VQI EVAR SRS Reports

In keeping with our goal to improve the safety, quality, effectiveness and cost of vascular care, the Vascular Quality Initiative is pleased to provide participating members with center-specific Endovascular Abdominal Aortic Aneurysm Repair (EVAR) Survival, Reintervention, and Surveillance Reports (SRS).

These reports are produced by the VQI as part of the Vascular Implant Surveillance and Interventional Outcomes Network (VISION) Project, an FDA-VQI collaboration. The reports are based on VQI-Medicare linked data and show each centers’ long-term performance after EVAR compared to the VQI as a whole.

These reports are unique in that they contain data on five-year performance outcomes. The reports include graphs showing five-year reintervention, survival, and imaging surveillance rates for your center and the VQI overall. The goal of the SRS reports is to help VQI members assess their performance as compared to the rest of the VQI and to improve the quality of vascular care at their center.

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Frequently Asked Questions

1. What is the inclusion/exclusion criteria for matching?
   a. Patients with valid SSNs, who were US residents enrolled in full parts A & B Medicare were eligible for matching. Canadians, patients with invalid or missing SSNs, and patients not enrolled in fee-for-service Medicare during the year of surgery were excluded.

2. How is VQI data from my center matched to Medicare claims?
   a. We worked with the VQI and Medicare data vendors to create an SSN to BeneID crosswalk, which allowed us to match VQI patients with their Medicare claims. We then used a list of CPT, ICD9 and ICD10 codes to identify relevant procedures in Medicare claims. Finally, we used the procedure date from the VQI to identify the same procedure in Medicare (procedures that occurred between VQI admission and discharge dates in Medicare claims were identified as a “match”). These methods are described in detail in Hoel et al, 2017.¹

3. What years are included in the matched dataset?
   a. The current VQI-Medicare matched dataset contains all cases from the VQI between January 1, 2003 and December 21, 2016. Data for 2017 and after is not included in the matched data.

4. What was the match rate?
   a. A total of 30,495 cases were eligible for matching. Of these, 21,933 (72%) were matched to Medicare claims using direct identifiers (SSN to Bene-ID crosswalk). An additional 5,496 were matched using indirect identifiers (a combination of CenterID, state, DoB, sex, procedure date, and 3-digit zipcode), for a total match rate of 89.9%. We excluded patients matched to multiple Medicare beneficiaries and restricted analyses to 23,255 cases with a strict match on procedure date for the index procedure (76%).

5. Why is there no data for my center?
   a. There are two possible reasons why some or all data may be missing for your center: 1) we were unable to match patients for whom the VQI has missing or invalid identifiers, Canadians, and those who are enrolled in Medicare Advantage; 2) CMS will not allow us to share this data for your center because there were fewer than 11 events in the matched dataset, thus this data was subjected to CMS’s suppression policy.

6. Can you share the list of codes that were used to identify outcomes in Medicare?
   a. Our CPT, ICD-9 and ICD-10 coding algorithms are publicly available on the VQI website.

7. How is reintervention defined?
   a. Reintervention is defined as any open or endovascular procedure performed after the index operation which is related to the durability of the endovascular repair. These reinterventions are defined in Columbo et al, 2019.²
8. How is a surveillance failure defined?
   a. A surveillance failure is defined as any fifteen-month period following an EVAR procedure in which abdominal imaging was not obtained, as described in Wanken et al, 2019.iii

9. How is overall survival defined?
   a. Overall survival is defined as the time from the date of the index procedure to date of death in Medicare.

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