Agenda

• Welcome and Introductions
• STS Updates and Important Dates
• Capturing Medicare Insurance
• Chronic Lung Disease Coding
• Aorta Devices
• IQVIA Update
• Q&A – Please submit using the Q&A function
• **Public Reporting**
  • Next public reporting consent deadline is December 1
    • First quarter 2021
    • Will include 2020 Harvest 1 data (cases through December 31, 2019)
    • All 5 ACSD composite measures will be included
      • Iso CABG, Iso AVR, AVR+CABG, Iso MVRR, and MVRR+CABG
  • STS will send notification to sites in the coming weeks
  • Contact Sydney Clinton with questions – Sclinton@sts.org

• **Harvest Updates**
  • Harvest 1 2020 results updated last weekend
  • Harvest 3 2020 is in analysis
  • Harvest 4 2020 set to close on November 20
    • STS is discussing a possible extension
    • More information will be sent to sites next week

• **AQO Wrap Up**
  • All AQO Sessions will be available for an entire year
  • CE Credit must be claimed by December 31, 2020
  • Access to AQO will be available for purchase in late November via the STS Learning Center for those who did not attend
Important Dates for Adult Cardiac

- 4 Nov (Today): ACSD Monthly Webinar
- 19 Nov: Harvest 4 Closes Possible Extension
- 20 Nov: ACSD User Group Call @ 2pmCT
- 1 Dec: Public Reporting Consent Deadline
- 2 Dec: Last day to claim CEs for AQO
- 16 Dec: ACSD Monthly Webinar @ 2pmCT
- 31 Dec: Last day to claim CEs for AQO
Capturing Medicare Insurance

• Medicare
  • Plan A – Hospital Insurance
    • Inpatient Hospital Stays
    • SNF
    • Hospice
    • Some Home Health Care
  • Plan B – Medical Insurance (Fee For Service)
    • Doctor Services
    • Outpatient Care
    • Medical Supplies
    • Preventive Services
  • Plan C – Medicare Advantage
    • Commercial Alternative to Medicare Plans A & B
    • Patient forgoes Plan A and B and pays a Commercial Insurance provider for coverage
  • Plan D – Prescription Drug Coverage
  • Plan E – Medigap or Supplemental Insurance
    • Discontinue to new enrollees in 2010
    • In addition to Traditional Medicare
  • Plan F, G, N – Medigap or Supplemental Insurance
    • In addition to Traditional Medicare
Capturing Medicare Insurance

• Plan C – Medicare Advantage
  • Commercial Alternative to Medicare Plan A & B
  • Patient forgoes Plans A and B and pays a Commercial Insurance provider for coverage
  • If this is primary, then code
    • Commercially Manager Medicare Plan “Yes” and
    • Primary Payor Medicare Part B “No”

• Supplemental Plans
  • Plan E – Medigap or Supplemental Commercial Insurance
    • Discontinue to new enrollees in 2010
    • In addition to Traditional Medicare A & B
  • Plans F, G, N – Medigap or Supplemental Commercial Insurance
    • All in addition to Traditional Medicare A & B
  • For those with Primary Medicare then code
    • Commercially Managed Medicare as “No”
    • Primary Payor Medicare Part B as “Yes”
    • Code Secondary as either Commercial Health Insurance or HMO – which ever is appropriate

• Patients who are still working or in special situations may have a commercial or HMO insurance as primary, which is not a Medicare advantage plan, and may also have Medicare, which would be coded as a secondary
  • You need to look to make sure the commercial or HMO insurance is not a Medicare advantage plan
### Medicare Primary with Commercial Supplement

<table>
<thead>
<tr>
<th>Hospitalization</th>
<th>Hospital ZIP Code:</th>
<th>Hospital Region:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Name:</td>
<td>Hospital CMSCert:</td>
<td>HospStat:</td>
</tr>
<tr>
<td>HospNPI: (220)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Payor:</td>
<td>PayorPrim: (291)</td>
<td></td>
</tr>
<tr>
<td><strong>(Choose one)</strong></td>
<td>(If Not Missing --)</td>
<td></td>
</tr>
<tr>
<td>PayorSecond:</td>
<td>(298)</td>
<td></td>
</tr>
<tr>
<td>None/Self</td>
<td>Medicare (includes commercially managed options)</td>
<td>Medicare (includes commercially managed options)</td>
</tr>
<tr>
<td>Medicare (enables managed options)</td>
<td>Medicare (enables managed options)</td>
<td>Medicare (enables managed options)</td>
</tr>
<tr>
<td>(Yes)</td>
<td>Yes (If No)</td>
<td>Medicare (enables managed options)</td>
</tr>
<tr>
<td>Yes (If No)</td>
<td>No (If No)</td>
<td>Medicare (enables managed options)</td>
</tr>
<tr>
<td>Primary Payor Medicare Part B: (Yes)</td>
<td>Medicare (enables managed options)</td>
<td>Medicare (enables managed options)</td>
</tr>
<tr>
<td>Yes (If No)</td>
<td>No (If No)</td>
<td>Medicare (enables managed options)</td>
</tr>
<tr>
<td>Medicaid (enables managed options)</td>
<td>(Yes)</td>
<td>(If No)</td>
</tr>
<tr>
<td>Commercial Health Insurance</td>
<td>Yes (If No)</td>
<td>(If No)</td>
</tr>
<tr>
<td>Health Maintenance Organization</td>
<td>(Yes)</td>
<td>(If No)</td>
</tr>
</tbody>
</table>

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**AARP Medicare Supplement Plan F**

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Medicare Advantage
Commercially Managed Medicare Plan
Chronic Lung Disease

• You may use DLCO or DLCO/VA to determine CLD
• Code the worse identified level of severity
  • DLCO/DLCO V/A
  • FEV1
  • ABG
• Starting with November 1 cases
  • Refer to the Training Manual – will be posted by early next week
Aorta Devices

- Starting with November 1 cases, please enter in the Model Number.
- This captures the size of the device.
- Too many devices and too many sizes of a device to enter using harvest codes or size fields.
- This is a free-text field.

Composite Grafts
- Enter under `AVAVCompGraftImplAo`.
- Will open `ADEVLoc01`.
- If no other devices were inserted, then leave `ADEVLoc01` blank.

<table>
<thead>
<tr>
<th>Devices</th>
<th>Aorta Valve or Aortic Valve Composite Graft Implanted: Yes □ No □ (If Yes, list aorta proximal to distal using device key)</th>
<th>Unique Device Identifier (UDI):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inserted</td>
<td>□ Yes □ No (If Yes, list aorta proximal to distal using device key)</td>
<td>AVAVCompGraftImplAo [5443]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Implant Model Number:</th>
<th>Implant Size:</th>
</tr>
</thead>
<tbody>
<tr>
<td>AVAVCompGraftImplAo [5443]</td>
<td>AVAVCompGraftImplAo [5443]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location:</th>
<th>X. No additional devices inserted (only for locations 2 - 15)</th>
</tr>
</thead>
<tbody>
<tr>
<td>D. Zone 1 (between innominate and left carotid)</td>
<td>A. Below sinotubular junction</td>
</tr>
<tr>
<td>E. Zone 2 (between left carotid and left subclavian)</td>
<td>B. Sinotubular junction to mid ascending</td>
</tr>
<tr>
<td>F. Zone 3 (first 2 cm. distal to left subclavian)</td>
<td>C. Mid ascending to distal ascending</td>
</tr>
<tr>
<td>G. Zone 4 (end of zone 3 to mid descending aorta – 76)</td>
<td>D. Zone 1 (between innominate and left carotid)</td>
</tr>
<tr>
<td>H. Zone 5 (mid descending aorta to celiac)</td>
<td>E. Below sinotubular junction</td>
</tr>
<tr>
<td>I. Zone 6 (celiac to superior mesenteric)</td>
<td>F. Zone 3 (first 2 cm. distal to left subclavian)</td>
</tr>
<tr>
<td>J. Zone 7 (superior mesenteric to renal)</td>
<td>G. Zone 4 (end of zone 3 to mid descending aorta – 76)</td>
</tr>
<tr>
<td>K. Zone 8 (renal to infra-renal abdominal aorta)</td>
<td>H. Zone 5 (mid descending aorta to celiac)</td>
</tr>
<tr>
<td>L. Zone 9 (infra-renal abdominal aorta)</td>
<td>I. Zone 6 (celiac to superior mesenteric)</td>
</tr>
<tr>
<td>M. Zone 10 (common iliac)</td>
<td>J. Zone 7 (superior mesenteric to renal)</td>
</tr>
<tr>
<td>N. Zone 11 (external iliac)</td>
<td>K. Zone 8 (renal to infra-renal abdominal aorta)</td>
</tr>
</tbody>
</table>

| For devices other than aortic valves and aortic valve composite grafts: |
|--------------------------|------------------|
| Implant Method: | 1=Open Surgical 2=Endovascular |
| Outcome: | 1≠ Unsuccessfully implanted/deployed 2≠ Implanted/deployed and removed 3=Successfully implanted/deployed |
| Model Number: | Enter device model number |
| UDI: | Enter unique device identifier (not serial number) |

<table>
<thead>
<tr>
<th>Location (Letter)</th>
<th>Implant Method</th>
<th>Outcome</th>
<th>Model Number</th>
<th>UDI</th>
</tr>
</thead>
<tbody>
<tr>
<td>A (Innominate) [5456]</td>
<td>AneuValve1 □ AneuValve2 □ AneuValve3 □ AneuValve4 □ AneuValve5 □ AneuValve6 □ AneuValve7 □ AneuValve8 □ AneuValve9 □ AneuValve10 □</td>
<td>3=Successfully implanted/deployed</td>
<td>AneuValve1 □ AneuValve2 □ AneuValve3 □ AneuValve4 □ AneuValve5 □ AneuValve6 □ AneuValve7 □ AneuValve8 □ AneuValve9 □ AneuValve10 □</td>
<td>AneuValve1 □ AneuValve2 □ AneuValve3 □ AneuValve4 □ AneuValve5 □ AneuValve6 □ AneuValve7 □ AneuValve8 □ AneuValve9 □ AneuValve10 □</td>
</tr>
</tbody>
</table>
IQVIA Update
Joe Brower & Melanie Bent
November 2020 Release Updates

The following updates are targeted to be release the weekend of November 7

- **ACSD Participant Dashboard Report**
  - STS-2994 – IMA (Internal Mammary Artery) used displaying incorrect case count
    - Duplicate to item above - STS-2219 – Dashboard IMA Used case count
    - Duplicate to item above – STS-2068 – Dashboard IMA Used
  - STS-3581 – Dashboard Graphs is not matching for discharge/mortality
    - Duplicate to item above - STS-3387 – Dashboard report percentages showing 0%

**Missing Variable Report**

- STS-3419 – Inconsistent number returning for SSN data element, parent logic updated
- STS-3603 – MVR indicates variables are missing but values are present on the form; Dialysis, Warfarin, Direct Thrombin Inhibitors
- STS-1864 - Missing Variable Report showing variables - initial extubation date/time as missing, but values are present on the form
New Enhancements
ACSD Uploader Validation Enhancements

The following updates are targeted to be release the **weekend of November 7**

Critical error validations added to the following fields if they are **missing** in the uploader file submission:

- Surgeon NPI
- Hospital NPI
- *Primary Anesthesia NPI (if site opted in for Anesthesia program)

Records will be dropped if these fields are missing.

Applicable for data versions 2.81/2.9/4.20.2
November 2020 Release Updates Con’t

The following updates are targeted to be release the weekend of November 7

ACSD Participant Dashboard Report (non-analyzed) Updates

Updates will be applied to incorporate data mapping for identified variables between the 4.20.2/2.9/2.81 versions

• Update applied to incorporate the 4.20.2 Procedure Identification updates to the procedure filtering on the dashboard.
• Update applied to report logic to exclude patients identified as “in hospital-alive” from proclD assignment using 4.20.2 variable (dischmtptacutehospstill)
• Update applied to incorporate display label changes to existing variables
• Updates include new fields on the Discharge/Mortality Report section
  • Hospital Discharge Date
    • Missing percentage added
  • Mortality Date
    • Missing percentage added
ACSD 4.20.2 Dashboard Variables

- **Race** Variable Mapping for handling 4.20.2 and previous versions

- The dashboard will display selected date range with cross over results for multiple data versions in the case drill down
ACSD 4.20.2 ProcID Filter Logic Updated

• The ACSD dashboard procedure parameter filter has been updated to align with the changes made for the 4.20.2 PROCID chart.
ACSD 4.20.2 Dashboard Updates

- Hospital Discharge Date
  - Missing percentage added
- Mortality Date
  - Missing percentage added
New Report
MIPS 2020 Performance Measures
Demo
Coming this weekend
MIPS 2020 Performance Measures

• Surgeons and delegates can now review their current MIPS 2020 measure status using the new MIPS Performance Measures interactive Dashboard.

• Surgeons who consent via the electronic consent form will have the ability to access and review their 2020 quarterly results.

• The STS will report results on the behalf of consenting surgeons for 9 identified Adult Cardiac quality measures to CMS.
  • Please reference the STS.org website for further details - https://www.sts.org/registries-research-center/sts-national-database/mips-reporting
MIPS 2020 Performance Measures Dashboard

- The MIPS 2020 Report is an interactive dashboard
- Near-real time case data available for surgeon review
- UAT was successfully completed by identified surgeons
  - Feedback –
    - “Easy to use!”
    - “Looks great!”
    - “Report is intuitive and like the drill down capability to review cases that are identified as performance not met.”
MIPS 2020 Performance Measure Report

MIPS Performance Measures Report

The Merit-based Incentive Payment System (MIPS) report will provide results for all available case data for the identified MIPS measures during the reporting time period.
IQVIA Support Plan
IQVIA's Support Plan

Inquiries received outside live support hours will require a 24-hour turnaround window (i.e., one business day) for responses.

 Tier I — IQVIA
Contact Center
Live Support: 8 am–8 pm ET,
Mon–Fri

 Tier II — IQVIA
Support Lead, Systems & Application Support
Live Support: 8 am–8 pm ET,
Mon–Fri

 STS
Live Support: 9 am–5 pm CT, Mon–Fri

 DCRI
Live Support: 9 am–5 pm ET,
Mon–Fri

Please include your Participant ID (PID) in all communications with STS and IQVIA

^ Inquiries received outside live support hours will require a 24-hour turnaround window (i.e., one business day) for responses.
Resources

- **STS National Database Webpage**
- **STSTechSupport@IQVIA.com** (Uploader, DQR, Missing Variable, Dashboard, Password and Login)
- Phone Support: 1-833-256-7187
- **STS National Database Feedback Form**
- Resource Documents
  - Contact Information
  - Webinar Information
  - FAQ Document
  - Go-Live Checklist
  - Tiered-level Support Document
  - *Training Videos*
  - *Link to IQVIA*
  - ckrohn@sts.org
Contact Information

• Carole Krohn, Sr. Clinical Manager, STS National Database
  • CKrohn@sts.org
  • 312-202-5847

• Database Operational Questions
  • STSDB@sts.org
Open Discussion

Please use the Q&A Function.

We will answer as many questions as possible.

We encourage your feedback and want to hear from you!