

Department of Health Care Access and Information (HCAI)

Informational Webinar Part 1: Transcatheter Aortic Valve Replacement (TAVR) Outcomes Reporting February 17, 2022

Questions and Answers Section

- 1. What is the difference between the STS/ACC TVT Registry reporting and the proposed reporting for California?**

HCAI will obtain California TAVR data directly from the STS/ACC TVT Registry*. Hospitals will not be required to submit TAVR data directly to HCAI. The TVT Registry publishes reports on a national level and HCAI will publish reports on a state level for California TAVRs.

*The STS/ACC TVT Registry (TVT Registry) is a collaboration between the Society for Thoracic Surgeons (STS) and the American College of Cardiology (ACC). The STS is a national organization dedicated to ensuring the best possible outcomes for surgeries of the heart and other surgical procedures within the chest and the ACC's mission is to transform cardiovascular care and improve heart health.

- 2. If a hospital is not currently participating in the TVT Registry, what is the additional resource requirement and abstraction / coordination burden for a hospital?**

Various hospital data contacts responded to the resource requirements and burden topic with examples from their facilities. Contact TAVR@hcai.ca.gov for more details.

- 3. Is the Centers for Medicare & Medicaid Services (CMS) requirement just for Medicare reimbursement or does this extend to other payers?**

HCAI is using the TVT Registry data because CMS requires participation for Medicare reimbursement. Participants on the call noted that some other plans require participation, Medicare Managed Care plans such as United and Anthem.

- 4. Is additional data going to be collected by HCAI in addition to the TVT Registry?**

Other than the TVT Registry data HCAI will request a hospital data contact.

5. Please provide more information about the TVT Registry Data Release Consent Form (DRCF).

- a. The DRCF is being developed by the registry
- b. Hospitals will sign and submit the DRCF to the registry, then send an executed copy to HCAI
- c. Hospitals only need to submit the DRCF once not annually
- d. The DRCF is not yet available, tentative for late 2022

6. Since HCAI will have access to all of the data in the TVT Registry, what will you report on?

HCAI will only get the TAVR data from the TVT Registry. Per statute and the Clinical Advisory Panel (CAP), HCAI will initially be publicly reporting only on TAVR (in addition to CABG). If that changes it would be based on CAP recommendations and hospitals would know well in advance.

7. When public reporting begins will it include index procedure outcomes and/or will it include follow up outcomes as well?

HCAI will get recommendations from the CAP on outcomes for public reporting. CAP meetings are public, HCAI will send the meeting dates in advance and encourages participation.

8. Is the state going to collect follow up data? The TVT Registry has a minimum and core dataset as well (verses full).

The minimum core dataset will be enough for HCAI to initially develop risk-adjustment models. More research will be done to determine if additional data elements are necessary. HCAI will get the complete TVT data submission.

9. If a hospital consents to participate but then later does not want to participate can a hospital opt out?

No, regulations will require hospitals that perform TAVR to participate in the TVT Registry and to complete, sign and submit the DRCF that directs the registry to transfer their data to HCAI. Hospitals that do not participate in the registry will be listed as non-compliant in HCAI's public report. If a hospital discontinues performing TAVR procedures, they should notify the TVT Registry and HCAI.

10. The TVT Registry also gets mitraclip information. Will HCAI also receive this information?

No, HCAI will only receive the TAVR data from the TVT Registry. HCAI will only publicly report on TAVR. If the CAP recommends expanded reporting in the future, hospitals will be informed in advance.

11. Will HCAI have a completeness percent requirement for the metrics?

No, HCAI will not have this requirement.

12. Are nurses or abstractors on the CAP?

The panel includes Interventional Cardiologists, General Cardiologists, Surgeons, Health Services Researcher, and Consumer Representatives. All CAP meetings are open to the public, nurses, abstractors as well as others are encouraged to participate.

13. What is the targeted value add of another set of data outside of the already lengthy National Cardiovascular Data Registry (NCDR) reporting? Can NCDR reports be run with specific filtering by facilities in California?

Although the NCDR public reports do allow filtering by state the TVT Registry public reporting is voluntary only. These public reports and the summary reports to hospitals compare to national totals. HCAI public reporting will include all TAVR California hospitals and compare to California totals.

14. What is the format of public reporting, will it only include mortality, readmissions and/or will it include complications as well? Will it include surgeons or cardiologists in the rankings ?

Public reports will be formatted similarly to HCAI's Coronary Artery Bypass Graft and Elective Percutaneous Coronary Intervention reports. If outcomes other than mortality are included, they will be recommended by the CAP. Initial reports will be hospital level only.

Any additional questions email TAVR@hcai.ca.gov