

Policies to be included in PSO contracts with sites

1. Shared Registry Data Ownership

Each practice entity (hospital, physician group, or physician) owns the data that it submits to the SVS PSO, and is entitled to specify and control the use of its data in the manner set forth in the contract. Any use of a practice entity's data by the SVS PSO for purposes other than quality improvement or any of the standard quality assurance functions performed by the SVS PSO shall require the prior consent of the practice entity, in the manner set forth in the contract.

2. Policies

The following principles guide the function of the SVS PSO and must be adhered to by all participants.

- a. All activities of the SVS PSO must be consistent with the purpose of the PSO, as stated in its governing documents.
- b. Each physician member must submit data for all consecutive procedures in the modules in which they participate that are recorded by the SVS PSO and must agree to submit office claims data on a periodic basis to allow an audit to ensure accurate and complete data entry.
- c. Each member hospital agrees to submit ICD-9 based claims data on a periodic basis to allow an audit to ensure accurate and complete data entry.
- d. Each member hospital and physician must submit complete data forms, including all elements of the SVS PSO registry for all eligible procedures, using a web-based system approved by the SVS PSO, including follow-up data at one year, or other time points established by the SVS PSO.
- e. Each member hospital and physician agrees that Patient Safety Work Product including any comparative data can never be disclosed or used for competitive marketing. Hospitals and physicians own their own data, and can download and publish such data and indicate that it was derived from their participation in the SVS PSO. However, they may not publish Patient Safety Work Product provided in benchmarking reports that compares their hospital or practice with other groups in the SVS PSO.
- f. Each SVS PSO hospital and physician member agrees to follow all regulations contained within the Hospital Insurance Portability and Accountability Act (HIPAA) and the Patient Safety Quality Improvement Act (PSQIA).. This includes, but is not limited to not disclosing any patient, hospital or provider identifiable information.
- g. Failure to adhere to these policies may result in loss of membership in SVS PSO for a hospital or physician, if so determined by a majority vote of the Governing Council.

3. Non-identifiable Data Release:

The SVS PSO may prepare non-identifiable datasets for quality research as set forth in the Patient Safety Quality Improvement Act. Such datasets may be prepared for regional vascular quality groups after approval by the process specified in the bylaws of the regional quality group. Requests for non-identifiable datasets from regional groups shall identify the principal investigator, the purpose of the project, and contain an agreement that restricts the use of such data to the designated project. The SVS PSO shall maintain a log of such projects. Parties who receive non-identifiable data for quality analysis from the SVS PSO agree to indicate that such data was non-identifiable in any publication or presentation.

Requests for non-identifiable datasets for quality research involving more than one regional quality group shall be reviewed and coordinated by the SVS PSO Quality Committee. Each regional group, via their representative on the

Quality Committee must approve the use of their regional data in order for it to be included in a multi-regional dataset.

Prior to releasing non-identifiable data, the SVS PSO shall obtain permission from each contracting entity as specified in their contract with the SVS PSO