



2022 Value-Based Reimbursement (VBR)



MI TAVR (MiSHC)

Collaborative-wide average must be achieved in two of the three measures for practitioners to be eligible for VBR. Practitioners are grouped by their affiliated hospital based on where the greatest number of procedures are performed.

	Measure Description	Measurement Period	Baseline State Mean	Target Performance
1	Increase rate of KCCQ* documentation at baseline and 30 day follow up	Oct 1, 2021 – June 30, 2022	81.1%	≥90%
2	Increase rate of NYHA^ Heart Class documentation at 30 day follow up	Oct 1, 2021 – June 30, 2022	81.1%	≥92%
3	Number of cases with contrast dose ≥3 CrCl+ (exclude TAVR procedures with a concurrent cardiac procedure)	Oct 1, 2021 – June 30, 2022	5.4%	≤5%

Extra 2% available for physicians eligible for both cardiac and TAVR VBR - Paid in 2023