the applicant meets the requirements of the committee and rule. The state will present the potential members to the Chair before appointment. The committee discussed expanding the membership to include (2) Emergency Physicians, one representing rural care. The committee will review membership at the next meeting as well as interested candidates to identify what the next step should be.</p>	

The committee reviewed the Chair's roles for the committee. The Vice Chair position was appointed to Dr. Lowenkopf at the January 2019 meeting. Dr. Lowenkopf nominated Dr. Bozorchami as Chair. Dr. Bozorchami accepted the nomination Shawn Baird seconded the motion. The motion passed unanimously.

Dr. Hormozd Bozorchami will serve as Chair for 2 years starting July 2019.

Action	<p>The state will work on appointments to the committee.</p> <ul style="list-style-type: none"> • contact NAEMSP for any volunteers who wish to be considered. • contact the Oregon Hospital Association for any volunteers.
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Agenda Item	<i>Telehealth CMS Reimbursement – Dr. Ted Lowenkopf</i>
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Furthering Access to Stroke Telemedicine [FAST Act 2019](#) changed to authorize CMS reimbursement telehealth encounters. If a hospital did not have a provider to diagnose an acute stroke in the Emergency Department the hospital providing the service may be reimbursed. The reimbursement includes rural and nonsupport emergency departments. The reimbursement is not for ongoing management of a patient. Oregon does not charge sites but submit invoices per patient. [Thrombolytic billing code 37915](#) allows hospitals to be eligible for payment with specific indications. The site fee is difficult to support, and the reimbursement will help support the offset of cost. Telehealth and Stroke care services for free, in Oregon, are not in violation of the [Stark Law](#). This was negotiated with a state entity. Dr. Lowenkopf will follow up with the contact information of who at the state was contacted for reviewing the Stark Law.

Action Item	Ted Lowenkopf will follow up with the State Office contact who reviewed the Stark Law - Thrombolytic reimbursement information.
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Agenda Item	<i>2018 Oregon GWTG Data – Dr. Ted Lowenkopf</i>
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Dr. Lowenkopf presented the 2018 GWTG data to the committee. 2018 data was reviewed, and 2017 data was included if it showed a significant difference. The data is consistent in other Stroke data collections. National Benchmarks were not available to compare the collected Oregon data.

There is data that shows disparities in the way patients act in Stroke care depending on race, age, geography. Multnomah county is interested in reviewing disparities of stroke care patients.

What is missing from the data:

- Annual composite data
- National benchmarks
- Individual sites identified with which certification
- Geography
- Location
- Population in the area
- EMS activation/arrival

Super user accounts allow the user to view the entire state but doesn't help to identify specific issues regionally that could bring support to that area/region.

Identified Data Issues:

- Transfer patient data is being collected twice. The same information may be entered by both hospitals.
- Not all hospitals are participating.
- There is a human error of what a person interprets for the data.

Next steps:

Review the presented composite data to further ask questions and will present at the July meeting. Identify which hospitals are participating with GWTG and which hospitals are not. Map the information for future focused work.
Dr. Lowenkopf and Barri Stabber volunteered to review the data.

Action Item	Review the presented composite data to further ask questions and will present at the July meeting. Identify which hospitals are participating with GWTG and which hospitals are not. Map the information for future focused work. Dr. Lowenkopf and Barri Stabber volunteered to review the data.
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Agenda Item	<i>Biennial Stroke Committee Report to Legislation – Dr. David Lehrfeld</i>
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The message is system of care for this year's report. The 2017 report has the current data that the Chronic disease program has run. The information will be kept. EMS will review triage guidelines, compass measures and EMS performance measures, AHA GWTG prehospital mapping and benchmarking. SB 52 implementation and how this will inform quality improvement in EMS.

Hospitals want to understand what credentialing is already taking place. Telestroke programs Oregon Stroke Network and national associations are each keeping maps that don't share the entire system of stroke care in Oregon. Need to identify how many stroke hospitals in Oregon. Oregon Stroke Network (OSN) would support the report by submitting information on rehabilitation in Oregon for Stroke patients.

Request from committee:
Accomplishments and recommendations moving forward.

Action Item	Request information from the OSN and Stroke Care Committee members. Identify Telehealth stroke programs in Oregon.
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Agenda Item	<i>SCC Required data set – Dr. David Lehrfeld</i>
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With the presentation of the data it was identified that the GWTG does not allow a large portion of data to be reviewed in the super user account.

A review of the Stroke bill states that Comprehensive Stroke centers are required to allow the authority to have access to all hospital's stroke data to support the development of data oversight and improve the stroke care in Oregon.

After requesting a review with state council, the state has two options in order to meet the requirements of the statute.

- 1- Have complete access to AHA GWTG data, down to the patient level, or
- 2- Change to a different Stroke data base that will allow us to have this information.

The state will meet with AHA to discuss a change to the current contracts. If AHA is unable to meet this requirement the State will be required to create their own database.

For hospitals that do not participate GWTG, the four accrediting bodies currently use GWTG. Joint commission requires a registry, but it is not required to be AHA GWTG. The State Stroke committee has the authority to identify what "certified stroke center" is in Oregon but the requirement must support the state and the committee work to improve care.

Action Item	The state will meet AHA and present what the next steps will be.
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Agenda Item	<i>Meeting time change - Stella Scott</i>
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The committee coordinator proposed to move the date of the meeting and extend the time to allow time to work on the committee tasks. The change would not take place until January 2020. The committee members and stakeholders agreed that this would help the committee with tasks and goals. The committee agreed to extend the meeting time by 30 minutes for the July and October meeting.

Action Item	Office will review dates and propose schedule change for 2020. The July 11 th meeting will meet 0700-0900. This will add 30 minutes to the meeting. Stella will send a doodle poll to the committee members for 2020.
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Agenda Item	<i>GWTG Data Extraction – Dr. David Lehrfeld</i>
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The AHA Western Region Quality task force met in 2016 and one of the objectives was to reduce the hospital's burden of submitting data to multiple databases. The last two years AHA has worked with EPIC to support extraction of patient information to GWTG. July 2019 is the proposed date that EPIC will launch a solution. A tab will be designed in EPIC that would have all the required data points that would be extracted from the patient chart into a csv file. This would then be uploaded to GWTG. It was suggested that each hospital contact EPIC to request when this solution will be available. This will not help other hospitals that do not use either of these systems.

Agenda Item	<i>Meeting adjourned</i>
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Next scheduled Oregon Stroke Care Committee Meeting -
July 11, 2019

Legacy Emanuel Hospital, 7:00 am – 9:00 am

2019 dates

- Jan 17
- April 11
- July 11
- Oct 10

Agenda Items: *(Note this is a draft list for the July agenda.)*

- Membership
- Bylaws
- Stroke Rehab workgroup
- 2018 Stroke Report
- AHA GWTG data future
- Epic and GWTG changes
- Thrombolytic reimbursement
- CMS approved crosswalk of certification levels from certifying bodies