



Comprehensive Care for Joint Replacement (CJR) Collaborator Selection Criteria

COMP9

PURPOSE:

Lincoln Surgical Hospital participates in CMS's Comprehensive Care for Joint Replacement (CJR) program. The CJR program, which began April 1, 2016 and extending five performance years, assesses participants' financial and clinical performance across a 90 day Episode of Care for MS DRGs 469 and 470. To facilitate program success, CMS encourages participant hospitals to gainshare savings realized under the program with physicians referred to in the CJR program as CJR Collaborators.

To successfully assume risk and optimize performance under this episode payment model, the Hospital collaborates closely with orthopedic surgeons and may have a Collaborator Agreement in place with an orthopedic physician to share savings within the requirements set forth in 42 CFR Part 510 and participate in Quality of Care Activities.

To participate as a CJR Collaborator, physicians must agree to certain participant hospital-established selection criteria. This policy is intended to set forth the CJR Collaborator eligibility criteria that must be met prior to entering into Collaborator Agreements.

DEFINITIONS:

CJR Beneficiary - includes traditional fee-for-service Medicare beneficiaries admitted for an inpatient anchor hospitalization for MS DRGs 469 or 470. Medicare must be the beneficiary's primary payer. CJR Beneficiary excludes individuals whose Medicare eligibility is on the basis of End Stage Renal Disease, Medicare beneficiaries enrolled in any managed care plan and beneficiaries covered by the United Mine Workers of America health plan.

Collaborator –is limited, for purposes of this policy, to those orthopedic surgeons who agrees to meet CJR participant hospital-established Selection Criteria: 80 Fed. Reg. 73274, and with whom the participant hospital intends to gainshare (to the extent CJR program savings are generated).

Collaborator Agreement - the written gainsharing agreement between a physician and the CJR participant hospital.

Episode of Care - encompasses the inpatient stay for CJR Beneficiaries and all related care within 90 days of hospital discharge from the joint replacement procedure.

Quality of Care Activities – activities relating to care delivered to a CJR Beneficiary during a CJR episode. Measuring and reporting quality measures helps to ensure the Collaborator is delivering effective, safe, efficient, patient-centered, equitable and timely care. All CJR Collaborators must participate, attain or agree to attain the quality measures as defined.

Quality metrics will include aspects of patient care such as adherence to clinical guidelines, health outcomes including but not limited to, re-admission rate and infection rate, efficient use of healthcare resources, care coordination, patient engagement and patient participation in SUCCESS class. Collected data is analyzed for compliance, trends and improvement opportunities. Analysis is used to

Lincoln Surgical Hospital – CJR Collaborator Selection Criteria – COMP9

identify a benchmark and assess Collaborators performance; analysis includes, but is not limited to, internal and external benchmarking.

Patients of CJR providers will be included in mandatory CMS quality measurements including, but not limited to, HCHAPS Survey data, clinical processes of care, HAI measures and validation of medical records as selected.

Applicable identified quality metrics will be generated from LSH CEHR technology and submitting to the Promoting Interoperability (PI) program, formerly Meaningful Use. Eligible providers will successfully submit quality data to PQRS/MIPS through a Registry Solution. Patient Reported Outcomes data (PROs) will be collected by the hospital and assessed for opportunities that could lead to improved care.

POLICY:

Physicians seeking to participate in the CJR program at Lincoln Surgical Hospital as a CJR Collaborator must meet the following selection criteria:

- A. Practice as an orthopedic surgeon privileged to perform a surgical procedure in MS DRG 469 or 470;
- B. Eligible to participate in Medicare;
- C. Comply with the requirements set for in CJR Final Rule: 80 Fed. Reg. 73274. Compliance with the CJR final rule will be a condition of participating in the CJR program as a CJR Collaborator.
- D. As requested by Hospital, participate in CJR-specific care redesign meetings and Quality of Care Activities;
- E. Physician must sign the Collaborator Agreement before care is furnished to CJR Beneficiaries under the terms of the agreement.

The above Selection Criteria are related to, and inclusive of, the quality of care to be delivered to CJR Beneficiaries. Meeting the above Selection Criteria will be a condition of participating in the CJR program as a CJR Collaborator.

Under no circumstances are the above Selection Criteria related, directly or indirectly, to the volume or value of past or anticipated referrals or other business generated by, between or among the participant Hospital, any CJR Collaborator, or any individual or entity affiliated with participant Hospital or CJR Collaborator.

In the event gainsharing payments made to a CJR Collaborator are based on the submission of false or fraudulent data, it is Lincoln Surgical Hospital's policy and responsibility to recoup these gainsharing payments.

PROCEDURE:

The Chief Executive Officer (CEO) or designee must inform and educate each orthopedic surgeon regarding the potential to participate in CJR as a CJR Collaborator. Such educational outreach must include communicating the compliance requirement stated above.

REFERENCES:

- CFR Title 42 Part 510
- CJR Final Rule: 80 Fed. Reg. 73274 (Nov. 24, 2015)
- CMS and OIG Fraud and Abuse Waivers
- CMS CJR Model Summary Website