

Registry Participation Quick Reference Guide: The Joint Commission Advanced Total Hip and Knee Replacement Certification

American Joint Replacement Registry Data Submission for The Joint Commission Advanced Total Hip and Knee Replacement Certification

Refer to this guide to understand the AAOS American Joint Replacement Registry (AJRR) data submission requirements, measure calculations, and dashboard data views for The Joint Commission Advanced Total Hip and Knee Replacement (THKR) Certification performance measures.

Field Name	Required	Acceptable Data Values and Format
TJC_AnesthesiaType	Required for TJC Certification	1-7 (1=General; 2=Spinal; 3=Epidural; 4=Nerve Block: Lumbar Plexus/Psoas/etc. (hip); 5= Femoral/Sciatic/Adductor/etc. (knee); 6= Not reported or NR; 7= Monitored Anesthesia Care (MAC)); PLEASE NOTE: a comma separation may be used if there is more than one technique administered (e.g., "1, 4").
TJC_Rgnl_Ansth_Exemption	Required for TJC Certification	1-6 (1=Attempted and failed; 2=Not attempted; 3=Contraindicated; 4=Not indicated; 5=Unknown; 6=Not reported or NR)
TJC_Ambulation	Required for TJC Certification	1-5 (1=Yes, Ambulation Day of Surgery or 4 hours from PACU discharge; 2=No, Ambulation Day of Surgery or 4 hours from PACU discharge; 3=No, other medical factors preventing ambulation; 4=Unknown; 5=Not reported or NR)
TJC_DSCHDISPCODE	Required for TJC Certification	## or not reported or NR Any valid CMS Patient Discharge Status Code. Common codes used are: 01=Discharged to Home or Self Care (routine discharge); 02 =Discharged/Transferred to a Short-term General Hospital for Inpatient Care; 03=Discharged/Transferred to a Skilled Nursing Facility (SNF) with Medicare Certification in Anticipation of Skilled Care; 04=Discharged/Transferred to a Intermediate Care Facility (ICF); 05=Discharged/Transferred to a designated cancer center or children's hospital; 06=Discharged/Transferred to Home Care of Organized Home Health Service Organization; 07=Left against Medical Advice or Discontinued Care; 09=Admitted as an Inpatient to this Hospital (This code is for use only on Medicare outpatient claims, and it applies only to those Medicare outpatient services that begin greater than three days prior to an admission.); 20=Expired (This code is used only when the patient dies.); 90=Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital with a planned acute care hospital inpatient readmission
TJC_Discharge_Exclusion	Required for TJC Certification	1=Yes, 2=No, 3=Unknown, 4=Not reported or NR
TJC_Admit_Source	Required for TJC Certification	1-5 (1=Home; 2=SNF and/or Other Healthcare Facilities; 3=Other; 4=Unknown; 5=Not reported or NR)

- ▶ AJRR procedure file fields identify included patient population (denominator), cases meeting the metric (numerator), and exclusions to remove unqualified cases
- ▶ Additional procedure data used to identify included/excluded cases and to calculate the measures in the dashboards:
 - ▶ Procedure and Diagnosis Codes (PX_1-PX_10 and DX_1-DX_10)
 - ▶ Patient Death Date
 - ▶ Procedure Date
 - ▶ PROMs Date (date survey was administered) and submitted surveys
 - ▶ Admit and Discharge Dates

***Measure Tip** – [Review Matching Criteria Guide](#) to ensure data elements used to link post-op data and PROMs surveys with the primary procedure are complete for correct measure calculation and dashboard display*



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The Joint Commission Advanced THKR Certification Performance Measures

Measure	Description	Required Data Elements for Measure Calculation
THKR-1 Regional Anesthesia	Patients with regional anesthesia attempted or performed including spinal and epidural blocks and peripheral nerve blocks	<p>Numerator: TJC_AnesthesiaType = 2,3,4,5, TJC_Rgnl_Ansth_Exemption = 1, 3, 4</p> <p>Denominator: PatDOB, ProcedureDate, Procedure Codes (PX_1-PX_10), Diagnosis Codes (DX_1-DX_10), Admission Date (ADMSNDT), Discharge Date (DSCHRGDT)</p> <p>Exclusions: LOS >120 days, revisions, hemis, partials, complication of device/prosthesis, and malignant neoplasms based off coding (fracture is NOT an exclusion for THKR-1)</p>
THKR-2 Postoperative Ambulation of the Day of Surgery	Patients who ambulated postoperatively the day of surgery or ambulated in the PACU or within 4 hours of discharge from the PACU	<p>Numerator: ProcedureDate, TJC_Ambulation = 1</p> <p>Denominator: PatDOB, ProcedureDate, Procedure Codes (PX_1-PX_10), Diagnosis Codes (DX_1-DX_10), Admission Date (ADMSNDT), Discharge Date (DSCHRGDT)</p> <p>Exclusions: TJC_Ambulation = 3, Discharge Disposition Code (03 – D/C to SNV, 07 – Left AMA), PatDeathDate on or before DSCHRGDT, LOS >120 days, revisions, hemis, partials, complication of device/prosthesis, fractures (hip, pelvis, femur), and malignant neoplasms based off coding</p>
THKR-3 Discharged to Home	Patients discharged to home following a total hip or knee replacement	<p>Numerator: TJC_DSCHDISPCODE = 01 or 06</p> <p>Denominator: PatDOB, ProcedureDate, Procedure Codes (PX_1-PX_10), Diagnosis Codes (DX_1-DX_10), Admission Date (ADMSNDT), Discharge Date (DSCHRGDT)</p> <p>Exclusions: TJC_Admit_Source = 2, TJC_Discharge_Exclusion = 1, Disposition Code (03 – D/C to SNV, 07 – Left AMA), PatDeathDate on or before DSCHRGDT, LOS >120 days, revisions, hemis, partials, complication of device/prosthesis, fractures (hip, pelvis, femur), and malignant neoplasms based off coding</p>

Continue to next page

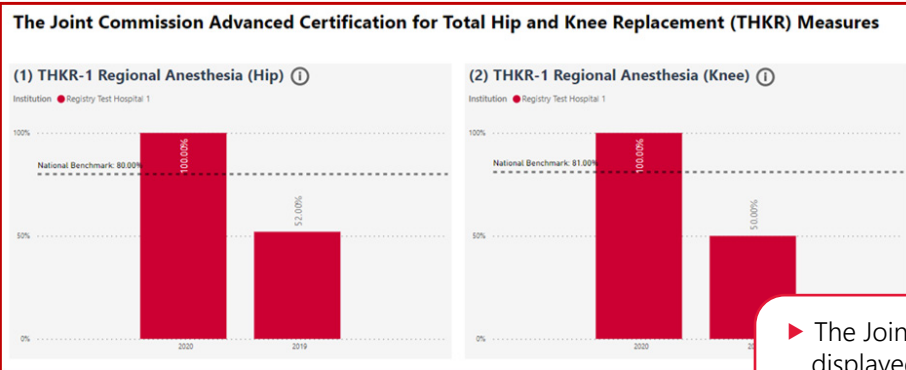
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The Joint Commission Advanced THKR Certification Performance Measures

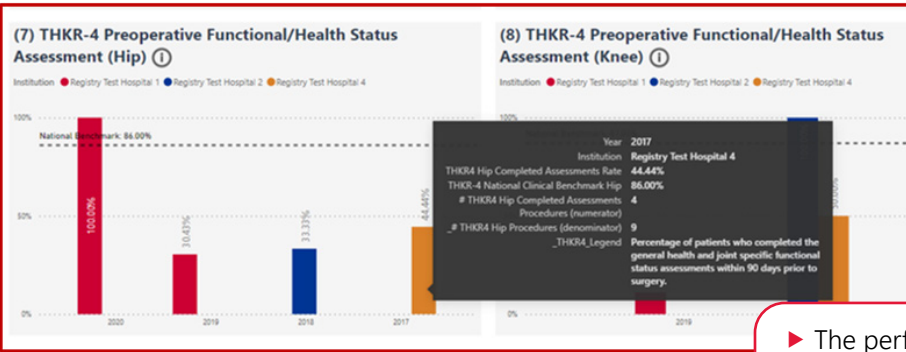
Measure	Description	Required Data Elements for Measure Calculation
THKR-4 Preoperative Functional/Health Status Assessment	Percentage of patients submitted to AJRR who completed the general health (VR-12 or PROMIS-Global) and joint-specific (HOOS Jr./subscales or KOOS Jr./subscales) functional status assessments: Within 90 days prior to surgery and 90 days postoperatively.	Numerator: ProcedureDate, PROMS_Date, VR-12 or PROMIS-10 and HOOS JR/HOOS or KOOS JR/KOOS, ALL ≤ 90 days before procedure date Denominator: PatDOB, ProcedureDate, Procedure Codes (PX_1-PX_10), Diagnosis Codes (DX_1-DX_10), Admission Date (ADMSNDT), Discharge Date (DSCHRGDT) Exclusions: LOS >120 days, revisions, hemis, partials, complication of device/prosthesis, fractures (hip, pelvis, femur), and malignant neoplasms based off coding
THKR-5 Postoperative Functional/Health Status Assessment	Percentage of patients submitted to AJRR who completed a general health (VR-12 or PROMIS-Global) and joint specific (HOOS Jr./subscales or KOOS Jr./subscales) functional status within 3 months (30-150 days) post-op.	Numerator: ProcedureDate, PROMS_Date, VR-12 or PROMIS-10 and HOOS JR/HOOS or KOOS JR/KOOS, ALL > 30 days and < 150 days post-op (3-month time point) Denominator: PatDOB, ProcedureDate, Procedure Codes (PX_1-PX_10), Diagnosis Codes (DX_1-DX_10), Admission Date (ADMSNDT), Discharge Date (DSCHRGDT) Exclusions: PatDeathDate on or before DSCHRGDT, LOS >120 days, revisions, hemis, partials, complication of device/prosthesis, fractures (hip, pelvis, femur), and malignant neoplasms based off coding

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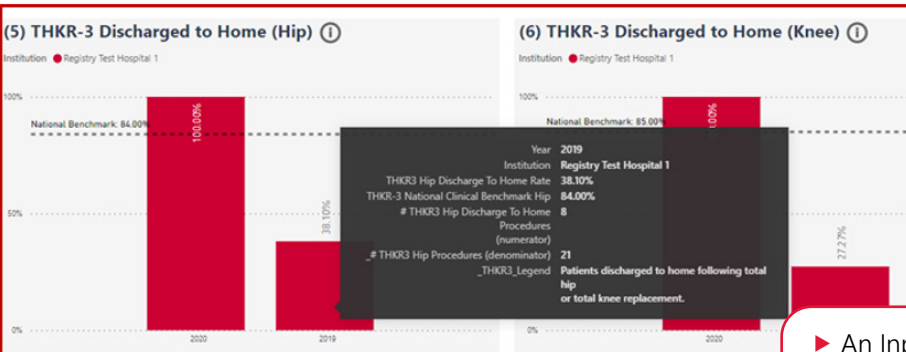
RegistryInsights® Performance Measures Dashboard



► The Joint Commission Performance Measures are displayed by joint in the dashboard and calculated from site-submitted data identified in the previous sections



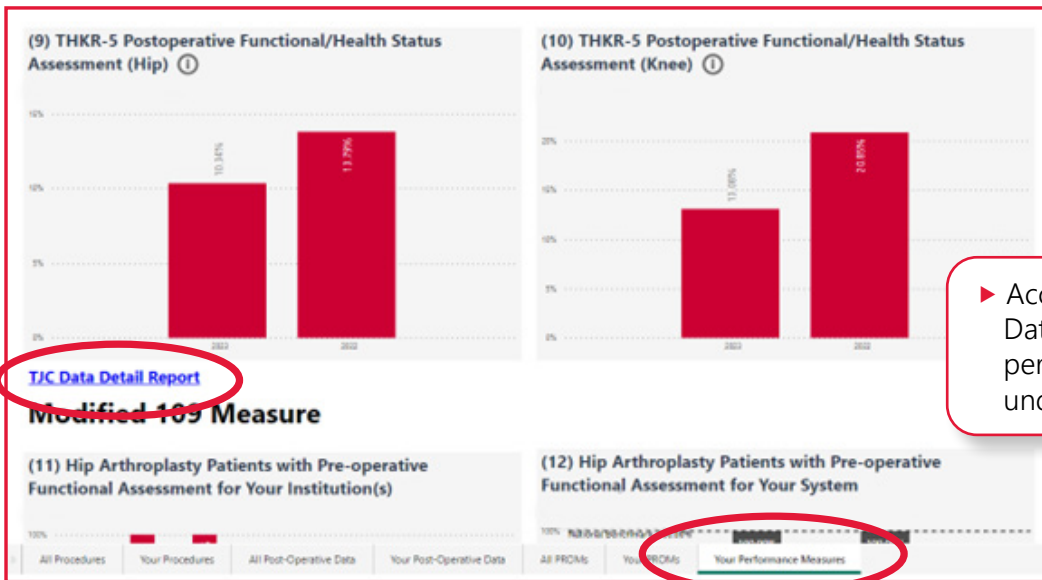
► The performance rate (numerator/denominator) displays in the tool tip window



► An Inpatient/Outpatient dashboard filter is in progress and additional case information such as care status is available in The Joint Commission Data Detail Report

Registry Participation Quick Reference Guide

The Joint Commission Data Detail Report



► Access The Joint Commission Data Detail Report on the performance measures tab under the THKR measure charts.

Setting of Care: All | THKR1: All | THKR2: All | THKR3: All | **THKR4: 1** | THKR5: All | Year: All | Month: All

ProcedureSite: All

TJC View

Setting of Care	THKR1	THKR2	THKR3	THKR4	THKR5	PromisPreOp Completed	PromisPostOp Cor	P Completed	VR12PostOP Completed	HoosKosPreOp Completed	Ho...
Outpatient	1	1	1	1	0	1		0	0	1	
Outpatient	1	0	1	1	0	1		0	0	1	
Outpatient	1	0	1	1	0	1		0	0	1	
Outpatient	1	1	1	1	1	1	1	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	1	1	0	0	0	1	
Outpatient	1	1	1	1	1	1	1	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	1	1	1	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	1	1	1	1	0	1	0	0	0	1	
Outpatient	0	1	1	1	1	1	0	0	0	1	

Navigation tabs: All Procedures, Your Procedures, All Post-Operative Data, Your Post-Operative Data, All PRCMs, Your PRCMs, Your Performance Measures

► Use the measure filters to identify cases meeting the metric, indicated by "1" or a measure fallout, indicated by "0." This report can also be filtered by care setting, joint, and procedure month and year.

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nosilaterality	TJC_AnesthesiaType	TJC_Rgnl_Ansth_Exemption	TJC_Ambulation	TJC_DSCHDISPCODE	TJC_Admit_Source	TJC_Discharge_Exclusion	EncounterMortality	Revision-Removal-Partial
1	6	1	01	4	0	0	0	
1	6	1	06	4	0	0	0	
1,4	6	1	01	4	0	0	0	
6	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	5	01	4	0	0	0	
1,4	6	1	06	4	0	0	0	
1	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	1	06	4	0	0	0	
1	6	1	01	4	0	0	0	
1	6	1	01	4	0	0	0	
1	6	1	01	4	0	0	0	
6	6	1	01	4	0	0	0	
1	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	
1,4	6	1	01	4	0	0	0	

- Gain additional insight on cases not meeting the metric and identify excluded cases removed from the denominator by reviewing submitted Joint Commission data fields and exclusion criteria met. The below legend provides the data element responses indicating a measure exclusion. Cases that are excluded from the denominator will also have a blank in the procedure site column. Additional data element and measure calculation details can be found in the previous tables in this guide and in the Registry Participant Toolkit.

The Joint Commission Data Element Denominator Exclusion Legend

Measure	AJRR Data Element	Submitted Value
THKR-2	TJC_Ambulation	3 – site documented other medical factors preventing ambulation
THKR-2 & THKR-3	TJC_DSCHDISPCODE	03 – Discharged to SNF or 07 – Left AMA
THKR-3	TJC_Admit_Source	2 – Admitted from SNF and/or other healthcare facilities
THKR-3	TJC_Discharge_Exclusion	1 – Yes, there is a documented medical or social reason patient was not discharged to home

Additional denominator exclusions are identified via ICD-10 diagnosis coding (fractures*, malignant neoplasms), CPT or ICD-10 procedure coding (hemis, revisions, complications), length of stay, and patient death date where applicable. These exclusions are indicated with a "1" in the last 4 columns of the report.

*Fracture is not an exclusion for THKR-1

Call 1-800-999-2939 with any questions related to The Joint Commission Advanced THKR Certification