

Supplementary Online Content

Albertini JG, Wang P, Fahim C, et al. Evaluation of a peer-to-peer data transparency intervention for Mohs micrographic surgery overuse. *JAMA Dermatol*. Published online May 5, 2019. doi:10.1001/jamadermatol.2019.1259

eAppendix. Sample report

This supplementary material has been provided by the authors to give readers additional information about their work.

To: [REDACTED]
From: ACMS *Improving Wisely* Physician Engagement Council
June 8, 2018

Dear Dr. [REDACTED]

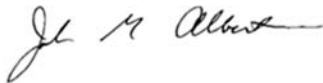
In February 2017, you received a mailing with your 2014 practice pattern for your average number of Mohs stages per case. As part of the continued quality collaborative partnership with the Robert Wood Johnson Foundation and Johns Hopkins University School of Medicine, the American College of Mohs Surgery (ACMS) is providing you with your updated individual data reports using quality metrics endorsed by the ACMS. As a part of the project, called *Improving Wisely*, an ongoing annual analysis will be performed.

The metrics being evaluated relate to average number of Mohs layers per case as calculated from the publicly released 2017 Medicare Provider Utilization and Payment Data.

The original metric developed by the ACMS for this collaborative is stages per case of Mohs micrographic surgery for treatment of head and neck skin cancers (17311). The ACMS leadership identified this measure because of the wide variation in clinical practice and the potential opportunity it provides for education that could enhance the quality, safety and/or value of skin cancer care by Mohs surgeons. The second quality metric applies the same stages per case benchmark methodology to Mohs surgery for trunk and extremity tumors (17313). The third quality metric informing a Data Report is the percentage of all Mohs surgery cases that were trunk and extremity cases. Our organization is committed to keeping this data report strictly confidential so that it can be used for self-improvement. In the context of sharing data for quality improvement, these results are not legally discoverable and have no implications for board certification, membership, or any other credentialing.

The Physician Engagement Council offers mentorship and education to you in the spirit of peer-based collaboration and quality improvement. If your results are significantly above or below the mean (>2 standard deviations), we invite you to contact us at ImprovingWisely@mohscollege.org about these resources.

Sincerely,



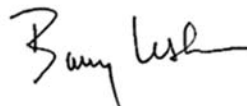
John G. Albertini, MD, FACMS
Chair, Physician Engagement Council



Thomas Stasko, MD, FACMS
Past-President



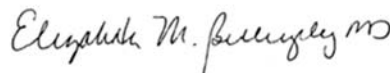
Allison T. Vidimos, MD, RPh, FACMS
Past-President



Barry Leshin, MD, FACMS
President



Richard Bennett, MD, FACMS
Member, Physician Engagement Council



Elizabeth Billingsley, MD, FACMS
Vice-President



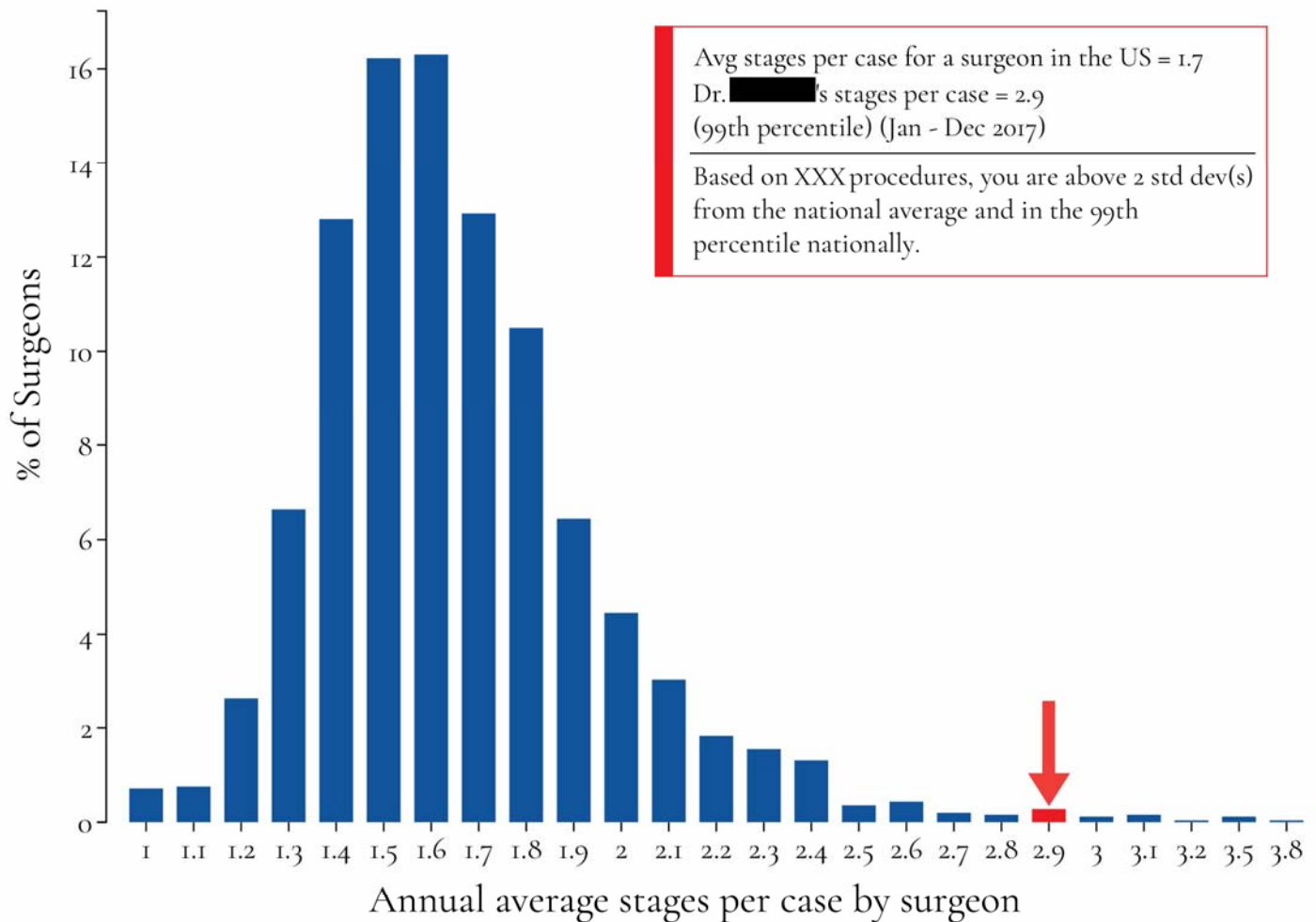
Brett Coldiron, MD, FACMS
Member, Physician Engagement Council



Victor Marks, MD, FACMS
Member, Physician Engagement Council

Improving Wisely Quality Collaborative

Benchmarking Performance Among Peers Using an ACMS-Endorsed Metric



How your performance was calculated

The American College of Mohs Surgery collaborated with the Improving Wisely project to develop and report data around one unique quality metric which allows for peer-comparison, and which we believe represents high quality, high value care. Your performance was calculated using 100% Medicare Part B claims (Jan - Dec 2017) and compared to that of 2515 other surgeons billing for Mohs surgery to Medicare. The metric reported is stages per case for head and neck Mohs surgery, and it was calculated using CPT Codes 17311 and 17312. Stages per case = $(17311+17312)/17311$. The analysis includes surgeons who performed more than 10 procedures Jan - Dec 2017.

