



Texas Department of State Health Services

Heart Attack and Stroke Data Collection Initiative

Hospital Frequently Asked Questions

General Questions

1. Why should I participate?

Hospitals submitting the completed forms and choosing to participate in this initiative will receive the following benefits:

- A. A key role in the assessment of heart attack and stroke care in Texas. Assessing the systems of care allows for identification of gaps, improvement and prioritization of needs across the state, and eventual improvement of the care for these patients, within each hospital and across the state.
- B. An opportunity to attend the annual quality improvement conference hosted by the Texas Department of State Health Services (DSHS) Heart Disease and Stroke Program, which offers information on the most current science regarding heart attack and stroke and resources available for using data for quality improvement.
- C. A copy of DSHS reports addressing the current state of systems of care for stroke and heart attack. These reports will provide aggregate numbers and will not identify individual hospitals.
- D. A copy of the Mission: Lifeline Texas Report that will allow a comparison of your hospital to the rest of the participants in the state. This report, blinded and following a format similar to the Mission: Lifeline Regional Report, does not allow for hospitals to identify one another's data.
- E. If sufficient data are collected, each region will be able to compare its performance to other regions in the state.
- F. If your hospital is not already enrolled in a Mission: Lifeline System/Regional Report, you will have the opportunity to become a part of a regional report. If you are enrolled in the National Cardiovascular Disease Registry (NCDR) ACTION Registry-Get With The Guidelines (GWTG), participation in the Mission: Lifeline program is of no extra cost to your hospital. All reports will provide data in aggregate numbers and will not identify individual hospitals.

2. What forms do hospitals need to sign?

The forms included in each packet sent by DSHS are specific to each hospital and based on participation status in the GWTG programs and Mission: Lifeline. If you have questions about which forms need to be completed, please contact Roberto Rodriguez at 512-776-3646 or Roberto.Rodriguez@dshs.state.tx.us. She can provide the appropriate forms and confirm your hospital's current participation status in the above mentioned programs.

3. Who should sign the forms included in the packets?

The person authorized to edit and sign contracts on behalf of the hospital should sign the forms. Please ensure your system's corporate office approves the forms.

4. Is there a deadline for submitting the forms?

There is no deadline. The initiative is ongoing. DSHS is enrolling hospitals on a rolling basis.

5. Our hospital system includes several hospitals. Does each facility/hospital have to sign up individually?

Heart Attack:

For the NCDR ACTION Registry-GWTG, each individual facility has a unique participant ID. Therefore, one American College of Cardiology (ACC) addendum must be submitted for each hospital/facility.

Stroke:

For the GWTG-Stroke database, if your hospitals are enrolled as one system in the database, then you only need to submit one Amendment to the Participating Hospital Agreement.

Your hospital is allowed to submit one DSHS data use agreement (for each respective initiative component) for your system. We ask that you include a list of all hospitals that are being accounted for in the agreement. Please note, hospitals must submit the appropriate DSHS data use agreement for either the heart attack or stroke component of the initiative. Participation in both components requires submission of each of the respective DSHS data use agreements.

6. Will the data DSHS obtains be shared with other hospitals or organizations?

All data accessed by DSHS will be protected under HIPAA privacy and security laws and will not be shared with external entities or organizations. The DSHS reports will include only aggregate numbers and will not identify hospitals. The Mission: Lifeline Texas Report will be blinded, which means your hospital will not be identified.

7. Will there be any meetings to present the findings of the initiative?

The Heart Disease and Stroke Program will provide updates and report on the findings at the following Council meetings: Governor's EMS and Trauma Advisory Council and Texas Council on Cardiovascular Disease and Stroke. Meetings are held quarterly in Austin and are open to the public. DSHS reports will be shared with stakeholders across the state, including participating hospitals and regional advisory councils, as well as posted online.

8. What do hospitals have to do to participate in the initiative?

The DSHS Heart Disease and Stroke Program requests that hospitals sign the appropriate forms allowing DSHS to access data submitted to the databases. DSHS obtains the data directly from the vendors managing these databases, with enrolled hospitals making no additional data submissions to DSHS. Hospitals need only sign and submit the forms included in the packet and provide their Mission: Lifeline letter identifier upon receipt of the Mission: Lifeline Texas Report.

If your hospital is not enrolled in the databases, we encourage you to enroll, in addition to providing approval for DSHS to access the data submitted moving forward. You can contact Roberto.Rodriguez@dshs.state.tx.us or 512-776-3646, if you are interested in enrolling in the databases.

Although participation in the databases and the initiative is voluntary, hospitals must be enrolled in the databases in order to participate in the initiative.

9. What are the costs associated with participating?

If your hospital is currently enrolled in the NCDR ACTION Registry-GWTG and/or GWTG-Stroke, then there will be no additional cost to participate in the data collection initiative. There is no additional fee to enroll in the Mission: Lifeline program if your hospital is enrolled in ACTION.

Heart Attack:

If your hospital is not currently enrolled in the NCDR ACTION Registry-GWTG, then there is an enrollment fee to participate; these fees are paid to ACC who manages the NCDR ACTION Registry-GWTG. Enrollment fees are listed in the heart attack packet. ACC can be contacted directly at ncdr@acc.org.

Stroke:

If your hospital is not currently enrolled in the GWTG-Stroke database, then there is an enrollment fee to participate; these fees are paid to Outcome Sciences, a Quintiles company (Quintiles) who manages the database. Enrollment fees are listed in the stroke packet.

10. How will DSHS use the data that is collected?

Prior to this initiative, DSHS has not had access to comprehensive Texas heart attack and stroke data. The collection of this data will enable DSHS to conduct a comprehensive gap analysis to improve care and outcomes for patients. This information will not be used in any way for DSHS licensing or regulatory functions.

11. Who owns the data that is collected?

The participating hospitals own their data. ACC (heart attack) and Quintiles (stroke) manage the data that is entered into these databases. However, these vendors are not allowed to share participating hospitals' data with DSHS unless hospitals provide their approval through data use agreements with DSHS and an amendment to their contract with the vendors.

12. What level of data will DSHS get?

DSHS will receive a limited data set from the vendors with de-identified, patient-level data and over 300 heart attack and stroke process and performance measures. Data does not contain individually identifiable health information (direct patient and physician identifiers have been removed) and will be used only for the intended purpose. There are no unique identifiers, such as name and social security number that could be linked to a patient.

13. How will the data be protected and secured? Who will have access to the data?

Data will be stored on a DSHS secure network drive. DSHS data analysts involved in this initiative will have access to this data drive through password protected, non-portable computers.

14. How long are the data use agreements valid?

Validity of these agreements is dependent on the participating hospital's agreement with the database vendor. However, participants can request termination of DSHS data use agreements at any time with 30 days written notice.

15. Why is DSHS using these specific databases for the initiative?

The Heart Disease and Stroke Program followed guidance provided by the Texas Council on Cardiovascular Disease and Stroke to use the specified databases, in an effort to utilize the most comprehensive, detailed and up-to-date data to accomplish the goals of the Rider 97 initiative.

The NCDR ACTION Registry-GWTG, is the only national database for comprehensive acute myocardial infarction data and the most frequently used by PCI-capable hospitals in Texas. Approximately 141 out of 150 PCI-capable hospitals in Texas have an NCDR ACTION-Registry GWTG account.

GWTG-Stroke through Quintiles provides one of the most comprehensive databases for stroke. Other vendors also maintain stroke data, but most of them only collect stroke core measures. GWTG-Stroke is a quality improvement program which allows hospitals to identify areas of improvement for various stroke measures. Currently 137 hospitals in Texas are participating in GWTG-Stroke. In addition, 85 percent of stroke discharges in Texas during 2012 were from a hospital that uses GWTG-Stroke.

16. If my hospital already submits data to our Regional Advisory Council (RAC) for the NCDR ACTION Registry-GWTG and GWTG-Stroke defined metrics and they have the information, A.) Can DSHS just access the data from the RACs? B.) Will my hospital have to submit to both DSHS and the RAC?

- A. DSHS is also working with the RACs to collect data to inform the comprehensive system of care for both heart attack and stroke. DSHS is working with RACs to avoid reporting duplication.
- B. Participation in the initiative requires hospitals to submit data to GWTG databases and allow DSHS access to this data. Hospitals do not directly submit data to DSHS.

If you would like another copy of the stroke and/or heart attack participation packets, please contact Roberto Rodriguez at 512-776-3646 or Roberto.Rodriguez@dshs.state.tx.us.