Supplementary Online Content

Smith VA, Arterburn DE, Berkowitz TSZ, et al. Association between bariatric surgery and long-term health care expenditures among veterans with severe obesity. *JAMA Surg*. Published October 30, 2019. doi:10.1001/jamasurg.2019.3732

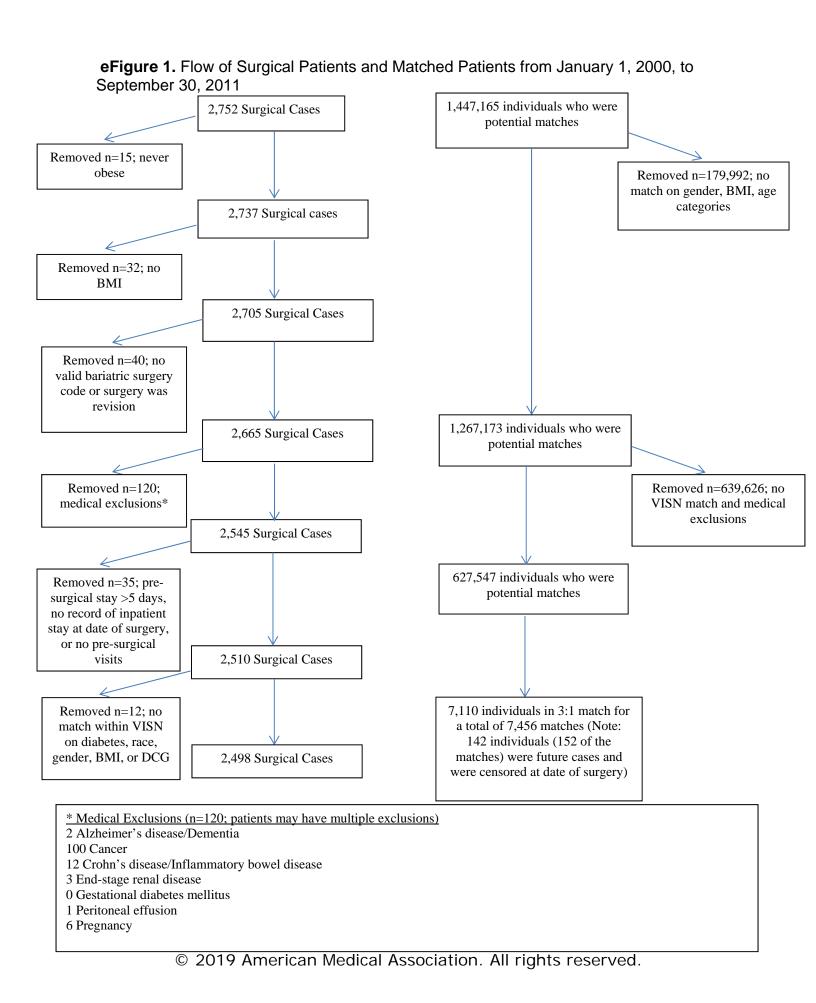
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This supplementary material has been provided by the authors to give readers additional information about their work.

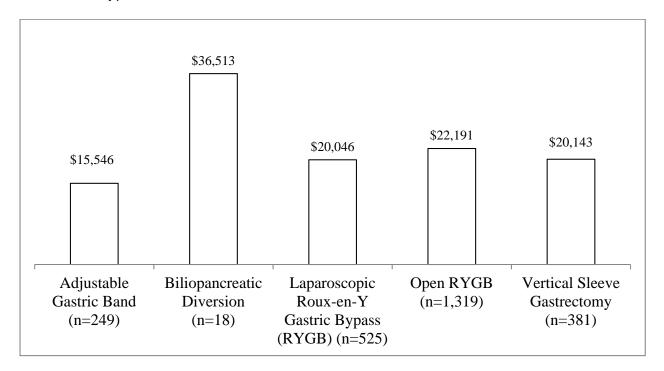
eTable. Number of Patients Remaining in 4 Cost Analyses

Half Year	Surgical Cases	Non-Surgical Matches
-6	2155	6433
-5	2256	6735
-4	2329	6953
-3	2391	7137
-2	2447	7303
-1	2498	7456
1	2470	7449
2	2446	7357
3	2435	7270
4	2421	7199
5	2406	7118
6	2402	7026
7	2391	6924
8	2374	6843
9	2360	6739
10	2342	6650
11	2333	6549
12	2192	6108
13	2040	5615
14	1870	5089
15	1736	4703
16	1618	4354
17	1534	4089
18	1415	3743
19	1289	3410
20	1190	3099

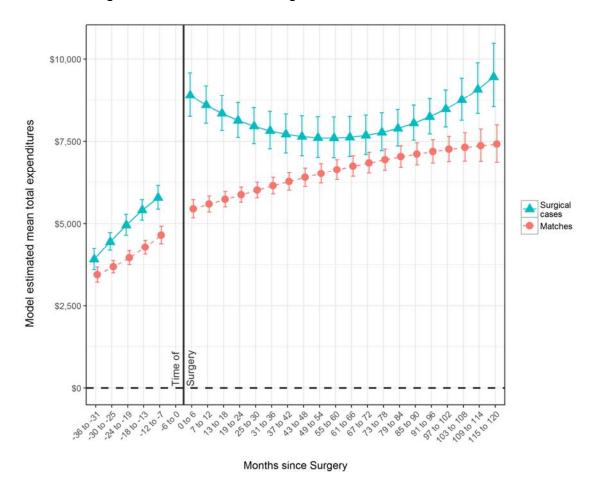
Note: Reasons for not contributing data in a given time period included: 1) surgery early enough in the study period to preclude obtaining data up to 3 years prior, 2) surgery late enough in the study period to preclude obtaining data up to 10 years following, 3) death, and 4) for matches, undergoing bariatric surgery.



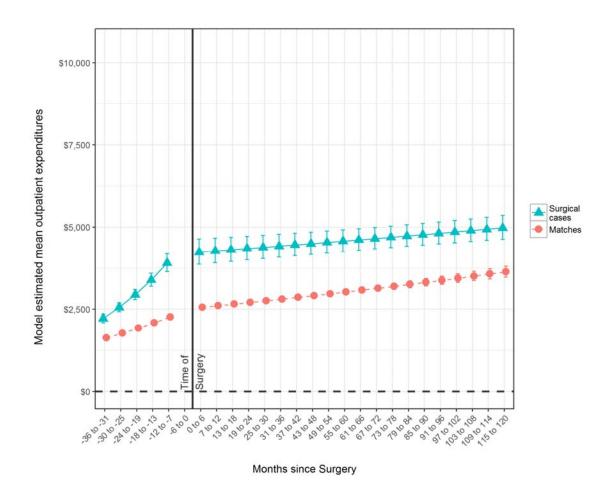
eFigure 2. Unadjusted Median VA Inpatient Expenditures for Bariatric Surgery, By Procedure Type



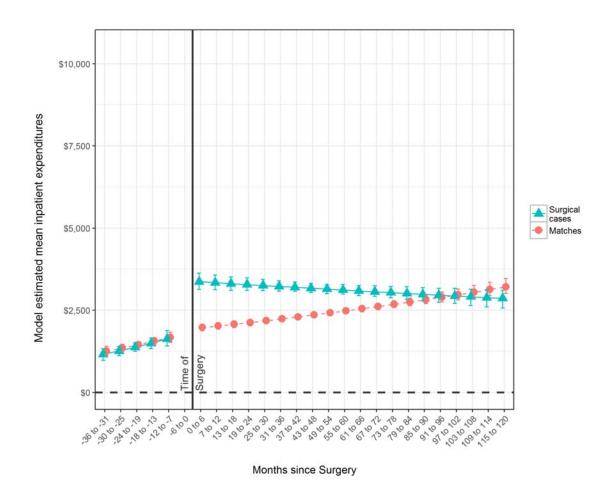
eFigure 3. Model-Estimated Trends Without Covariate Adjustment in Estimated Total Expenditures for Surgical Patients and Nonsurgical Matches



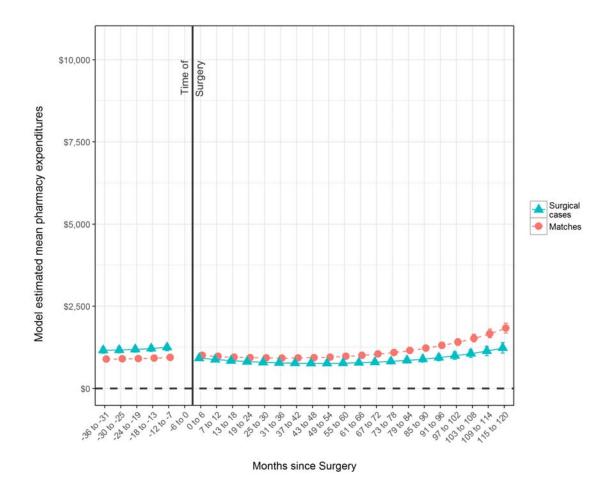
eFigure 4. Model-Estimated Trends Without Covariate Adjustment in Estimated Outpatient Expenditures for Surgical Patients and Nonsurgical Matches



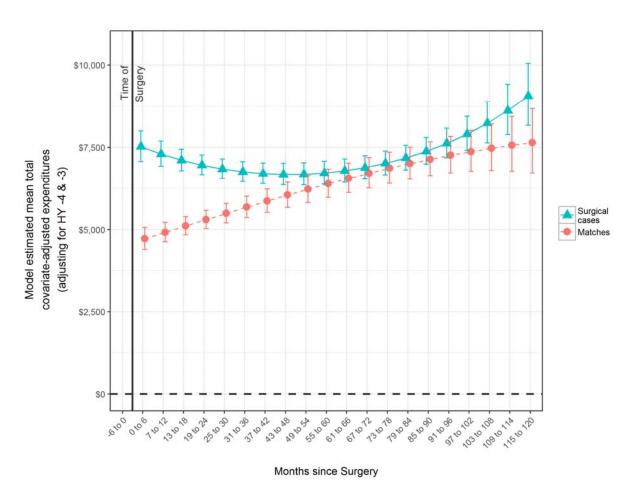
eFigure 5. Model-Estimated Trends Without Covariate Adjustment in Estimated Inpatient Expenditures for Surgical Patients and Nonsurgical Matches



eFigure 6. Model-Estimated Trends Without Covariate Adjustment in Estimated Outpatient Pharmacy Expenditures for Surgical Patients and Nonsurgical Matches

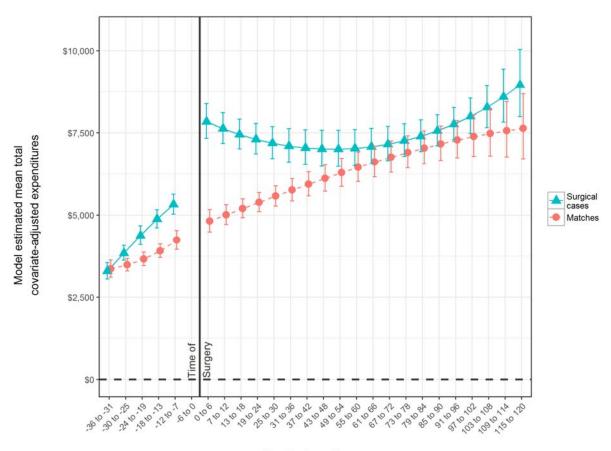


eFigure 7. Model-Estimated Trends in Estimated Postsurgical Total Expenditures for Surgical Patients and Nonsurgical Matches From a Model That Adjusts for Outpatient Expenditures 13-24 Months Prior to Surgery



The model adjusted for the following baseline covariates: Age, BMI, DCG score, marital status, copayment status, and prevalence of 12 comorbidities (hypertension, dyslipidemia, arthritis, depression, coronary artery disease, gastroesophageal reflux disease, asthma, fatty liver disease, post-traumatic stress disorder, alcohol abuse, substance abuse, and schizophrenia) at baseline as well as total expenditures in the -13 to -18 and -19 to -24 months prior to surgery.

eFigure 8. Model-Estimated Trends in Estimated Total Expenditures for Surgical Patients and the Single Nonsurgical Match With the Closest Outpatient Expenditures 13-24 Months Prior to Surgery



Months since Surgery

Note: The non-surgical match was chosen from the 3:1 matched risk sets for each surgical patient because he/she had outpatient expenditures 13-18 and 19-24 months prior to surgery that were closest to the outpatient expenditures of the matched surgical patient. The model adjusted for the following baseline covariates: Age, BMI, DCG score, marital status, copayment status, and prevalence of 12 comorbidities (hypertension, dyslipidemia, arthritis, depression, coronary artery disease, gastroesophageal reflux disease, asthma, fatty liver disease, post-traumatic stress disorder, alcohol abuse, substance abuse, and schizophrenia) at baseline.