

## **Supplemental Material**

### **Supplemental Table 1: Natural Language Processing Program Search Terms**

Biventricular Failure  
Biventricular Heart Failure  
Cardiac Failure  
CHF  
Congestive Failure  
Congestive Heart Failure  
Heart Failure

**Supplemental Table 2: SHFM Components and Quantification of Missing Variables**

<b>SHFM Component</b>	<b>If missing, n (%)</b>
Age	
Angiotensin Converting Enzyme Inhibitor (yes)	
Angiotensin Receptor Blocker (yes)	
Beta-Blocker (yes)	
Carvedilol (yes)	
Digoxin (yes)	
Creatinine	1 (0.2)
Daily Diuretic Dose	
Ejection Fraction	
Gender	
Implantable Cardioverter Defibrillator (yes)	
Ischemic Cardiomyopathy	
New York Heart Association Class	12 (3)
Serum Sodium	4 (1)
Statin	
Systolic Blood Pressure	

**Supplemental Figure 1:**

Mortality sensitivity analysis within derivation cohort. Calibration histograms shown: 1-year observed mortality (black bar) and SHFM-predicted mortality Risk (grey bar). Patients are stratified within the pre-specified categories of “clinically relevant” 1-year risk [low ( $\leq 2.5\%$ ), intermediate (2.6-10%), and high risk ( $>10\%$ )] according to SHFM -predicted probabilities and subsequently according to BNP levels above ( $\uparrow$ ) or below ( $\downarrow$ ) the optimal partition-value (700 pg/ml) based on ROC-analysis.

