SUPPLEMENTAL MATERIAL

Comparison of Medicare Claims vs. Physician Adjudication for Identifying Stroke Outcomes in the Women's Health Initiative

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Supplemental Methods

Ascertainment of stroke events in the WHI – Requesting Medical Records

The WHI process uses self-report via annual questionnaires completed by participants (or their proxies) who are asked if they were hospitalized overnight since their last report. If a hospitalization was reported, further details including hospital name, hospitalization dates and reasons for hospitalization were asked. Stroke or TIA diagnosis and other cardiovascular outcomes were specifically gueried for in the list of hospitalization reasons. Women reporting hospitalization for serious events such as stroke, myocardial infarction (MI) or venous thromboembolism were then asked to provide signed releases to obtain medical records. In addition, medical records were obtained for less specific reasons for hospitalizations to confirm that outcomes monitored in WHI were not missed. One exception was that no records were requested if the reported reason for hospitalization suggested low likelihood of WHI outcome, e.g. bunionectomy. All records were reviewed by disease specific panels of expert adjudicators who used agreed upon criteria and panels cross-referred to a second committee if they noticed signs of another outcome (e.g. the MI panel would refer MI cases to the stroke committee if the medical records supported a stroke diagnosis). Failure to report a hospitalization (e.g. lack of recall by participant or proxy, significant disability, death) resulted in medical records not being requested. The WHI did however incorporate additional processes to ascertain fatal strokes (e.g. matching to the National Death Index records) and when found hospital records were requested and adjudicated.

ONLINE TABLES

Table I. Person-based comparison of the performance of the different Medicare stroke definition algorithms vs. physician adjudicated WHI stroke events in the training data set. This analysis uses a 30 day match window. *

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	Total	WHI Yes	WHI No	WHI Yes	WHI No	SN	SP	PPV	NPV	Карра
		CMS Yes	CMS Yes	CMS No	CMS No					
Stroke (any diagnosis code; definition 1)										
All	24428	505	240	77	23606	86.8	99.0	67.8	99.7	0.75
WHI Hospitalization reported ¹	24309	505	125	73	23606	87.4	99.5	80.2	99.7	0.83
WHI Hospitalization adjudicated ²	24249	505	65	73	23606	87.4	99.7	88.6	99.7	0.88
Stroke (principal diagnosis; definition 2)										
All	24428	458	182	124	23664	78.7	99.2	71.6	99.5	0.74
WHI Hospitalization reported ¹	24337	458	95	120	23664	79.2	99.6	82.8	99.5	0.81
WHI Hospitalization adjudicated ²	24299	458	57	120	23664	79.2	99.8	88.9	99.5	0.83
Hemorrhagic Stroke (definition 3)										
All	24428	85	42	24	24277	78.0	99.8	66.9	99.9	0.72
WHI Hospitalization reported ¹	24409	85	23	24	24277	78.0	99.9	78.7	99.9	0.78
WHI Hospitalization adjudicated ²	24394	85	8	24	24277	78.0	>99.9	91.4	99.9	0.84
Ischemic Stroke (definition 4)										
All	24428	388	233	65	23742	85.7	99.0	62.5	99.7	0.72
WHI Hospitalization reported ¹	24323	388	132	61	23742	86.4	99.4	74.6	99.7	0.80
WHI Hospitalization adjudicated ²	24276	388	85	61	23742	86.4	99.6	82.0	99.7	0.84

Abbreviations: CMS, Centers for Medicare & Medicaid Services data, i.e., Medicare data; NPV, negative predictive value; PPV, positive predictive value; SN, Sensitivity; SP, Specificity; WHI, Women's Health Initiative data.

¹ Excludes strokes in the outpatient setting only. Also, excludes events for which no WHI hospitalization was reported by the participant or a proxy with admission date within +/-30 days of the Medicare hospitalization.

² Excludes events for which no medical records were received due to administrative reasons (e.g., no record release or no documents) or when reasons reported for hospitalization did not trigger adjudication (e.g. bunionectomy). *Analysis based on a nationwide dataset.

TABLE II. Event Level Analysis of Test Data Set. Comparison of the Performance of Different Medicare Stroke Definition Algorithms vs. Physician Adjudicated WHI Stroke Events Using a 7-day Match Window.*

	Total	WHI Yes	WHI No	WHI Yes	WHI No	SN	SP	PPV	NPV	Карра
	N	CMS Yes	CMS Yes	CMS No	CMS No					
Stroke (any diagnosis code; definition 1)										
All	32263	478	352	114	30319	80.7	98.9	57.6	99.6	0.67
WHI Hospitalization reported ¹	31050	478	148	105	30319	82.0	99.5	76.4	99.7	0.79
WHI Hospitalization adjudicated ²	30989	478	87	105	30319	82.0	99.7	84.6	99.7	0.83
Stroke (principal diagnosis; definition 2)										
All	31302	439	255	153	30455	74.2	99.2	63.3	99.5	0.68
WHI Hospitalization reported ¹	31139	439	101	144	30455	75.3	99.7	81.3	99.5	0.78
WHI Hospitalization adjudicated ²	31102	439	63	144	30455	75.3	99.8	87.5	99.5	0.81
Hemorrhagic Stroke (definition 3)										
All	31173	70	57	23	31023	75.3	99.8	55.1	99.9	0.64
WHI Hospitalization reported ¹	31143	70	27	23	31023	75.3	99.9	72.2	99.9	0.74
WHI Hospitalization adjudicated ²	31129	70	13	23	31023	75.3	>99.9	84.3	99.9	0.79
Ischemic Stroke (definition 4)										
All	31241	383	320	92	30446	80.6	99.0	54.5	99.7	0.64
WHI Hospitalization reported ¹	31058	383	146	83	30446	82.2	99.5	72.4	99.7	0.77
WHI Hospitalization adjudicated ²	31011	383	99	83	30446	82.2	99.7	79.5	99.7	0.81

Abbreviations: CMS, Centers for Medicare & Medicaid Services data, i.e., Medicare data; NPV, negative predictive value; PPV, positive predictive value; SN, Sensitivity; SP, Specificity; WHI, Women's Health Initiative data.

¹ Excludes strokes in the outpatient setting. Also, excludes events for which no WHI hospitalization was reported by the participant or a proxy with admission date within +/-7 days of the Medicare hospitalization.

² Excludes events for which no medical records were received due to administrative reasons (e.g., no record release or no documents) or when reasons reported for hospitalization did not trigger adjudication (e.g. bunionectomy).

*Analysis based on a nationwide dataset.

TABLE III. Person Level Analysis of Test Data Set. Comparison of the Performance of Different Medicare Stroke Definition Algorithms vs. Physician Adjudicated WHI Stroke Events Using a 7-day Match Window. *

	Total	WHI Yes	WHI No	WHI Yes	WHI No	SN	SP	PPV	NPV	Карра
	Ν	CMS Yes	CMS Yes	CMS No	CMS No					
Stroke (any diagnosis code; definition 1)										
All	24422	513	277	79	23553	86.7	98.8	64.9	99.7	0.74
WHI Hospitalization reported ¹	24261	513	125	70	23553	88.0	99.5	80.4	99.7	0.84
WHI Hospitalization adjudicated ²	24209	513	73	70	23553	88.0	99.7	87.5	99.7	0.87
Stroke (principal diagnosis; definition 2)										
All	24422	472	205	120	23625	79.7	99.1	69.7	99.5	0.74
WHI Hospitalization reported ¹	24295	472	87	111	23625	81.0	99.6	84.4	99.5	0.82
WHI Hospitalization adjudicated ²	24263	472	55	111	23625	81.0	99.8	89.6	99.5	0.85
Hemorrhagic Stroke (definition 3)										
All	24422	75	48	18	24281	80.6	99.8	61.0	99.9	0.69
WHI Hospitalization reported ¹	24397	75	23	18	24281	80.6	99.9	76.5	99.9	0.78
WHI Hospitalization adjudicated ²	24385	75	11	18	24281	80.6	>99.9	87.2	99.9	0.84
Ischemic Stroke (definition 4)										
All	24422	412	256	63	23691	86.7	98.9	61.7	99.7	0.71
WHI Hospitalization reported ¹	24284	412	127	54	23691	88.4	99.5	76.4	99.8	0.82
WHI Hospitalization adjudicated ²	24243	412	86	54	23691	88.4	99.6	82.7	99.8	0.85

Abbreviations: CMS, Centers for Medicare & Medicaid Services data, i.e., Medicare data; NPV, negative predictive value; PPV, positive predictive value; SN, Sensitivity; SP, Specificity; WHI, Women's Health Initiative data.

¹ Excludes strokes in the outpatient setting. Also, excludes events for which no WHI hospitalization was reported by the participant or a proxy with admission date within +/-7 days of the Medicare hospitalization.

² Excludes events for which no medical records were received due to administrative reasons (e.g., no record release or no documents) or when reasons reported for hospitalization did not trigger adjudication (e.g. bunionectomy). *Analysis based on a nationwide dataset.

. **TABLE IV.** Person-based comparison of the performance of the different Medicare stroke definition algorithms vs. physician adjudicated WHI stroke events in the test data set. This analysis uses a 30 day match window. *

	Total	WHI Yes	WHI No	WHI Yes	WHI No	SN	SP	PPV	NPV	Карра
	Ν	CMS Yes	CMS Yes	CMS No	CMS No					
Stroke (any diagnosis code; definition 1)										
All	24422	513	277	79	23553	86.7	98.8	64.9	99.7	0.74
WHI Hospitalization reported ¹	24281	513	145	70	23553	88.0	99.4	78.0	99.7	0.82
WHI Hospitalization adjudicated ²	24213	513	77	70	23553	88.0	99.7	86.9	99.7	0.87
Stroke (principal diagnosis; definition 2)										
All	24422	472	205	120	23625	79.7	99.1	69.7	99.5	0.74
WHI Hospitalization reported ¹	24307	472	99	111	23625	81.0	99.6	82.7	99.5	0.81
WHI Hospitalization adjudicated ²	24266	472	58	111	23625	81.0	99.8	89.1	99.5	0.84
Hemorrhagic Stroke (definition 3)										
All	24422	75	48	18	24281	80.6	99.8	61.0	99.9	0.69
WHI Hospitalization reported ¹	24404	75	30	18	24281	80.6	99.9	71.4	99.9	0.76
WHI Hospitalization adjudicated ²	24385	75	11	18	24281	80.6	>99.9	87.2	99.9	0.84
Ischemic Stroke (definition 4)										
All	24422	412	256	63	23691	86.7	98.9	61.7	99.7	0.71
WHI Hospitalization reported ¹	24299	412	142	54	23691	88.4	99.4	74.4	99.8	0.80
WHI Hospitalization adjudicated ²	24247	412	90	54	23691	88.4	99.6	82.1	99.8	0.85

Abbreviations: CMS, Centers for Medicare & Medicaid Services data, i.e., Medicare data; NPV, negative predictive value; PPV, positive predictive value; SN, Sensitivity; SP, Specificity; WHI, Women's Health Initiative data.

¹ Excludes strokes in the outpatient setting only. Also, excludes events for which no WHI hospitalization was reported by the participant or a proxy with admission date within +/-30 days of the Medicare hospitalization.

² Excludes events for which no medical records were received due to administrative reasons (e.g., no record release or no documents) or when reasons reported for hospitalization did not trigger adjudication (e.g. bunionectomy). *Analysis based on a nationwide dataset.

latrogenic Stroke

We explored the issue of iatrogenic or procedure related stroke. The WHI data has an additional variable which allows the abstraction of information indicating whether a stroke was procedure related or not. A WHI stroke is defined as procedure-related if it occurs within 24 hours after any procedure or within 30 days after a cardioversion or invasive cardiovascular procedure. We explored the concordance between WHI procedure related stroke and Medicare Claims use of codes for iatrogenic stroke: 997.02, "latrogenic Cerebrovascular Infarction of Hemorrhage", 998.11, "Hemorrhage Complicating a Procedure" and 998.9, Unspecified Complication of Procedure Nor Elsewhere Classified. In the person-based analysis, by definition 1 (Table 2, row 1, Definition 1) there were 30 procedure related strokes identified by the WHI. Of these,

- a) WHI Yes / CMS Yes = 22; Of these, we saw that 8 had one of the procedure related codes above in addition to the regular CMS definition 1 stroke codes within a week of WHI hospitalization; 14 did not have a CMS Procedure code within a week of stroke event despite being identified as a CMS stroke and a WHI procedure related stroke.
- WHI Yes / CMS No = 8; Of these, 5 had a CMS procedure related code within a week of WHI hospitalization.

The use of CMS procedure codes above would have increased our Sensitivity slightly by moving 5 cases from the WHI Yes/CMS No to the WHI Yes/CMS Yes cell; however, there is substantial under-reporting of the relationship of procedure to strokes. 22 of procedure related strokes in the WHI had a CMS stroke code but only 8 (36%) could have been identified as a having had a procedure related stroke in CMS. So there is under-coding of this procedural relationship in the CMS.