



STATE OF HAWAII
DEPARTMENT OF HEALTH
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WRITTEN
TESTIMONY

**Testimony in SUPPORT on HB0589, HD1, SD1
RELATING TO STROKE CARE**

SENATOR JILL TOKUDA, CHAIR
SENATE COMMITTEE ON HEALTH

Hearing Date: March 31, 2015

Room Number: 211

1 **Fiscal Implications:** In the Senate Draft 1 version, cost items would be absorbed through
2 existing departmental budgets and staffing.

3 **Department Testimony:** The Department of Health (DOH) supports HB0589, HD1, SD1 to
4 improve stroke care in the state and to continue the collaborative process of the Stroke Task
5 Force created by S.C.R. No. 155 S.D.1 (2013).

6 The Department has continued to participate with the Stroke Task Force, now known as
7 the Stroke Coalition, in developing a framework to improve stroke care in the state and worked
8 with stakeholders to amend the bill, now **SD1**. The amendments reflect the consensus of the
9 public-private partnership efforts to improve the quality of stroke care. Also, the participation in
10 the state quality improvement stroke database will position the Department for future
11 competitive federal grants to improve the system of care given to patients experiencing a stroke
12 from the onset of symptoms.

13 The **SD1** more accurately reflects the responsibilities and capabilities of the Department
14 in the stroke system of care, and **is consistent with existing statutes for Emergency Medical**
15 **Services**, identifies the collaboration with the Stroke Coalition, participation in a stroke database,
16 and providing reporting, analysis, and support for improving the quality of care. The Department
17 will be participating with hospitals in an existing nationally recognized stroke database registry,
18 and not establishing a separate database which significantly reduces the funding requirements.

19 Thank you for the opportunity to testify.



Tuesday, March 31, 2015 – 9:00 a.m.
Conference Room #211

Senate Committee on Ways and Means

To: Senator Jill Tokuda, Chair
Senator Ron Kouchi, Vice Chair

From: George Greene, President & CEO
Healthcare Association of Hawaii

Re: **Testimony in Support**
HB589 HD1 SD1— Relating to Stroke Care

The Healthcare Association of Hawaii's 160 member organizations include all of the acute care hospitals in Hawaii, all public and private skilled nursing facilities, all the Medicare-certified home health agencies, all hospices, all assisted living facilities, durable medical equipment suppliers and home infusion/pharmacies. Members also represent other healthcare providers from throughout the continuum including case management, air and ground ambulance, blood bank, dialysis, and more. In addition to providing quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 20,000 people statewide.

Thank you for the opportunity to testify in **support** of HB589 HD1 SD1, which requires the state Department of Health to participate in a stroke system of care, and requires certain acute care hospitals to report data for a stroke database.

In many ways, this bill would formalize the task force that the DOH convened over a year ago to fulfill Senate Concurrent Resolution No. 155 SD1 (2013), which urged the DOH to develop a stroke system of care. The Healthcare Association of Hawaii and many of its members' clinical staff have been, and continue to be, very active participants in the task force. The passage of this bill would allow this coalition to build upon its progress to improve the overall treatment and outcomes of stroke patients throughout our state.

Thank you for the opportunity to testify in support of HB589 HD1 SD1.



THE QUEEN'S HEALTH SYSTEMS

To: Chair Jill N. Tokuda
Vice Chair Ronald D. Kouchi
Senate Committee on Ways and Means

From: Paula Yoshioka
Senior Vice President
The Queen's Health Systems

Re: HB 589 HD 1 SD 1, Relating to Stroke Care
Hearing—March 31, 2015 at 9:00 AM

The Queen's Health Systems would like to take this opportunity to provide our strong support for HB 589 HD 1 SD 1. We would also like to highlight that none of the provisions of the bill would require a new appropriation. This legislation would be implemented with the continued commitment of volunteers and donated support from the Healthcare Association of Hawaii and American Heart Association.

For more than a decade, QMC has maintained certification by The Joint Commission as the only Primary Stroke Center in Hawaii. This certification recognizes the "exceptional efforts" made at QMC to "foster better outcomes for stroke care." QMC has also worked closely with our partners at the American Heart Association, Hawaii Neurological Society, and Department of Health to strengthen stroke care in our state. Over the last two years, QMC partnered with a number of stakeholders in order to propose legislation necessary to support Hawaii's stroke care continuum.

Stroke is a major public health problem in Hawaii—it is the leading cause of chronic adult disability and the third leading cause of death. Access to appropriate stroke treatment requires a collaborative and organized system of care, particularly for patients on the neighbor islands and rural areas of the state. This legislation will help to address disparities in stroke care by establishing a stroke system of care in Hawaii.

The formation of a stroke system of care will help to better identify and coordinate appropriate services; improve access to treatment for patients; support providers on the front lines of stroke care; and ultimately improve outcomes. Establishing a strong stroke system of care will also help to bring Hawaii in line with the majority of states that have passed similar legislation and current guidelines from the American Heart Association, American Academy of Neurology, and other professional societies.

This bill will directly improve stroke care in our state and will provide a tremendous benefit to our families in Hawaii. We ask for your strong support in strengthening stroke care in Hawaii by voting favorably on this measure.

The mission of The Queen's Health Systems is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.

Peter Rossi, MD, FAAN
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March 30, 2015

**HB 589 SD1, Relating to Stroke Care
Senate Committee on Ways and Means**

Chair Tokuda and Members of the Senate Ways and Means Committee:

On behalf of the Hawaii Neurological Society (HNS) Board of Directors, I would like to provide strong support for HB 589 SD1 version. I also want to emphasize that **support for this important legislation will not require new appropriations**. In fact, by participating in a statewide quality improvement database for stroke, the Hawaii Department of Health may be eligible for federal funding through the CDC Paul Coverdell National Acute Stroke Program. This federal program funds state Departments of Health to engage in quality improvement initiatives for stroke.

The HNS is a professional organization for neurologists in the state of Hawaii. The purpose of the organization is to provide a venue to foster continued growth of neurology, increase clinical research, facilitate health literacy, improve patient outcomes, assure patient safety, and assist advocacy. The HNS was founded in 2006 and currently represents 40 neurologist members.

Stroke is the leading cause of chronic adult disability and it remains the third leading cause of death in Hawaii. As neurologists, we are on the front lines of stroke care in the state and we see the devastating disability that can result after stroke. Although effective medical and procedural treatment for stroke is available, only the minority (~6%) of stroke patients in Hawaii currently receive emergency treatments. Furthermore, geographic disparities in stroke treatment exist across the state. Access to appropriate stroke treatment requires a collaborative system of care, particularly for patients on the neighbor islands and rural areas of the state.

This legislation will help to address disparities in stroke care by supporting an organized stroke system of care in Hawaii that includes the public, paramedics, emergency physicians, neurologists, hospitals, and government agencies. The formation of a stroke system of care will improve public knowledge of stroke, access to rapid evaluation and treatment by stroke experts, and patient outcomes. Thirty-one states have already enacted legislation to support a statewide stroke system of care, following guidelines from the American Heart Association, American Academy of Neurology, and other professional societies. Stroke systems of care have been demonstrated to improve stroke treatment rates and outcomes in the medical literature.

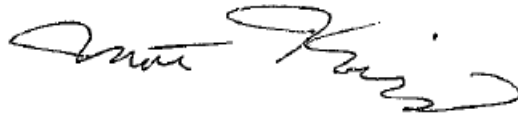
The current legislation recognizes an ongoing Stroke Coalition featuring representatives from the HNS, Department of Health, American Heart Association, hospitals, Emergency Medical Services, and other stakeholders

to share best practices in stroke care. This coalition acts as a forum to identify current gaps in stroke care and works together to address these deficiencies. The Stroke Coalition also includes important roles for the Department of Health and Emergency Medical Services division to participate in the coalition, review aggregate stroke data, and establish guidelines for patient triage to local hospitals. In addition, the legislation supports wider use of a statewide data registry to collect and analyze quality improvement data using the Get with the Guidelines – Stroke database, a national database for benchmarking stroke care.

This legislation will support the collaborative efforts of HNS members to improve stroke care in Hawaii and benefit our patients. We ask for your strong support by voting favorably on this measure.

Thank you for your time and consideration of this important legislation.

Respectfully,

A handwritten signature in black ink, appearing to read "Matthew Koenig". The signature is fluid and cursive, with a large initial "M" and a long, sweeping underline.

Matthew A. Koenig, MD
Board of Directors, Hawaii Neurological Society



American Heart Association/American Stroke Association Testimony in SUPPORT of HB 589, HD1, SD1 “Relating to Stroke”

The American Heart Association/American Stroke Association strongly **SUPPORTS** HB 589, HD1, SD1. It marks the culmination of a two-year collaborative effort between the American Heart Association/American Stroke Association, the State Department of Health and its EMS Division, and state acute stroke care hospitals to work toward finding ways to improve Hawaii stroke patient outcomes.

This collaborative effort emerged from a resolution passed during the 2013 State Legislative Session that established a state stroke task force and that requested that task force to propose legislation necessary to support Hawaii’s stroke care continuum. That request included requirements for the measuring, reporting, and monitoring of stroke care performance through data collection, and that a statewide stroke database and registry be established in which all hospitals and healthcare facilities can participate. The resolution asked that the feasibility be considered of integrating the data registry component through an AHA/ASA Get With The Guidelines super-user account, and that the database and registry include performance measurements obtained using a standardized stroke measure set containing data that is consistent with nationally-recognized guidelines on the treatment of individuals with confirmed stroke within the State, such as the AHA’s Get With The Guidelines-Stroke or the Joint Commission’s Stroke Performance Measurement Implementation Guide. The legislature requested that an initial report to the legislature be made by Dec. 31, 2013, and that a final report be made prior to the legislature’s 2015 session. HB 589 HD1, SD1 is the culmination of the State Stroke Task Force’s work to meet the State Legislature’s request.

Stroke is Hawaii’s third leading cause of death and a leading cause of disability. In an effort to reduce the burden of stroke by improving the quality of care delivered to stroke patients, stroke registries have been developed in other states to measure and track acute stroke care.

The registries collect patient level data on characteristics, diagnostic testing, treatments, adherence to quality measures, and in-hospital outcomes in patients hospitalized with stroke and transient ischemic attack (TIA). By providing timely feedback on hospitals’ and EMS agencies’ stroke care performance, a stroke registry supports stroke care quality improvement efforts.

Establishment of a State Stroke Registry in Hawaii could help illuminate problems that exist in the state’s stroke system of care. For instance, data may show poor patient education about stroke symptoms, geographical differences in the quality of stroke care received, problems with adherence to stroke treatment guidelines, or the need to improve pre-hospital stroke response or treatment by our county EMS agencies. The data could then catalyze our state’s stroke stakeholders to find solutions to the challenges encountered.

*“Building healthier lives,
free of cardiovascular
diseases and stroke.”*

life is why™ es por la vida™ 全为生命™

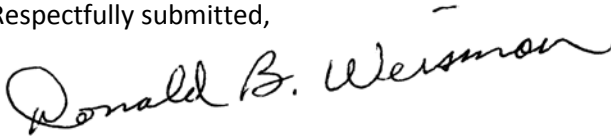
Please remember the American Heart Association in your will.



Through this legislative proposal to establish a State Stroke Data Registry the DOH would use State Neurotrauma Special Fund dollars, already approved by that Fund's advisory board, to purchase a Get With The Guidelines-Stroke super-user account. Neurotrauma Fund dollars would also be used to cover the costs of hospitals not already using the tool to purchase Get With The Guidelines-Stroke accounts. Most of the state's private acute stroke care hospitals already use Get With The Guidelines-Stroke to collect data, but don't share the data collaboratively. Under the proposal, all acute stroke care hospitals would be required to collect mutually-agreed upon data sets, based on nationally-recognized medical guidelines, and share that data with the DOH, which would then share the de-identified data with other members of the State Stroke Coalition (formerly known as the State Stroke Task Force). The Coalition members would then use the data to identify areas for improvement within the state's stroke system of care and develop additional proposals to work together toward improving stroke patient care in Hawaii.

The AHA/ASA believes that all policy should be based on sound science. The data provided by hospitals through their treatment of stroke patients will provide a science-based foundation on which future stroke care improvements can be made, and their effectiveness measured. The AHA/ASA strongly encourages legislators to **SUPPORT HB 589, HD1, SD1**. It will save and significantly improve lives in Hawaii.

Respectfully submitted,

A handwritten signature in black ink that reads "Donald B. Weisman". The signature is written in a cursive style with a horizontal line above the name.

Donald B. Weisman
Hawaii Government Relations Director



Senator Jill N. Tokuda
Chair
Senate Committee on Ways and Means

Hearing Date: March 31, 2015

Testimony in SUPPORT of HB 589, HD1, SD1

Dear Senator Tokuda and Committee Members

I am writing as President of the Hawaii College of Emergency Physicians, and the representative for the College on the Stroke Coalition. We fully support HB589, establishing a stroke system of care in Hawaii.

Our physicians are the first contact for the vast majority of stroke patients in Hawaii. While we feel that treatment of stroke in Hawaii's emergency departments is currently very good, we recognize the need to continue to improve care. We feel that a formalized stroke system of care through the Department of Health will help to raise the bar for stroke treatment in our emergency departments, inpatient units, and outpatient treatment programs alike.

Sincerely

William Scruggs, MD, FACEP
President, Hawaii College of Emergency Physicians

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HB589

Submitted on: 3/29/2015

Testimony for WAM on Mar 31, 2015 09:00AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Linda Rosen	Hawaii Health Systems Corporation	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Tuesday – March 31, 2015 – 9:00 am
Conference Room 211

SENATE COMMITTEE ON WAYS AND MEANS

Senator Jill Tokuda, Chair
Senator Ronald Kouchi, Vice Chair

From: Michael Robinson
Executive Director, Government Relations & Community Partnerships
Hawai'i Pacific Health

**Re: HB 589, HD 1, SD1 Relating To Stroke Care
Testimony in Support**

My name is Michael Robinson, Executive Director of Government Relations & Community Partnerships for Hawai'i Pacific Health. Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-government employer. It is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

I am writing in support of HB 589, HD1, SD1, which establishes a system of care for stroke patients with the participation of the Department of Health and in coordination with the hospitals and emergency medical services. The bill also addresses the need for vital information through the collection of data on the treatment of patients who have or are suspected of having suffered a stroke.

Stroke is the leading cause of death in Hawaii. Rapid identification, diagnosis and treatment of stroke are effective in saving lives and may reverse the associated neurological damage. Thus, a systematic process which is consistent among health care providers and hospitals to evaluate and improve stroke care will enhance outcomes for stroke patients.

Thank you for the opportunity to provide this testimony.



March 30, 2015

Matthew A. Koenig, MD, FNCS
Chair, Hawaii Stroke Coalition
mkoenig@queens.org

HB 589 SD1 version, Relating to Stroke Care
Senate Committee on Ways and Means
Hearing—March 31, 2015 at 9:00 AM

Dear Chair Tokuda and Members of the Senate Committee on Ways and Means:

As chair of the Hawaii Stroke Coalition, I would like to urge the Senate Committee on Ways and Means to support this important legislation to improve our state's stroke system of care. I would like to provide testimony in support of HB 589 SD1 version. The SD1 version of HB589 reflects the consensus of Hawaii Stroke Coalition members. I also want to emphasize that **support for this important legislation will not require new appropriations**. In fact, by participating in a statewide quality improvement database for stroke, the Hawaii Department of Health may be eligible for federal funding through the CDC Paul Coverdell National Acute Stroke Program. This federal program funds state Departments of Health to engage in quality improvement initiatives for stroke.

The Hawaii Stroke Coalition is a statewide community stakeholder organization focused on improving the quality of stroke care in Hawaii hospitals, increasing public knowledge and access to care, and improving outcomes. The coalition has representatives from all acute care hospitals in the state, the Hawaii Department of Health, Emergency Medical Services, the American Heart Association, and other organizations invested in improving stroke care. The Hawaii Stroke Coalition was recognized in SCR155 and tasked with making recommendations for legislation to improve stroke care in Hawaii.

Stroke is the leading cause of permanent adult disability and it remains the third leading cause of death in Hawaii. Only about 6% of stroke patients in Hawaii currently receive a thrombolytic (clot-buster) medication which is the only proven effective treatment that has been shown to reduce the burden of disability. In addition, stroke treatment rates range from 1% to 12% of stroke patients in different areas of the state, highlighting disparities in access to state-of-the-art care. Improving stroke treatment requires collaborative efforts in Hawaii, particularly for residents living on the neighbor islands.

HB589 will improve stroke care by establishing an organized system of care in Hawaii. Thirty-one states have already enacted similar legislation to establish regional stroke systems of care, following guidelines from the American Heart Association and other professional societies. This legislation codifies the roles of the Hawaii Department of Health and Hawaii Stroke Coalition in working together to share stroke quality improvement data, define best practices for stroke care based on current national guidelines, and advise Emergency Medical Services on treatment and triage guidelines. In addition, the legislation supports the creation of a statewide data registry to collect and analyze quality improvement data using the Get with the Guidelines – Stroke database, a national database for benchmarking stroke care.

As part of a consensus-based process, the Hawaii Stroke Coalition worked with members of the Department of Health, Emergency Medical Services, American Heart Association, and Hawaii Association of Hospitals to recommend amendments to HB589. The current SD1 version of HB589 reflects this consensus process. This version of the bill defines the roles of the Hawaii Department of Health and Hawaii Stroke Coalition within the stroke system of care in a manner that most accurately reflects this collaborative effort. We ask this committee to vote in support of HB589 SD1 version.

Thank you for your time and consideration of this important legislation.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew Koenig". The signature is written in a cursive style with a large, sweeping flourish at the end.

Matthew A. Koenig, MD, FNCS
Chair, Hawaii Stroke Coalition

HB 589 HD1 SD1
Relating to Stroke Care

SUPPORT

29 March 2015

Dear Senator Tokuda and members of the Senate Committee on Ways and Means,
HB 589 HD 1 SD 1 will allow for a comprehensive and more robust system of providing expeditious care to those with an acute Stroke.

This bill will also encourage the continued work of many healthcare leaders and stroke experts who have been addressing this issue and working to create a more efficient system over the past year, as members of the task force from 2013 SCR 155 SD 1. Solutions and improvements have already been identified to improve care by EMS, hospital emergency departments, stroke specialists and the overall health care system but in order to carry them out, we need backing of the State Department of Health and our legislature. Please support HB 589 HD1 SD1.

V/R,
Elizabeth Char MD