

## **Supplementary Methods**

### **Data Source and Study Population**

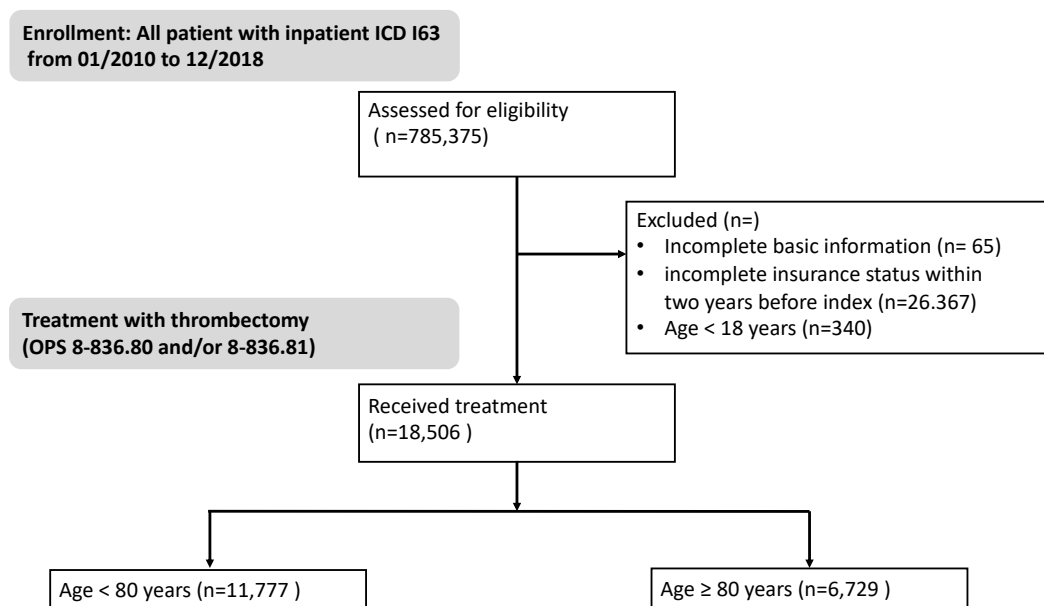
This requires the coding of one main diagnosis for all in-hospital patients, which must thoroughly be chosen after discharge with concern to the underlying cause for hospital admission. Furthermore, an unlimited number of secondary diagnoses can be coded to reflect comorbidities and complications being present or occurring during in-hospital stay. These secondary diagnoses increase the patient's comorbidity and complexity level and have some impact on reimbursement. Each diagnosis has to be coded according to the "German Modification of the International Statistical Classification of Diseases and Related Health Problems 10th Revision" (ICD-10 GM). In addition to the WHO ICD-10, some diagnoses are more detailed in the German Version due to the coding requirements of the G-DRG-System. Similar to the ICD for diagnoses, all diagnostic, endovascular and surgical procedures have to be coded according to the German procedure classification ("Operationen und Prozedurenschlüssel", OPS). Most of them have direct impact on reimbursement. Based on the coded diagnoses and procedures, each case is then allocated into a specific G-DRG depending on its main diagnosis and combination of secondary diagnoses and procedures and induces a certain reimbursement. Due to the high impact of diagnoses and procedures on reimbursement, about 30% of all cases are checked and corrected by independent task forces of physicians ("Medizinischer Dienst"). Data validity analyses have been derived from previous studies.[13,14]

### **Data Accessibility**

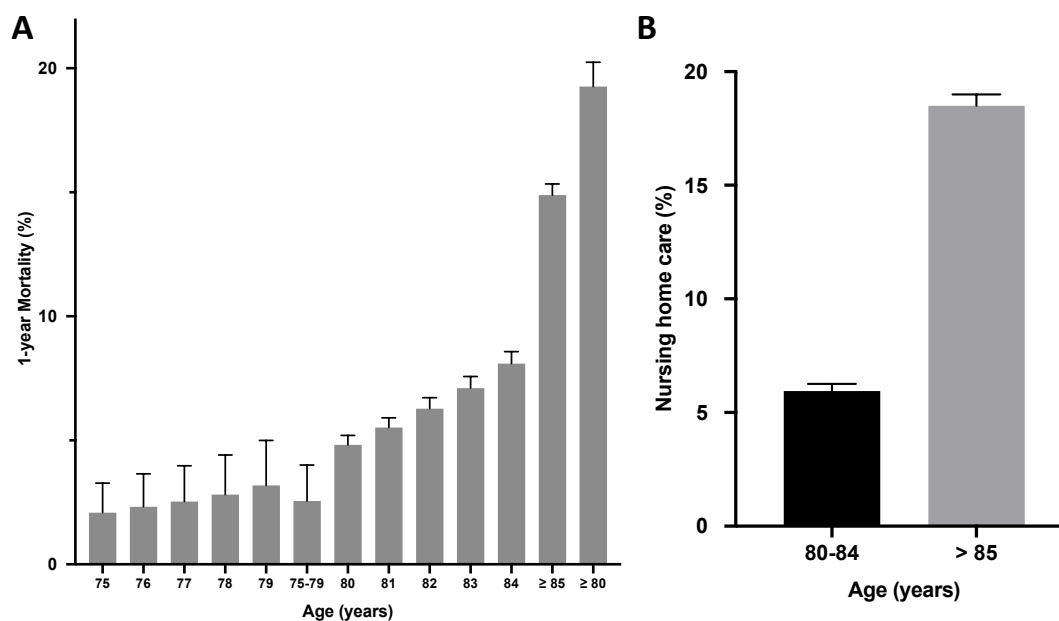
The authors confirm that the data utilized in this study cannot be made available in the manuscript, the supplemental files, or in a public repository due to German data protection laws ('Bundesdatenschutzgesetz', BDSG). Data are stored on a secure drive in the AOK Research Institute (WIdO), to facilitate replication of the results. Generally, access to data of

statutory health insurance funds for research purposes is possible only under the conditions defined in German Social Law (SGB V § 287). Requests for data access can be sent as a formal proposal specifying the recipient and purpose of the data transfer to the appropriate data protection agency. Access to the data used in this study can only be provided to external parties under the conditions of the cooperation contract of this research project and after written approval by the sickness fund. For assistance in obtaining access to the data, please contact [wido@wido.bv.aok.de](mailto:wido@wido.bv.aok.de).

## Supplemental Figures

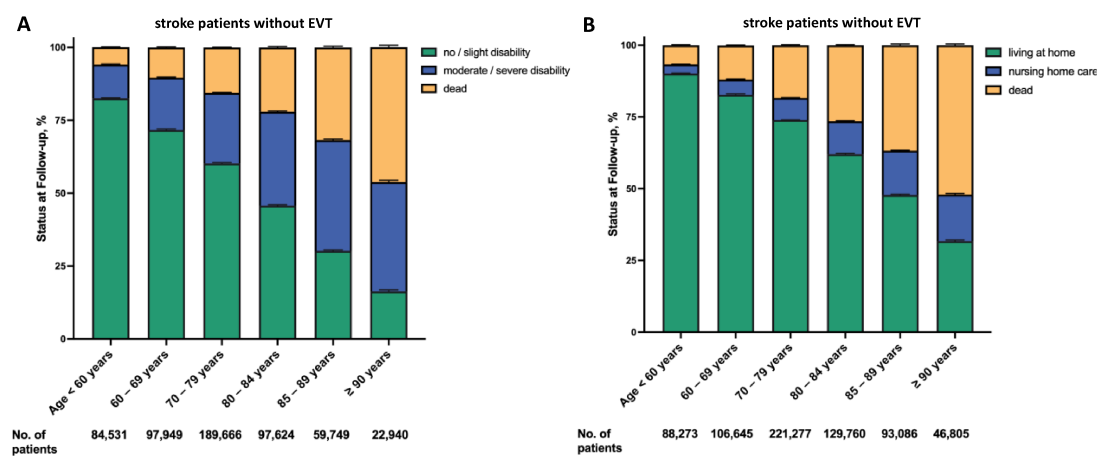


Supplemental Figure 1: Flow Chart of Search Strategy



Supplemental Figure 2: Mortality rate and care situation for age subgroups of the

**general population living in Germany. (A)** 1-year mortality rate of the general population living in Germany for various age subgroups (75 years, 76 years, 77 years, 78 years, 79 years, 75-79 years, 80 years, 81 years, 82 years, 83 years, 84 years,  $\geq 85$  years, and  $\geq 80$  years). **(B)** Prevalence of nursing home care for different age subgroups (80-84 years and  $\geq 85$  years) of the general population living in Germany.



**Supplemental Figure 3: Outcomes for age subgroups at 1-year follow-up. (A)** Disability status (no/slight disability, moderate/severe disability or dead) at 1-year follow-up of stroke patients without mechanical thrombectomy. **(B)** Care situation (living at home, nursing home care or dead) at 1-year follow-up in stroke patients without mechanical thrombectomy. Abbreviations: EVT, endovascular treatment.

## Supplemental Tables

**Supplemental Table 1: Diagnoses and Procedure Codes.**

<b>Parameter</b>	<b>Codes</b>
<b>Previous myocardial infarction</b>	ICD: I21.-; I22.-
<b>Peripheral artery disease (PAD)</b>	ICD:
<b>PAD 1-3</b>	I70.20, I70.21, I70.22 (from 2015)
<b>PAD 4-6</b>	I70.22 (until 2014), I70.23 I70.24 I70.25(from 2015)
<b>Congestive heart failure (CHF)</b>	ICD: I50
<b>Previous cerebrovascular disease</b>	ICD: I65, I66, I67.2
<b>Previous stroke</b>	ICD: I63.-; I64.-; I69.3; I69.4
<b>Atrial fibrillation</b>	ICD: I48
<b>Chronic kidney disease</b>	ICD: N18, N19
<b>Diabetes mellitus non-specified</b>	ICD: E10-E14
<b>Dyslipidemia</b>	ICD: E78
<b>Dementia</b>	ICD: F00, F01
<b>Cancer</b>	ICD: C
<b>Obesity</b>	ICD: E66
<b>Nicotine abuse</b>	ICD: F17
<b>Arterial hypertension</b>	ICD: I10-I15
<b>Acute renal failure</b>	ICD: N17
<b>Systemic thrombolysis</b>	OPS: 8-020.8