**Appendix**

We used data from multiple national VHA data sources, as well as VA/CMS data and the National Death Index. We used VHA outpatient data (Medical SAS datasets) to define our cohort and inpatient data (Medical SAS datasets, non-VA inpatient, CMS inpatient) to define outcome events. Patients were eligible for inclusion based on age during CY2006 (45 – 80 years old), having at least two NEXIS (primary care, cardiology/hypertension, endocrine/diabetes, chronic infectious disease care, and mental health) outpatient visits during CY2006, and if they were alive as of January 1, 2007. Outpatient and inpatient data sources were used to identify prior history of events, comorbidities, and demographic measures (see eTable 1 for list of ICD9 diagnosis codes). We used the full array of diagnosis and procedure codes to identify comorbidities.

**eTable 1. Comorbidity Coding**

|  |  |
| --- | --- |
| **Description** | **Coding** |
| CHF | ICD9 dx: 428.xx, 398.91 |
| COPD | ICD9 dx: 490.xx, 491.xx, 496.xx |
| Atrial Fibrillation | ICD9 dx: 427.31 |
| Diabetes | ICD9 dx\*: 250.xx, 366.41, E9323, 357.2x, 962.3, 362.0x |
| Depression | ICD9 dx: 293.83, 296.2x, 296.3x, 296.9, 296.99, 298.0x, 300.4x, 301.12, 309.0x, 309.1x, 311.xx |
| Smoking | CDW Health Factors or ICD9 dx: 305.1 |
| \*Patients were coded as having diabetes if they had one inpatient or two or more outpatient visits from CY2001 – 2006 with any of the listed ICD9 dx codes. | |

We assessed smoking status by combining information from inpatient and outpatient data sources using ICD9 codes for smoking and the CDW’s Health Factors table. The Health Factors data tables contain information from the clinical reminders utilized in the VA’s Electronic Health Record (EHR). Clinical reminders are automatically displayed in the EHR to prompt providers to complete specific information on their patients. For smoking, the clinical reminder prompts providers to ask patients about tobacco use and the specific clinical reminder is recorded and uploaded into the CDW Health Factors table. We used established methods to code for “current smoker” status during CY2006 (McGinnis et al. *Nicotine and Tobacco Research* 2011). We supplemented the health factors smoking data using ICD9 codes for smoking recorded during visits or hospitalizations during CY2006.

We used prescription fills for medications listed in eTable 2 to code for hypertension medication use during the baseline year (2006). We required at least one medication fill for more than 1 day supply in order to qualify as being on a hypertension medication.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **eTable 2. Hypertension Medications** | | | | |  | | |
| **Medication Category** | | **Drug Name** | **Medication Category** | | **Drug Name** | | |
| Hypertension | |  | Hypertension | |  | | |
|  | ACE-Inhibitors | Benazepril |  | Alpha Blockers | Doxazosin | | |
| Captopril | Guanabenz | | |
| Enalapril | Guanfacine | | |
| Fosinopril | Prazosin | | |
| Lisinopril | Tamsulosin | | |
| Moexipril | Terazosin | | |
| Quinapril | Vasodilators | Hydralazine | | |
| Ramipril | Isoxsuprine | | |
| Beta-Blockers | Acebutolol | Minoxidil | | |
| Atenolol | Papaverine | | |
| Bisoprolol | Angiotensin Receptor Blockers | Candesartan | | |
| Carvedilol | Irbesartan | | |
| Labetalol | Losartan | | |
| Metoprolol | Telmisartan | | |
| Nadolol | Valsartan | | |
| Pindolol | Sympathetic Blockers | Clonidine | | |
| Propranolol | Methyldopa | | |
| Sotalol | Reserpine | | |
| Timolol | Thiazides | Bendroflumethiazide | | |
|  | Calcium-Channel Blockers | Amlodipine | Chlorothiazide | | |
| Diltiazem | Chlorthalidone | | |
| Felodipine | Indapamide | | |
| Isradipine | Methyclothiazide | | |
| Nicardipine | Metolazone | | |
| Nifedipine |  | |  |
| Verapamil |  | | |  | |
|  | K+sparing | Amiloride |
| Spironolactone |
|  |  | Triamterene |  |  |  | | |