

Mission: Lifeline®
Hospital Recognition Program
Frequently Asked Questions

Q: What is the purpose of the Mission: Lifeline hospital recognition program?

A: The recognition program is a way to:

- Commend hospital teams for adhering to guidelines for evidence-based care of STEMI patients
- Raise awareness of hospitals' quality of care efforts among community members and stakeholders
- Encourage more healthcare providers to commit to guidelines-based care for STEMI patients

Q: How does recognition benefit a participating hospital?

A: Recognition provides:

- Additional motivation for hospital team members to consistently apply high standards of quality care
- A competitive marketplace advantage by demonstrating the hospital's commitment to quality
- The credibility of being commended by the American Heart Association, an organization that is widely known and respected

Q: What levels of recognition are available to Mission: Lifeline hospitals?

A: Hospitals can be recognized on the following levels:

- Bronze Performance Award
- Silver Performance Award
- Gold Performance Award

Q: What are the criteria for a Bronze Performance Award?

A: To qualify for a Bronze Performance Award, a hospital must:

[Register](#) hospital with Mission: Lifeline by completing hospital registration form

- Enter data on all STEMI patients into the ACTION Registry-GWTG
- Admit at least 10 STEMI patients per quarter
- Achieve at least 85-percent compliance on composite score with no single measure below 75 percent for at least one calendar quarter

Q: What if a hospital has fewer than 10 STEMI patients in any calendar quarter?

A: The hospital can forgo the Bronze recognition and apply for Silver recognition once it has completed one year at required performance levels and at a volume of 10 or more STEMI patients per quarter.

Q: Can a hospital choose any quarter to qualify for Bronze recognition?

A: Mission: Lifeline will use the most recent eligible quarter. A hospital is only eligible for one Bronze award in a calendar year.

Q: What are the criteria for a Silver Performance Award?

A: To qualify for a Silver Performance Award, a hospital must:

- [Register](#) hospital with Mission: Lifeline by completing hospital
- Enter data on all STEMI patients into the ACTION Registry-GWTG
- Admit at least 10 STEMI patients per quarter
- Achieve at least 85-percent compliance on composite score with no single measure below 75 percent for 12 consecutive months (4 calendar quarters) with data aggregated over the 12-month period

Q: Can the data be from any 12 consecutive months?

A: No, it must be data collected over a calendar year, January through December.

Q: What are the criteria for a Gold Performance Award?

A: To qualify for a Gold Performance Award, a hospital must:

- [Register](#) with Mission: Lifeline by completing hospital registration from Enter data on all STEMI patients into the ACTION Registry-GWTG
- Admit at least 10 STEMI patients per quarter
- Achieve at least 85-percent compliance on composite score with no single measure below 75 percent for 24 or more consecutive months (8 consecutive calendar quarters).

Q: Can the data be from any 24 consecutive months?

A: No, it must be data collected from two consecutive calendar years, each from January through December.

Q: What if the average compliance over the two-year period is greater than 85 percent, but compliance for one of the two years does not meet the requirements?

A: Each 12-month period must meet compliance requirements to qualify.

Q: Can a hospital qualify for a bronze for more than 1 year?

A: A hospital cannot receive a bronze for more than 1 year. If the hospital has received a bronze then the only other awards that the hospital can receive in subsequent years will be either gold or silver.

Q: Are there differences in the qualification criteria for STEMI receiving centers and STEMI referral centers?

A: Performance Awards are categorized by two designations: STEMI receiving and STEMI referral. Both STEMI receiving centers and STEMI referral centers are required to maintain at least 85-percent compliance on Mission: Lifeline achievement measures, however the measures differ between the two types of centers.

Q: What are the achievement measures for STEMI receiving centers?

A: For STEMI receiving centers, achievement measures (STEMI-only patients) include:

- Acute antiplatelet therapy (within 24 hours)
- Door-to-balloon = 90 minutes (non-transfer)
- First medical contact to balloon inflation (1st device) = 90 minutes (non-transfer)
- % of reperfusion-eligible patients receiving any reperfusion (PCI or fibrinolysis therapy)
- Discharge antiplatelet therapy
- Discharge beta blocker
- Discharge ACE-1/ARB if LVSD
- Discharge lipid-lowering agent if LDL > 100
- Smoking-cessation counseling

Q: What are the achievement measures for STEMI referral centers?

A: For STEMI referral centers, achievement measures (STEMI-only patients) include:

- Acute antiplatelet therapy (within 24 hours)
- Door-to-needle = 30 minutes
- Door-to-first ECG time = < 10 minutes
- % of reperfusion-eligible patients receiving any reperfusion (PCI or fibrinolysis therapy)
- Discharge antiplatelet therapy
- Discharge beta blocker
- Discharge ACE-1/ARB if LVSD
- Discharge lipid-lowering agent if LDL > 100
- Smoking-cessation counseling

Q: Are there other measures that apply?

A: Yes, there are reporting measures that are reviewed and collected for Mission: Lifeline recognition, but they are not be used in calculating composite scores.

Q: What are the reporting measures?

A: For STEMI receiving centers, reporting measures include:

- In-hospital mortality
- % of STEMI patients with first medical contact-to-balloon inflation (1st device used) time within 90 minutes (transferred patients)
- % of STEMI patients with a referral hospital door-to-balloon (1st device used) time within 90 minutes
- % of STEMI patients with a receiving hospital door-to-balloon (1st device used) time within 90 minutes

For STEMI referral centers, there is one reporting measure:

- ED door-to-balloon (1st device used) time within 90 minutes (including transport time)

Q: What are the application steps and the timeline for Mission: Lifeline recognition?

A: The steps and timeline are as follows:

For 2010

- NCDR/DCRI produces a list of ACTION Registry-GWTG hospitals that have met Mission: Lifeline benchmarks
- AHA staff (Mission: Lifeline program manager or QI) notifies all qualifying hospitals of their award eligibility by e-mail.
- Hospital representatives sign pre-filled application/permission forms and return them to AHA staff (Mission: Lifeline program manager or QI)
- Mission: Lifeline staff members and volunteers review applications.

May:

- The Mission: Lifeline Science Task Force completes a final review and approval of applications.
- American Heart Association staff members notify hospitals approved for recognition.
- Each recognized hospital receives a promo kit, including a recognition certificate, recognition icon and press release form.

Q: Where can a hospital find its Mission: Lifeline data?

A: Hospitals, registered with Mission: Lifeline will start receiving their Mission: Lifeline reports in July 2010. Reports will be made available through NCDR on a quarterly basis.

Q: How long can recognized hospitals promote their recognition?

A: Recognition awards are granted for a one-year period. During that time, the hospital may display the recognition icon.

Q: What does the American Heart Association do to publicly recognize award-winning hospitals?

A: The American Heart Association publicizes recognition by:

- Listing the names of all Gold and Silver award-winning hospitals in an advertisement in the July "Best Hospitals" issue of *U.S. News & World Report*
- *Honoring Gold and Silver award-winners at a recognition ceremony during the American Heart Association Scientific Sessions in November.*

Q: I qualified for an ACTION Registry-GWTG award but don't qualify for a Mission: Lifeline award – why is that? Aren't they from the same database?

A: The recognition programs for ACTION Registry-GWTG and Mission: Lifeline are different even though the programs both use data from the same data registry tool. Unlike ACTION Registry-GWTG, Mission: Lifeline only looks at STEMI patients. Also, the definitions (inclusion and exclusion criteria) differ between both programs. Lastly, for Mission: Lifeline no measure should go below 75% with a composite of 85%.

Q: Will hospitals receive a report indicating their performance against the measures?

A: Yes. Hospitals registered with Mission:Lifeline will be receiving their hospital reports on a quarterly basis beginning July 2010.

Q: Who do I contact if I have questions about? The paperwork process? Questions about my measures?

A: For Mission: Lifeline specific questions, please contact the [Mission: Lifeline program manager](#).