**Upper Midwest Vascular Network**  
April 22\(^{nd}\), 2016 3-5pm  
JW Marriott-Mall of America  
Minneapolis, MN

**Meeting Minutes:**

Attended: Steven Kappes, Medical Director

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<th>Name</th>
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<tr>
<td>Barbara Chacko</td>
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<td>Mary Kandels</td>
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<td>Tracey Arndt</td>
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<td>Wendy Galonski</td>
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<td>Diane Penzkowski</td>
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<td>Mia Stone</td>
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<td>Steve Kappes</td>
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<td>Karissa Rothkopf</td>
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<td>Awis Siddique*</td>
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<td>Lori McDonald*</td>
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<td>Cindy Prout</td>
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<td>Jan Beitzinger</td>
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<td>Randy Demartino</td>
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<td>Mary Wanzek*</td>
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<td>Rhonda Iverson *</td>
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<td>Maggie Heath</td>
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<td>Jennifer Meadows</td>
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<td>Cheong Jun Lee</td>
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<td>Gary Seabrook</td>
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<td>Sarah Stage*</td>
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<td>Carly Elliott*</td>
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<td>Rapid City Regional Hospital</td>
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<td>Patrick Kelly</td>
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<td>Brian Thornson</td>
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<td>Carrie Bosela</td>
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*denotes remote attendance
Welcome and Introduction: Dr. Steven Kappes, Medical Director

I. Information Exchange:
   – National VQI Update
   – Regional Data Review
   – M2S: Development Update
   – Quality Improvement Project Discussion

II. Committee Updates
   – AQC Update - Dr. C.J. Lee - Medical College of Wisconsin
   – VQC Update - Carrie Bosela SVS PSO
   – RAC Update - Carrie Bosela SVS PSO
   – Governing Council Committee Update

III. New Business:
   – Aurora Ace Accreditation
   – Elections
   – Regional Dues
   – Epic Update Dr. Kappes, Karissa Rothkopf, IT Business System Consultant

IV. Regional Projects Goals for 2016

V. Next Meeting - Alternating Schedule

National VQI Update (see slides): Carrie Bosela

First Annual VQ Meeting: June 8, 2016 National Harbor, MD (SVS annual meeting)
   – 8:00am to 12:00 pm Data Managers Session
     • Anatomy
     • PVI case abstraction
     • Producing and Interpreting Reports
   – 12:00pm to 4:30pm All VQI Participants
     • Key Note Speaker: QI process
     • VQI QI success stories
     • VQI Toolkit to assist with local QI efforts
     • Sustaining QI

Discussed how there are currently 376 centers now enrolled in VQI in 46 different states. Over 270,000 procedures entered as of the first of October.

2016 SVS PSO Recognition Award with points rewarded for: 1) physician and ancillary staff attendance at regional meetings; 2) long-term F/U percentage and 3) number of procedure groups the site participates in
- Centers with LTFU less than 50% will receive mentoring from a peer advisor and a LTFU toolkit from the PSO to assist them in improving their LTFU rates.

Vascular Medicine Registry to be released by the end of 2016. Focus on Medical Management of Carotid, Aortic and Lower Extremity vascular disease.

EVAR Cost Project with MedAssets: 18 VQI sites participating in Pilot
- Understanding the economics of vascular procedures is critically important
- Combined hospital cost data (MedAssets) with detailed clinical data (VQI) to accurately benchmark similar procedures

**Meaningful Use:**
VQI meets objective 10, measure 3: use of a specialized registry for meaningful use per CMS only if members subscribe and use “DATA IMPORT” feature of VQI. Contact Pathwayssupport@m2s.com for more information about data import.

**MACRA**
- MIPS and APMs are two payment alternatives that encourage value based rather than volume based reimbursement.
- Physicians who receive payment from Medicare are required to participate in MIPS or APMs.
- Specifications and requirements are still being finalized by CMS.

**MIPS**
- MIPS begins with payment adjustments in 2019 based on quality data reported in 2017. MIPS adjustments, either positive or negative will start at 4% up to 9% in 2022. MIPS scores will be based on 4 domains; quality of care, resource use, meaningful use of EHRs and participation in clinical practice improvement activities – these are still being finalized by CMS.

**APM**
- For APMs, beginning in 2019, physicians who successfully participate in an APM can receive incentive payments of 5% per year. It requires some financial risk for the provider and requirements can be met if a provider is in a patient centered medical home or ACO. Providers must meet increasing thresholds annually for percentage of revenue received through APMS.
- SVS is developing a disease specific APM for vascular surgeons in collaboration with ACS and researchers from Brandeis University who developed the original episode payment program for CMS.
Pathways development Update

- Health System reporting platform

2016 Q1 Projects

- Develop new PVI registry
  - New procedure and follow up forms
- Add IDE devices on EVAR and TEVAR registries
- TEVAR dissection Post market Surveillance
- Lombard Aorfix Post market Surveillance
- Crest 2 Registry Project

Medstreaming/M2S
Med streaming announced acquisitions of registry software vendor M2S. Together they will create efficiency, facilitate data collection for the VQI, and expand the VQI data analytics platform. All M2S employees are being retained in their current roles.

Regional Data Review (see slides): Dr. Steven Kappes, MD

I. Long Term follow up 91% for region
   - Dr. Kelly asked the group if anyone else has had difficulty with getting Medicare reimbursement for ABI.

II. Discharge Antiplatelet and Statin possible QI project; region currently at 78%
    Southern California created letters for their patients and primary care provider. Link below to edit and make personal to your site: http://www.vascularqualityinitiative.org/components-of-the-vqi/regional-quality-groups/current-regional-quality-groups/southern-california-voice/sc-voice-quality-initiatives/hospital-setting/

    Randy DeMartino, MD created poster that concluded medical management is associated with improved survival after a number of vascular procedures.

III. Top performing center for CEA LOS: Sanford Health
    - Dr. Kelly stated that every patient gets a dose of steroids prior to carotid endarterectomy. Agreed to prepare a presentation for the next regional meeting.
IV. Ace Accreditation
   – Mia Stone presented to the group that Aurora St. Luke’s Medical Center was first center to add PVI to ACE accreditations for Peripheral coronary Intervention and Cardiac Catheterization using VQI data.

V. Statistical Audits
   – Audits are sent to sites with high risk and low to zero outcomes. Goal is to validate data that might be under-reported, such as complications.

Arterial Quality Committee Update: C.J. Lee

Venous Quality Committee Update: Carrie Bosela

Research Advisory Committee (RAC) Update: Carrie Bosela

National Proposals New Portal for Submission:

http://abstracts123.com/svs1/

Epic Update: Dr. Kappes, Karissa Rothkopf

- Dr. Michael Stoner and Lisa Spellman at University of Rochester
- Working with Epic to build CEA form that can be transferred via JSON file to M2S
- Work should be done and ready for testing end of April 2016
- “How to” documentation will be shared with all VQI EPIC users
- Karissa Rothkopf
  – Aurora Health Care has been working on a way to capture graft measurements for all patients that receive grafts for endovascular abdominal aortic aneurysm repairs. Discrete data capture to support application functionality requirements in cath labs, interventional radiology and surgery. Physicians should be able to pull captured information and graft details into the Brief Op Note minimizing or eliminating duplicate data entry.

Next Meeting: Standard Calendar to meet every spring and fall. This will be added to the Minnesota Vascular Annual meeting as it has the previous two years. The fall meetings will alternate webinars and in person meeting in Chicago.

2016 Fall Meeting will be a fall webinar. A list of potential meeting dates to be sent with post meeting survey.