



Agenda Business Meeting WG Interventional Cardiology of Switzerland

Date	Friday, 18. March 2022
Time	18:20-19:20
Place	Hotel Seedamm Plaza, Pfäffikon SZ
Board WG PCI	Daniel Weilenmann (DW, president), Raban Jeger (RJ, president elect), Oliver Gämperli (OG), Lorenz Räber (LR), Fabian Nietlispach (FN), Olivier Muller (OM), Pascal Meier (PM)
Minutes	Marjam Rüdiger (MR)
Invited	Christophe Wyss (CW), Board of the SSC / President Tarif Commission SSC; Christoph Kaiser, Fachkommission Klinische Audits Strahlenschutz in der Kardiologie

A = Approval D = Decision FO = forming of opinion I = Information O = Order

DW	A	1. Welcome and Information by the president <ul style="list-style-type: none"> - Minutes meeting WG PCI 6.9.21: silently approved - Statutes of the WG PCI are active and online, members need to be members of the SSC, applications to ptca@swisscardio.ch
DW	D FO	2. Board composition and elections <ul style="list-style-type: none"> - Elections <ul style="list-style-type: none"> o New president: Raban Jeger: Members confirm the election by acclamation, RJ will take over after assembly in June 2022 o New president elect: the board proposes Oliver Gämperli, members elect by acclamation, no votes against or abstentions o Board members: Lorenz Räber, Olivier Muller, Fabian Nietlispach and Pascal Meier are confirmed as board members per acclamation. As Past-president Daniel Weilenmann will remain member of the board for another year. - Future elections: a new board member will be elected in 2023, applications are welcome (some already have been announced to the board). Requirements in the statutes need to be maintained, but every member can present his/her application if support of application by local center is given. - The board has discussed installation of a nominating committee. The presidents asks if members see a need for a nominating committee. No one speaks up.
DW	I	3. New Members <ul style="list-style-type: none"> - Johannes Waltenberger, Zurich is presented as new applicant. He introduces himself and is admitted by acclamation.
LR	I	4. Swiss Cardiology Quality Registry (SwissCaRe) <ul style="list-style-type: none"> - Statistical survey of up to now will be sent one last time for the data 2021 and will be discontinued once SwissCaRe is in place. - New prospective Swiss Cardiology Registry (SwissCaRe) will shortly be launched. Database has been prepared with limited set of variables defined by working group. Database and monitoring of quality will be responsibility of SwissRDL of the University of Bern with whom SSC has a contract. SSC will be responsible for contacting centers and coordination and will have a new employee, Dr. Luisa Schäfer) as of 1.4.22 especially for support of the registry. Centers can enter data online via a website or via interface, centers will have full access to their data. SSC has no patient level access, only aggregated data provided by SwissRDL (benchmark analysis). No active follow up will be necessary, for outcome, data will be matched with mortality data from Federal office of statistics. For this identification of individual patient is necessary, this is subject of patient consent (can be integrated into intervention consent form). No ethical approval is necessary because the registry is for quality purposes. Steering committee is composed of representatives of SSC board and WGs. One position is still open and any applicants are asked to get in touch with the board. Agreements between centers and SSC will be necessary. Finances for 2021-2024 are covered by SSC, WG PCI plus industry support.

		<p>Next steps: set up, contact and contracts with sites until Q2/Q3 2022, first report Q2 2023; full year report 2023.</p> <ul style="list-style-type: none"> - Philipp Hoigné, Bern: Hirslanden Bern has a database supported by ISPM Bern he can only recommend the ISPM Bern/SwissRDL which does a great job, has a great support and is very professional. No active follow-up is required, mortality data will be obtained from Bundesamt für Statistik/Office fédéral de statistique. Patient consent will be necessary for this. No ethical approval is necessary because it is a quality control measurement. - Johannes Rieger, St. Gallen: reports that 7-10min are required initially to fill in the data. Probably this time can be shortened with a little practice. - Hans Rickli, St. Gallen: AMIS Plus registry still exists and at some time in the future it will need to be discussed on how to proceed with these two registries which cover a very similar topic and should not for long exist both in parallel. <p>Lorenz Räber: a word of caution: we need to take care not to have the outcome we have with the TAVI-Registry, where the data is being used against us (see below).</p>
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CW	I	<p>5. Tariffs – developments</p> <ul style="list-style-type: none"> - TARDOC 1.3 was resubmitted to the BAG/OFSP on 15.12.21, a decision is expected until summer 2022, ideally with introduction in January 2023. - Developments flat rates: In summer 2021 parliament decided that any flat rates need to be the same for all of Switzerland and for all tarif partners. The work done by SantéSuisse, FMCH and SSC on flat rates prior to this decision are now nil since they were intended to be between service provider and insurance on an individual basis. Following this decision, SantéSuisse, FMCH and H+ founded solutions tarifaires suisses and launched a project to develop national flat rate tariffs. Their ideas were first presented to members of the FMCH in November 2021. Database was uniquely billing information from hospitals, no data from private practices were included. Flat rates were based solely on statistical analysis, no medical knowledge or considerations entered the development. In parallel to in hospital DRGs the flat rates were ambulatory DRGs. The first draft of this idea was refuted by the members of the FMCH. Therefore, the proposal was not submitted to the BAG/OFSP for approval but rather just for examination. The process and work of solutions tarifaires suisses and especially the role of the FMCH were heavily criticized by the SSC and other member societies. - Reimbursement of TAVI: on 15.12.21 the BAG/OFSP informed the insurances that it is illegal of insurances to pay for TAVI in low risk patients and that it would no longer tolerate this. The SSC, its working group interventional cardiology as well as the cardiac surgeons together wrote a letter of protest in reply. The BAG/OFSP has not taken into account the newest Guidelines which base indication not solely on STS score anymore and cost data are undifferentiated. The letter emphasized that there should be no discussion in regard to the chosen mode of intervention/operation if the indication is based on a heartteam decision and that any such decision contradicts medical guidelines. Simultaneously SSC submitted on 9.2.22 a demand to Eidgenössische Kommission für allgemeine Leistungen und Grundsatzfragen (ELGK) / Commission fédérale des prestations générales et des principes (CFPP) Discussion: Costs are higher for cardiological interventions due to the high prizes of implants, these need to drop (even if innovation costs). Should we address patient organizations or go public? - The BAG will shortly send out the report “HTA Stakeholder Analysis Stable Coronary Angiography”. The board has been asked by the SSC to write a reply in the name of the society.
FN	D	<p>6. Financial statement</p> <ul style="list-style-type: none"> - Due to the COVID pandemic and the resultant postponement by one year of the wintermeeting as well as the financial commitment to the registry, a loss of 29'741 CHF resulted for the year 2021. The reserves are at 342'275 CHF. For 2022 again, a loss is likely to result of around 67'000 CHF. - Financial report and budget are silently approved, no comments

DW	I	7. Future Meetings <ul style="list-style-type: none"> - LUCCA – LUcerne Complex and CALcified PCI Meeting, 7th-8th April 2022, LUKS - CoALC Meeting (Cours romand sur l'angioplastie des lesion coronaires complex calcifiées), 1-2 June 2022, Geneva - Joint Annual Meeting SSC/SSCS in St. Gallen June 15th-17th 2022 - Endovascular Cardiac Ccomplications ECC, 22-24 June 2022, Lausanne - SwissCTO & chip Summit 2022, St. Gallen, 29-30 September 2022 - Winter-Meeting 2023 in Neuchatel, Hotel Beaulac, January 20th - 21st 2023 - Joint Annual Meeting SSC/SSCS-SSP in Basel, June 21-23, 2023
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DW/ BH	I	8. Varia <ul style="list-style-type: none"> - Swiss Curriculum Interventional Cardiology (Mueller/Gämperli) – Schwerpunkt/Formation approfondie: a draft is being developed. The Working group wants to prepare a draft that can thereafter be discussed with different stakeholders. - Radiation Protection Audits <ul style="list-style-type: none"> o Clinical Audits are mandatory since 2018, interventional cardiology accounts for 0.75% of cases and 9.8% of total radiation exposure. o For interventional cardiologists and electrophysiologists o Audits have taken place: 2019: Hirslanden Aarau, USB, USZ; 2021: CHUV, KSW, Klinik St. Anna Luzern (not yet finished); 2022: Clinique Cecil, Hirslanden Klinik Pfäffikon, Hirslanden Klinik im Park plus at least 3 others. o Preparation: prepare in advance because it takes time to prepare, get the “Manual klinische Audits” on the SSC homepage to prepare your “Qualitätshandbuch” o Special session at annual meeting SSC St. Gallen, 16.6.21 13:30-15:00
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Next meeting: Assembly during Joint annual meeting, Wednesday, 15.6.22 11:00-11:45

For the protocol M. Rüdiger/D. Weilenmann