Correction to: Estimating Longitudinal Risks and Benefits From Cardiovascular Preventive Therapies Among Medicare Patients: The Million Hearts Longitudinal ASCVD Risk Assessment Tool: A Special Report From the American Heart Association and American College of Cardiology


1. On page e793, in the abstract, the third sentence read, “The Cardiovascular Risk Reduction Model was developed...as a strategy to assess a value-based payment approach....” It has been updated to read, “The Cardiovascular Risk Reduction Model was developed...as a strategy to assess a value-based payment approach....”

2. On page e799, in the right column, the first paragraph, the third sentence read, “Using the highest quality evidence, the effects aspirin....” The word “of” has been added after “effects.” The sentence now reads, “Using the highest quality evidence, the effects of aspirin....”

3. On page e801, in the right column, the first paragraph under the heading “Step 1: Estimating the Baseline 10-Year Risk,” the fifth sentence read, “...among patients with heart failure of ischemic etiology.20” The word “etiology” has been replaced with “cause.” The sentence now reads, “...among patients with heart failure of ischemic cause.20”

4. On page e802, in Figure 2, the definition of the asterisk has been added to the figure legend. The definition reads, “*For any race other than AA or white, the 10-year risk equations for whites of the same sex are used. The resulting 10-year risk estimates may over-estimate 10-year risk somewhat for East Asian- and Latino-Americans, and under-estimate the risk for South Asian-Americans and American Indian/Alaska Natives. The calibration for individuals in the “Asian/Pacific Islander- Other” and “Other” race/ethnic groups is uncertain.”

5. On page e802, in the left column, the last paragraph, the second sentence read, “These estimates are a function of the baseline predicted 10-year risk from for the patient....” The word “from” has been deleted after “risk.” The sentence now reads, “These estimates are a function of the baseline predicted 10-year risk for the patient....”

6. On page e804, in the legend for Figure 4, “CCB” has been added to the list of abbreviations used in the table. The addition to the legend reads, “CCB, calcium-channel blocker.”

7. On page e807, in the left column, the second paragraph, the first sentence read, “…evidence-based approaches using medications including aspirin,
blood pressure–lowering medications, cholesterol-lowering medications are appropriate....” The word “and” has been added after “blood pressure–lowering medications.” The sentence now reads, “…evidence-based approaches using medications including aspirin, blood pressure–lowering medications, and cholesterol-lowering medications are appropriate....”

8. On page e810, in the Writing Group Disclosures table, the employment information for Janet S. Wright read, “CDC/CMMI Million Hearts CMS Innovations Center.” It has been updated to read, “Centers for Disease Control and Prevention.” These corrections have been made to the current online version of the article, which is available at http://circ.ahajournals.org/content/135/13/e793.
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