

Working with VISION Data

Kayla Moore and Jialin Mao



Accessing VISION Data: How to get your project on “The List”

Kayla Moore, MPH



Overview: Understanding how to work with VISION Data

- What makes VISION special?
- What are the Medicare-derived late outcomes?
- What are the rules governing use of VISION data? (scope, access, data transfers)
- How do I get my project on the “*on-deck list*”?
- How to avoid common pitfalls
- Where do I find more information?

Context: What makes VISION special?



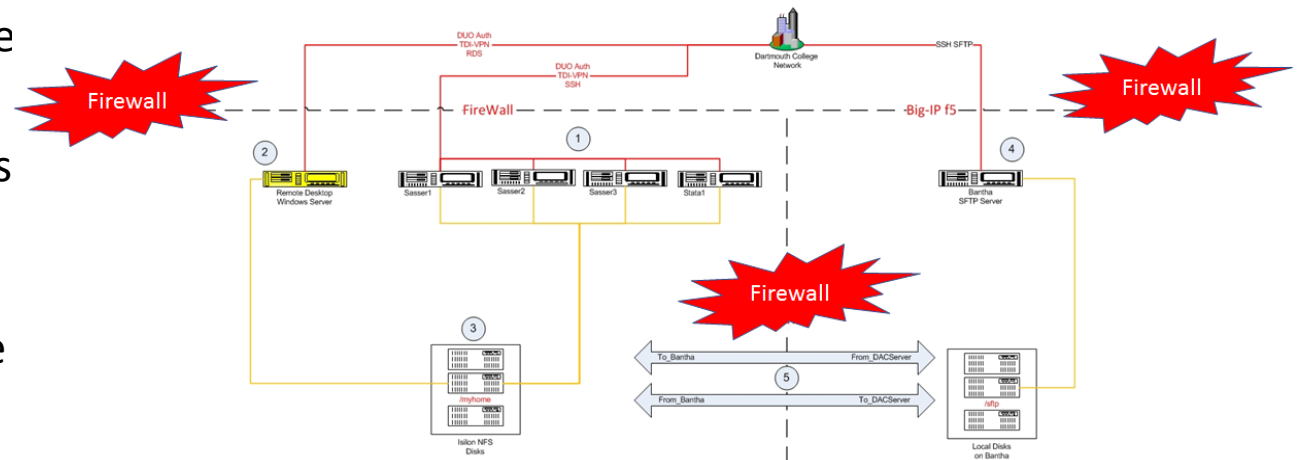
- VQI + Medicare Claims = VISION
 - 140+ clinical covariates in VQI
 - Longitudinal follow-up in Medicare (can follow individuals if they move to different centers)
 - Cost data
- Existing CMS Data Use Agreement
 - Bypasses need to obtain a new DUA for every research question (*restrictions apply*)
 - Significant savings in cost and time – a new CMS DUA takes a minimum of 3-5 months. Data is costly and requires additional resources for security, cleaning, linking, and developing analytic datasets
- Analytic team with specialized knowledge

Restrictions Apply:

Rules governing use of CMS Data

- Data must remain on secure HIPAA/FISMA compliant server
- Access is restricted to individuals named on the DUA
- No individual level data can be removed from the server
- Only aggregate/de-identified data (tables, figures) be removed from the server.
- Output is reviewed by IT security team prior to transfer to ensure suppression requirements are applied (no cell sizes less than 10)
- In addition, CMS requires that each DUA be project-specific and tied to a single funding source

Security Architecture



Scope of research allowed under WCM's existing DUA

Research must focus on evaluation of device outcomes, including the following:

- safety and efficacy of devices
- the impact of provider characteristics on device outcomes
- health disparity related to device use and outcomes
- the impact of medical practice guidelines and healthcare policies

What if I want to use VISION data for a project that is not within the scope of the existing DUA?

- Obtain separate funding and apply for a “re-use” of the VISION DUA

What are the Medicare-derived variables in VISION?

- Death
- Procedure-specific adverse outcome (stroke, aortic rupture, amputation)
- Reintervention (repeated vascular procedures)
- Readmission
- Post-procedure imaging (CT, MRI)
- Cost

Contact us to request a copy of the late outcomes variable dictionary

	A	B	C	D	E
14		year_index			index procedure year
15	Entitlement start and end				
		entitlement_atproc	All	Num	Had FFS coverage at the time of index procedure (1 = yes, 0 = no, missing = no mbrf for index year)
		entitlement_end	All	Date	Time when dropping out of FFS coverage (not because of death) for those who had entitlement at the time of index procedure if patient died and this variable is missing, it means patient had coverage until death
17	Index payment				
		index_inp_pmt	All	Num	Index inpatient total payment amount = MedPAR payment + MedPAR pass through (present if index was found in MedPAR)
		index_mdcr_passthru	All	Num	Index MedPAR passthrough (retained from index file)
		index_mdcr_pmt	All	Num	Index MedPAR/outpatient payment (retained from index file)
		index_out_pmt	PVI	Num	Index Outpatient payment amount (retained from index file, present if index was found in outpatient)
		index_ptb_pmt	All	Num	Index Part B total payment amount
		tot_mdcr_pmt	All	Num	Index total payment amount = inpatient/outpatient total + Part B total
25	Reintervention				
		reint_admdt1-reint_admdtN	AAA/TAAA/Carotid	Date	Admission date for the Nth reintervention
		reint_disdt1-reint_disdtN	AAA/TAAA/Carotid	Date	Discharge date for the Nth reintervention
		reint_dx1	AAA/TAAA/Carotid	Char	Principal diagnosis code for first reintervention (if procedure codes not in the list)
		reint_dt1-reint_dtN	PVI, LEB	Date	Date of the Nth reintervention from NCH file
		reint_los1-reint_losN	AAA/TAAA/Carotid	Num	Length of stay for the Nth reintervention
		reint_no1-reint_noN	All	Num	Indicator variable for the Nth reintervention
		reint_pmt1-reint_pmtN	AAA/TAAA/Carotid	Num	Medicare payment amount for the Nth reintervention (MedPAR payment + MedPAR pass through + Part B claim payment)
		reint_pr1	AAA/TAAA/Carotid	Char	Procedure code for first reintervention
		tot_reint	All	Num	Number of reinterventions following the index procedure
36	Reintervention subcategory specific to PVI				
		reint_endinflow1-reint_endinflowN	PVI, LEB	Num	Is the Nth reintervention an endo inflow procedure? (1=yes)
		reint_endinflow_cpt1-reint_endinflow_cptN	PVI, LEB	Char	If the Nth reintervention is an endo inflow procedure, CPT code for that procedure
		reint_endoutflow1-reint_endoutflowN	PVI, LEB	Num	Is the Nth reintervention an endo outflow procedure? (1=yes)
		reint_endoutflow_cpt1-reint_endoutflow_cptN	PVI, LEB	Char	If the Nth reintervention is an endo outflow procedure, CPT code for that procedure
		reint_openinflow1-reint_openinflowN	PVI, LEB	Num	Is the Nth reintervention an open inflow procedure? (1=yes)
		reint_openinflow_cpt1-reint_openinflow_cptN	PVI, LEB	Char	If the Nth reintervention is an open inflow procedure, CPT code for that procedure

How do I get access to VISION data?

VQI/VISION-funded projects – How do I get on the “*on-deck list*”?

How do I get access to VISION data?

VQI/VISION-funded projects – How do I get on the “on-deck list”?

Last Name	First Name (PI)	Project Title	Organization Name (PI)	Datasets
Alabi	Olamide	Ninety Day Reinterventions After Lower Extremity	Emory	Infrainguinal Bypass,Peripheral Vascula
Alabi	Olamide	mortality, readmission, re-intervention, limb	Emory	AAA, EVAR, CEA, CAS
Aronow	Herbert	Sex differences in prescription of medical therapy	Brown University	Amputation,Infrainguinal Bypass,Periphe
Balakian	Danielle	Anticoagulation and Antiplatelet Therapy in Below	Columbia University	
Barfield	Michael	Outcomes of Restenosis and Stroke in Patients		Carotid Artery Stent,Carotid Endarterecto
Beck	Adam	Evaluation of Morbidity and Mortality Associated	University of Alabama	Endovascular AAA,TEVAR/Complex EVAR
Beck	Adam	International Variation in Endovascular Treatment	University of Alabama	TEVAR/Complex EVAR
Benarroch-Gampel	Jaimie	Peroneal artery bypass outcomes in comparison to	Emory	Infrainguinal Bypass
Colvard	Benjamin	Physician-modified endografts versus	Cleveland Medical Center	TEVAR/Complex EVAR
Conrad	Mark	Risk Score predicting 5-year survival after Open	Mass General Hospital	EVAR, Open
Conway	Allan	AAA Sac Shrinkage in Patients with Short Infrarenal		
DeMartino	Randall	Late Outcomes After Endovascular or Open Repair	Mayo Clini, Rochester	Open & EVAR
Flohr	Tanya	Influence of Novel Oral Anticoagulants (NOACs)	Penn State Health	EVAR
Garz	Karan	Impact of Positive Stress Test on Postoperative	NYU	Carotid Artery Stent,Carotid Endarterecto
Garz	Karan	Outcomes of Endovascular Interventions for Acute	NYU	Peripheral Vascular Intervention
Garz	Karan	Effect of Conduit Choice and Distal Bypass Target	NYU	Infrainguinal Bypass
Garz	Karan	Characteristics and Outcomes in Patients	NYU	Endovascular AAA
Garz	Karan	Effect of graft configuration on outcomes in	NYU	Endovascular AAA
Garz	Karan	Effect of prophylactic coil embolization of aortic	NYU	Endovascular AAA
Garz	Karan	Effect of Diabetes on outcomes of open	NYU	Infrainguinal Bypass
Garz	Karan	Outcomes of Suprainguinal Inflow to Popliteal and	NYU	Infrainguinal Bypass,Suprainguinal Bypa
Garz	Karan	Effect on Anticoagulation and Antiplatelet therapy	NYU	TEVAR/Complex EVAR
Garz	Karan	Outcomes of bilateral hypogastric artery occlusion	NYU	Endovascular AAA
Garz	Karan	Interplay of Antihypertensive Therapy on	NYU	Carotid Artery Stent,Carotid Endarterecto
Garz	Karan	Outcomes of Isolated Popliteal artery	NYU	
Garz	Karan	Intervention Diameter and Outcomes of	NYU	PVI
Garz	Karan	Adjunctive false lumen interventions with TEVAR in	NYU	
Garz	Karan	Outcomes of Endovascular Interventions for Acute	NYU	PVI
Garz	Karan	The Effect of Anticoagulation on Hemodialysis	NYU	Hemodialysis Access
Garz	Karan	Impact of Positive Stress Test on Postoperative	NYU	
Garz	Karan	Effect of Antihypertensive Therapy on Perioperative	NYU	TEVAR/Complex EVAR
Garz	Karan	Outcomes of intact open infrarenal abdominal	NYU	Open AAA Repair
Hicks	Caitlin	Temporal trends in Carotid Artery Stenting	Johns Hopkins University H	Carotid Artery Stent,Carotid Endarterecto
Iannuzzi	James	Predicting Postoperative Outcomes after Thoracic	UCSF	TEVAR/Complex EVAR
Iannuzzi	James	Predicting Acute Kidney Injury After Elective TEVAR	UCSF	TEVAR/Complex EVAR
Iannuzzi	James	Predicting Postoperative Destination Through	UCSF	TEVAR/Complex EVAR
Indes	Jeff	Identification and Characterization of Patients	Montefiore Medical Center	Endovascular AAA,Open AAA Repair
Koleilat	Issam	Outcomes of Interventions for Radiation-Induced	Montefiore Medical Center	Carotid Artery Stent,Carotid Endarterecto
Koleilat	Issam	Impact of Atherectomy on Percutaneous Peripheral	Montefiore Medical Center	Peripheral Vascular Intervention
Koleilat	Issam	Behavior of Large Diameter Aortic Neck in	Montefiore Medical Center	TEVAR/Complex EVAR
Koleilat	Issam	Hybrid Femoral Endarterectomy and SFA Stenting	Montefiore Medical Center	Infrainguinal Bypass,Peripheral Vascula
Koleilat	Issam	Impact of Tibial Bypass Conduit on Long-Term	Montefiore Medical Center	Infrainguinal Bypass
Liane	Nathan	Carotid revascularization outcomes in patients	Montefiore Medical Center	Carotid Artery Stent,Carotid Endarterecto
Lucas III	John	Radial vs Brachial Based Arteriovenous Fistulas -		
Maze	Gregory	Discharge Prescription Patterns for Statin Therapy	USC	Infrainguinal Bypass,Peripheral Vascula
Maze	Gregory	Contemporary Treatment of Below the Knee Disease	USC	Peripheral Vascular Intervention

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Garz	Karan	Intervention Diameter and Outcomes of	NYU	PVI
Garz	Karan	Adjunctive false lumen interventions with TEVAR in	NYU	
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VQI/VISION-funded projects – How do I get on the “on-deck list”?

The image displays two Microsoft Excel spreadsheets side-by-side, illustrating the process of moving projects from a list of approved projects to an on-deck list for analysis.

Left Spreadsheet: VQI-VISION RAC-Approved projects under consideration (priority not yet assigned)

Last Name	First Name (PI)	Project Title	Organization Name (PI)	Datasets
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Garz	Karan	Effect of prophylactic coil embolization		
Garz	Karan	Effect of Diabetes on outcomes in patients		
Garz	Karan	Outcomes of Suprainguinal		
Garz	Karan	Effect on Anticoagulation		
Garz	Karan	Outcomes of bilateral		
Garz	Karan	Interplay of Anthy		
Garz	Karan	Outcomes of Isop		
Garz	Karan	Intervention Dis		
Garz	Karan	Adjunctive false		
Garz	Karan	Outcomes of Interventions with TEVAR in		
Garz	Karan	Outcomes of Interventions for Acute		
Garz	Karan	The effect of		
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Lucas III	Gregory	Radial vs Brachial Based Arteriovenous Fistulas -		
Maze	Gregory	Discharge Prescription Patterns for Statin Therap		
Maze	Gregory	Comparative Treatment of Below the Knee Disease		

Right Spreadsheet: VQI-VISION Projects on Deck for Analyses at WCM

Last Name	First Name (PI)	Project Title	Organization Name (PI)	Datasets	Status	Start D
Bertgas	Daniel	Outcomes of Paclitaxel coated devices vs. non-drug coated devices	University of Vermont	PVI	On hold	Jan-
Scall	Salvatore	EVAR conversion events	UF	PVI	in process	May-
Clouse	W. Darrin	Patient Selection and Stroke in Isolated CEA and Concomitant CEA/CABG	University of Virginia	CAS/CAE	On deck	Aug-
Chasar	Cassius	The Reintervention Index – a New Outcome Measure for Comparative	Yale School of Medicin	PVI	On deck	Sep-
Spangler	Emily	Common Femoral Artery Stenting in the VQI	UAB		On deck	Sep-

A large black arrow points from the left spreadsheet to the right. A yellow circle highlights "Under consideration" in the bottom status bar of the left spreadsheet, and a green circle highlights "Reviewed - On Deck" in the bottom status bar of the right spreadsheet.

How do I get access to VISION data?

VQI/VISION-funded projects – How do I get on the “*on-deck list*”?

1. Obtain VQI/RAC approval

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 - Clarity/feasibility of research question

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 - Clear need for Medicare data

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 - Falls within scope of DUA

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 - Clear need for Medicare data
 - Falls within scope of DUA
 - Addresses a gap in knowledge

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 - Clarity/feasibility of research question
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 - Falls within scope of DUA
 - Addresses a gap in knowledge
3. VISION Analytic Team requests research memorandum

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1. Obtain VQI/RAC approval
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 - Clarity/feasibility of research question
 - Clear need for Medicare data
 - Falls within scope of DUA
 - Addresses a gap in knowledge
3. VISION Analytic Team requests research memorandum
4. VISION Analytic Team works with you to refine analytic plan and conduct analyses

How do I get access to VISION data?

Externally funded projects

Example: NIH, AHA, PCORI, FDA

1. Engage VISION team during proposal development to:
 - Ensure feasibility
 - Obtain preliminary data for use in proposal
 - Define scope and budget for VISION Team (can vary from basic DUA support to in-depth analytic support)
2. Obtain VQI/RAC Approval
3. Apply for a “re-use” DUA to use VISION data at WCM (CMS requires a separate DUA for each funding source)

Recap: Steps for success & How to avoid Common Pitfalls

- Before RAC proposal
 - ✓ Become familiar with rules governing use of VISION Data
 - ✓ Identify which late-outcomes variables you wish to use
 - ✓ Ensure project is feasible (aligns with available data years, not overly complex)
 - ✓ Ensure projects includes a device-specific component
 - ✓ Contact VISION Team with any questions
- After RAC Approval
 - ✓ Follow-up with VISION Team to discuss timeline/priority
 - ✓ Be open to potential collaboration with other investigators with overlapping projects

Additional Information

<https://www.vqi.org/data-analysis/blinded-datasets/>

Kayla.O.Moore@Dartmouth.edu

The screenshot shows a web page with a navigation menu on the left and main content on the right. The navigation menu includes: Home / Data Analysis / SVS VQI Medicare Matched Blinded Datasets, Data Analysis, SVS VQI Publications, RAC Approved Project Search, SVS VQI Medicare Matched Blinded Datasets (highlighted), SVS PSO Data Analysis Guidelines for Use, Industry Project Charters and Process, and CREST-2 Randomized Control Trial. The main content area has a heading: Vascular Implant Surveillance and Interventional Outcomes Network (VISION): SVS VQI-Medicare-Matched datasets. Below this is an Overview section with a paragraph describing the partnership between SVS VQI and MDEpiNet, and a Dataset Description section listing outcomes available for various datasets. A list of outcomes includes: 1. Death, 2. Procedure-specific adverse outcome (stroke, aortic rupture, amputation), 3. Reintervention (repeated vascular procedures), 4. Readmission, 5. Post-procedure imaging, and 6. Cost. At the bottom, there is a reference to supplemental materials, including a Late Outcomes Descriptive Memo.

Home / [Data Analysis](#) / SVS VQI Medicare Matched Blinded Datasets

Data Analysis

- Data Analysis
- SVS VQI Publications
- RAC Approved Project Search
- SVS VQI Medicare Matched Blinded Datasets
- SVS PSO Data Analysis Guidelines for Use
- Industry Project Charters and Process
- CREST-2 Randomized Control Trial

Vascular Implant Surveillance and Interventional Outcomes Network (VISION): SVS VQI-Medicare-Matched datasets

Overview

The SVS VQI [Vascular Implant Surveillance and Interventional Outcomes Network \(VISION\)](#) is a partnership between the SVS VQI and [MDEpiNet](#) that directly supports the mission of the SVS VQI to improve the quality, safety, effectiveness and cost of vascular healthcare by collecting and exchanging information. VISION links SVS VQI registry data to Medicare claims to generate novel registry-claims linked datasets. The datasets combine the clinical detail from the SVS VQI with long-term outcome variables derived from Medicare claims. VISION data is used to generate center-specific feedback reports called, [Survival, Reintervention and Surveillance \(SRS\)](#) and to analyze device performance and long-term outcomes of vascular surgical techniques. Use of the data is governed by a Data Use Agreement (DUA) between Weill Cornell Medical College and the Center for Medicaid and Medicare Services (CMS).

Dataset Description: Medicare-Match data are available for EVAR, OAAA, PVI, TEVAR, CAS, INFRA and SUPRA datasets. For each dataset, the following SVS VQI-Medicare derived outcomes are available:

1. Death
2. Procedure-specific adverse outcome (stroke, aortic rupture, amputation)
3. Reintervention (repeated vascular procedures)
4. Readmission
5. Post-procedure imaging
6. Cost

For more details on how VISION datasets are generated, and how to use VISION data, please refer to the following supplemental materials:

- [Late Outcomes Descriptive Memo](#)

Now that you are on "the list"

Working with the VISION analytical team

Jialin Mao, MD, MS

A full research protocol

Research Memorandum

I. Brief background and research question

a. Brief background

(Please specify the specific goals and objectives of research, and hypothesis if any)

b. Device being studied

(The DUA with CMS is device based. Examples: stents, carotid patches, angioplasty balloons)

c. Prior research related to the topic that you think would be helpful to refer to, if any

II. Methods

a. Datasets and population

Please specify the VQI-Medicare linked dataset you intend to use

EVAR Open AAA CEA CAS
 PVI Infra Supra TEVAR

Years of inclusion: _____
(currently there are linked data up to 2016 available)

b. Study population

b1. Inclusion criteria (i.e. age group, sex, indication or diagnosis, specific procedure)

(If you know the exact variable for procedures/indications in VQI that will be used here, specifying here would be helpful.)

Example:

- Medicare beneficiaries above age 65 linked to VQI
- Undergoing balloon angioplasty or stent placement
- Femoral popliteal disease

b2. Exclusion criteria, if any (i.e. certain patient characteristics, previous or concurrent procedure)

c. Key variables

c.1. Exposure (i.e. time trend, comparison groups):

c.2. Outcomes:

c.3. Covariates:

If not otherwise specified, we will include age, sex, race/ethnicity, and procedure year by default. Please specify other important covariates you'd like to include: (i.e. comorbidities, procedure characteristics, center volume)

d. Statistical methods

Please include any preliminary thoughts you have. This can be further refined later.

III. Additional information

Include any additional information you'd like to provide.

Dataset and years

- Dataset
 - AAA, Carotid, PAD
 - Vein will be added this year
- Data years: currently up to 2016, expecting update to 2018
 - Are there restrictions to the years of data due to procedures or the availability of variables?
 - Is the current sample size going to be big enough?



Wait or change some criteria?

Note: CMS data release + DUA amendment -> 2 year data lag

Study design

- Inclusion/exclusion criteria
- Exposure and outcome
- Important covariates
- Statistical methods: preliminary thoughts are ok!

Have questions? Contact us!

What's helpful for the analytical team to know?

- A little bit background would be helpful
- Former studies with similar topics or designs
- Definition of variables based on VQI data
- Things that you are looking for from claims data

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What if the variables are not in the current dataset?

What happens next

✓ On deck

✓ Full protocol

✓ Your turn

- We will review your protocol and mark our questions and thoughts
- We will reach out to you to kick start:
 - We are all very good at using Zoom now
 - We bring our questions, you bring yours
- Likely staged process
 - Clarify questions
 - Query rough numbers
 - Analysis <-> Changes

Questions?

Thank you