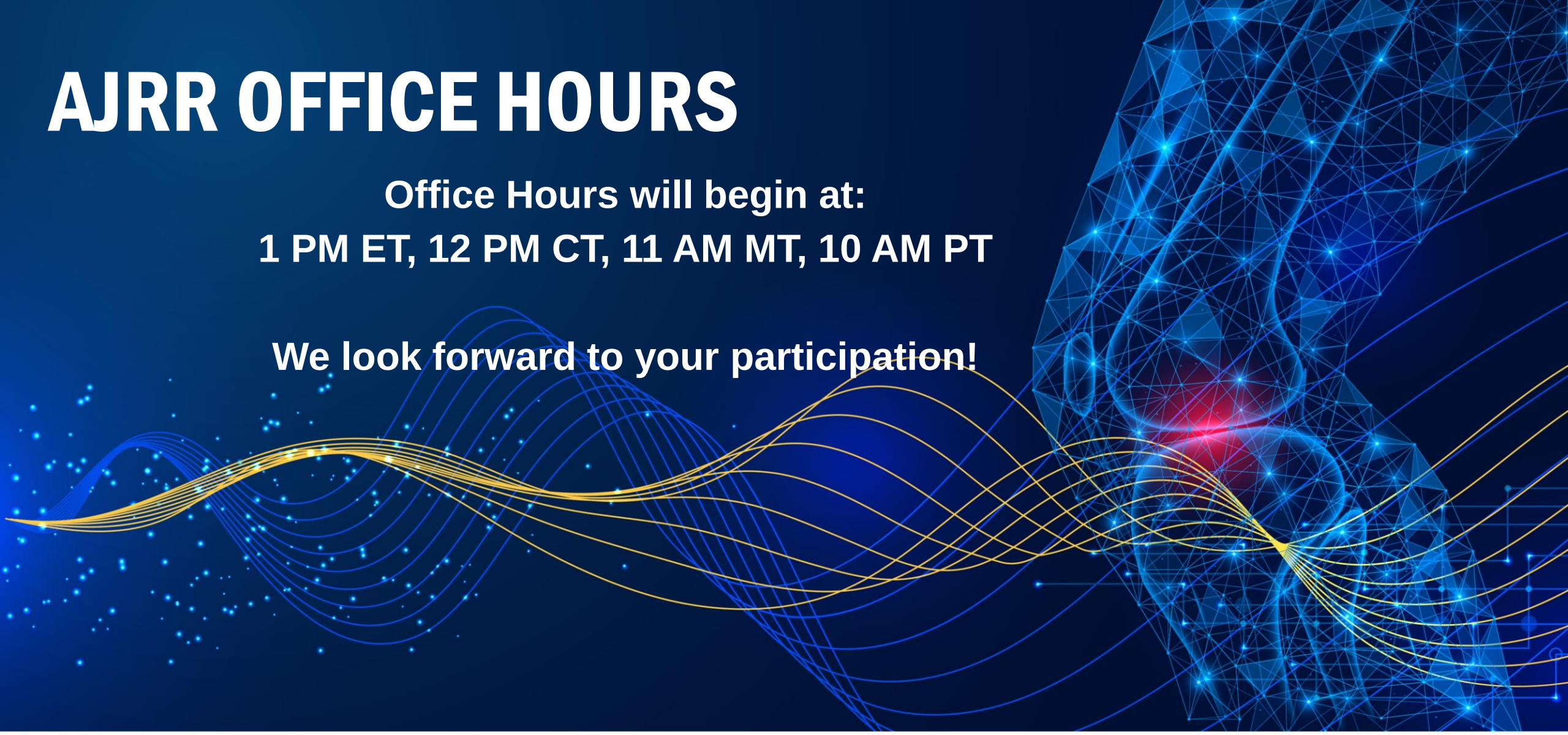
AJRR OFFICE HOURS

Office Hours will begin at:

1 PM ET, 12 PM CT, 11 AM MT, 10 AM PT

We look forward to your participation!



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American Joint Replacement Registry

9.18.24 OFFICE HOURS AGENDA

- Office Hours Overview

- AJRR Updates
  - Quality Improvement Scorecard
  - Updating Roles in RegistryInsights
  - Dashboard Demo

- Q&A

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OFFICE HOURS SCHEDULE

Upcoming and past Office Hours recordings and/or Q&A minutes can be accessed at https://www.aaos.org/registries/office-hours/

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AJRR AMERICAN JOINT REPLACEMENT REGISTRY

AAOS Registry Office Hours

We understand that there may be questions about AAOS Registry participation that are best asked and answered in real-time. You can join other like-minded Registry participants on informal office hour calls throughout the year.

The office hour sessions are led by Registry Program staff and cover a variety of topics that include using the registries to meet quality initiatives, recent Registry platform updates, and more. Refer to this page for upcoming office hour sessions that may be of interest. We look forward to answering any questions you may have!

- **Office Hours for the AAOS American Joint Replacement Registry**
  Wednesday, April 17, 2024, 1:00 p.m. - 2:00 p.m. CT
  Click here to join the office hours on 4/17.
- **Office Hours for the AAOS Fracture & Trauma Registry**
  Tuesday, April 30, 2024, 12:00 p.m. - 1:00 p.m. CT
  Click here to join the office hours on 4/30.

Questions Asked at Previous Office Hours

- 3/5/24 - CMS IQR THA/TKA PRO-PM - Download the slides here. View the recording here.
- 2/28/24 - Data Submission and Management for The Joint Commission Advanced Certifications Q & A
- 1/31/24 - Patient-reported Outcome Measures Overview for The Joint Commission Advanced Certifications Q & A
- 12/13/23 - The Joint Commission Advanced Certifications Q & A
- 11/9/23 - The Joint Commission Advanced Certifications Q & A
- 10/25/23 - The Joint Commission Advanced Certification in Spine Surgery (ACSS) Q & A
- 10/10/23 - CMS IQR PRO-PM Q & A
- 10/2/23 - The Joint Commission ACSS Q & A
- 8/15/23 - The Joint Commission Advanced Certifications Q & A

AJRR UPDATES

August 2024

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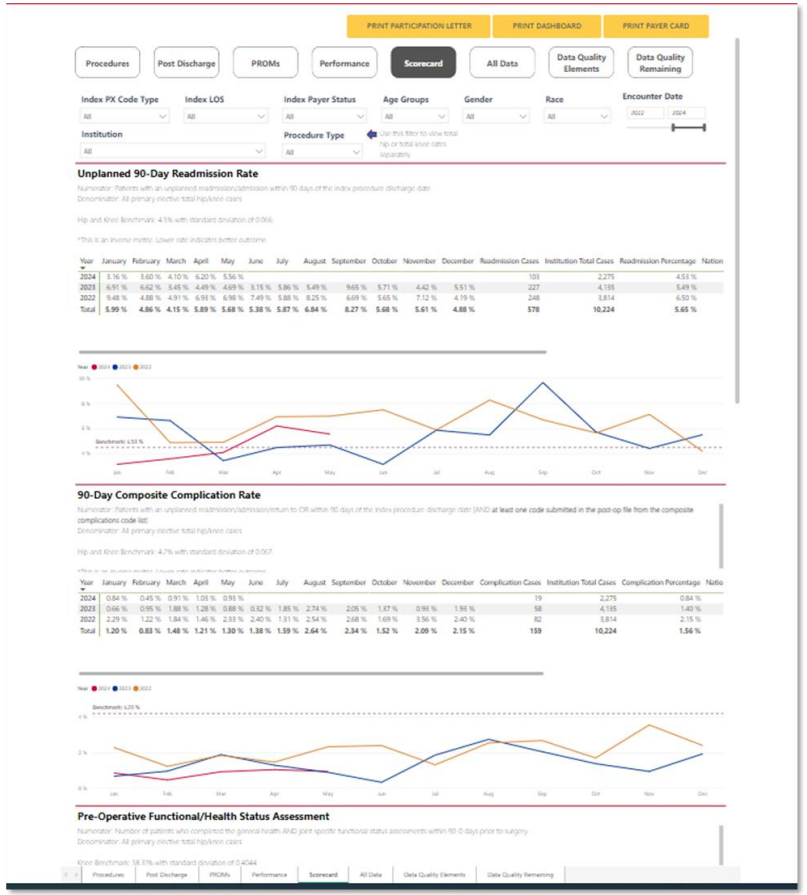
REGISTRY

UPDATE YOUR USER ROLES

QUALITY IMPROVEMENT SCORECARD

- Unplanned 90-day readmission/admission rate
- 90-day Composite complication rate
- Preoperative patient-reported outcome measures (PROMs) completion rate (90-0 days pre-op)
- Postoperative 1-year PROMs completion rate (300-425 days post-op)
- Pre AND postoperative 1-year PROMs completion rate (300-425 days post-op)
    - Aligns to CMS PRO-PM and TJC 1-year PROMs requirements



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SCORECARD MEASURE SPECIFICATIONS

- In **Dashboard Guides Section** under Tools & Resources in RegistryInsights®
- Numerator and denominator definitions
- Data elements needed for calculating the measures and displaying scorecard data
- Inclusion/exclusion coding
- Complications code list

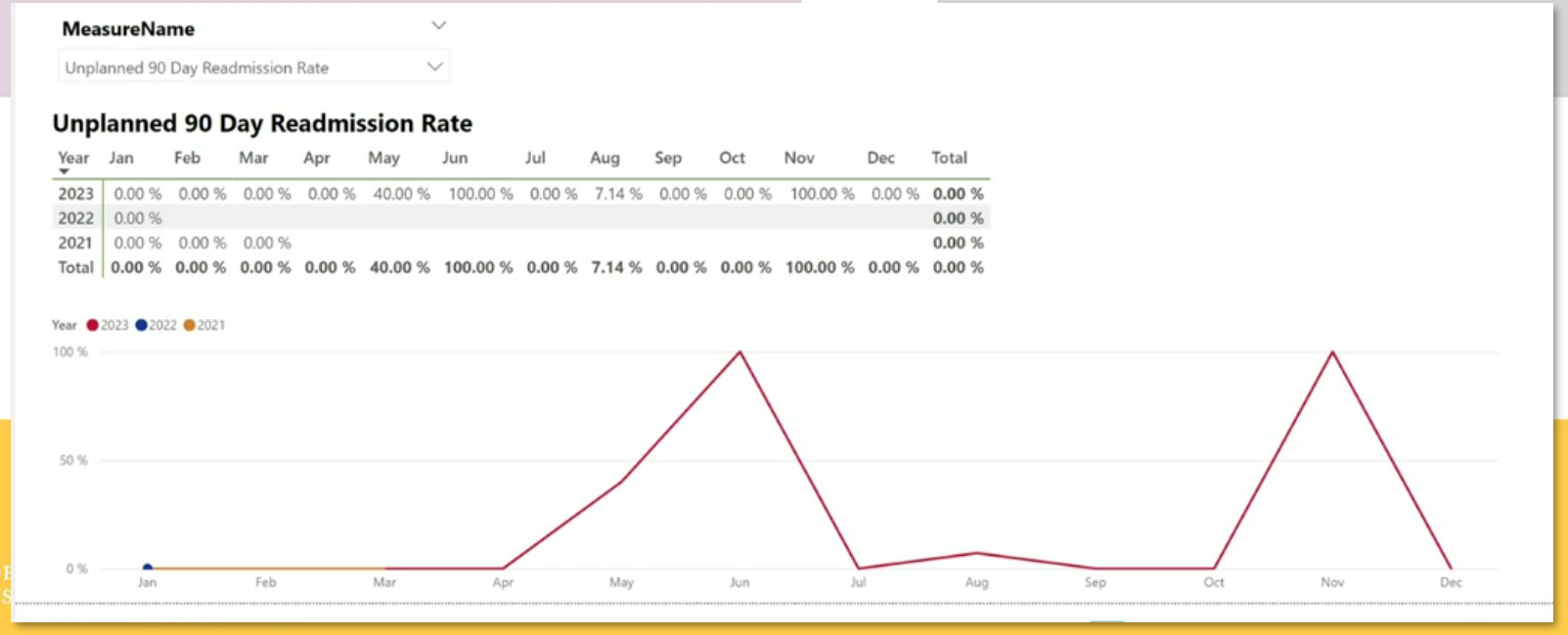
SCORECARD & RISK ADJUSTMENT

Q3

- Dashboard scorecard visuals with AJRR benchmarks
- Communication campaign for updating site & surgeon contacts

Q4

- PDF Scorecard pushed out to Surgeon & Site Authorized Users
- 3-year look-back period
- Risk-Adjustment on 1-year revision rates



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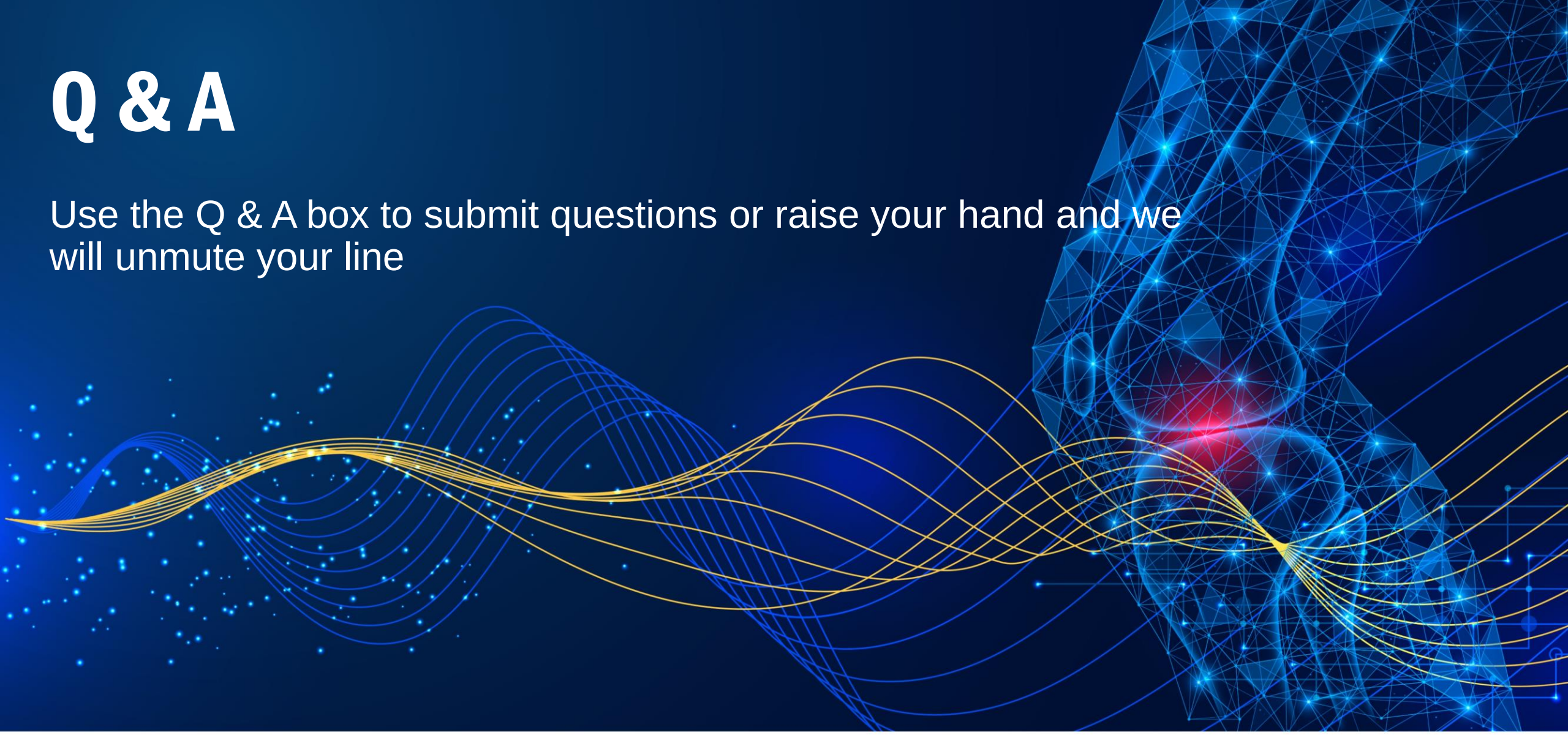
Q & A

Use the Q & A box to submit questions or raise your hand and we will unmute your line



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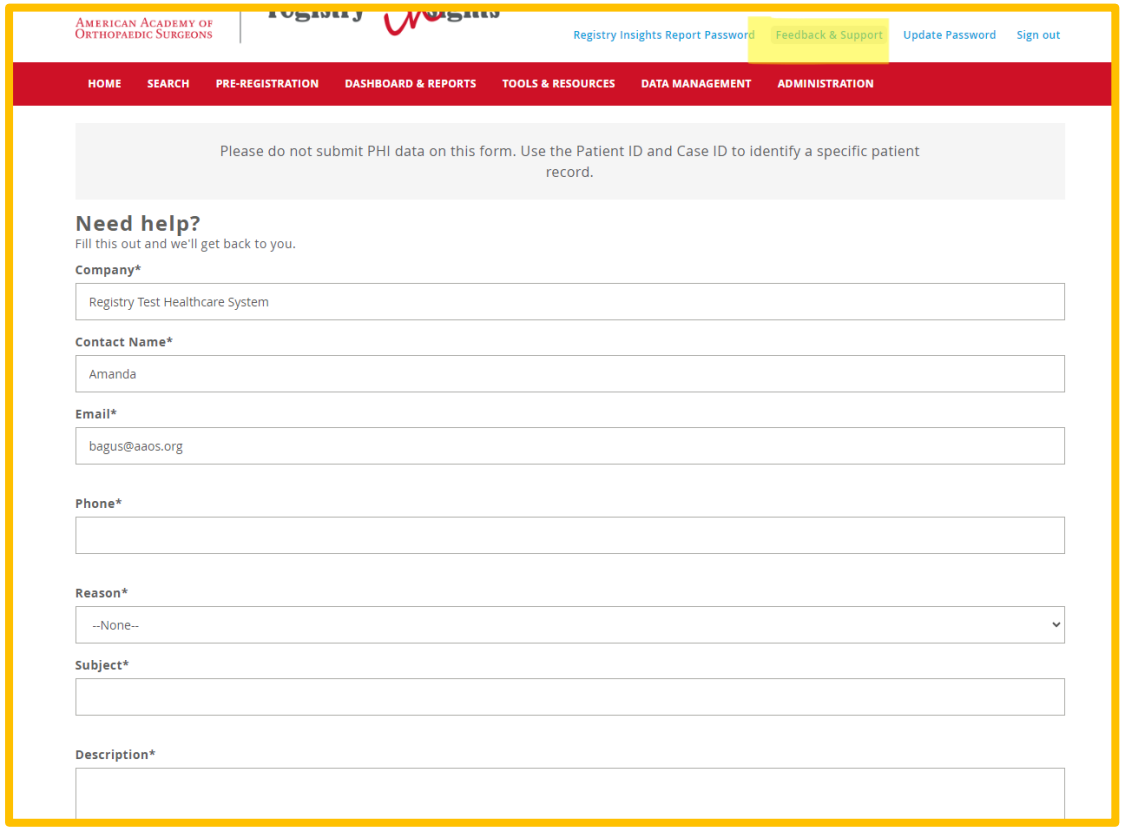
CONTACT THE AAOS REGISTRY PROGRAM

Technical Support: Please submit a help ticket to our Feedback & Support link on the RegistryInsights platform

Contracts, Invoicing, & Onboarding:

RegistryEngagement@aaos.org

Business Hours: Monday through Friday, 8 a.m. to 4 p.m. Central Time



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APPENDIX – ADDITIONAL RESOURCES

IQR PRO-PM REVIEW

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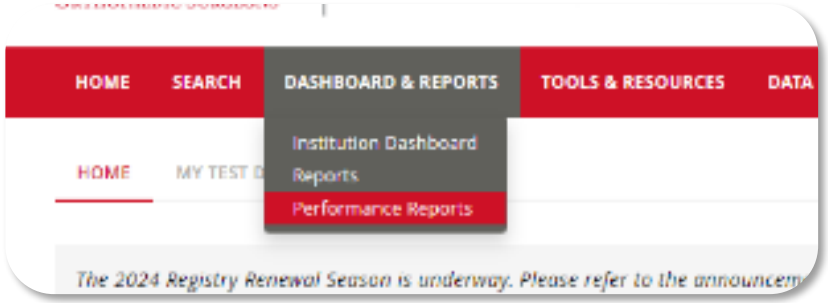
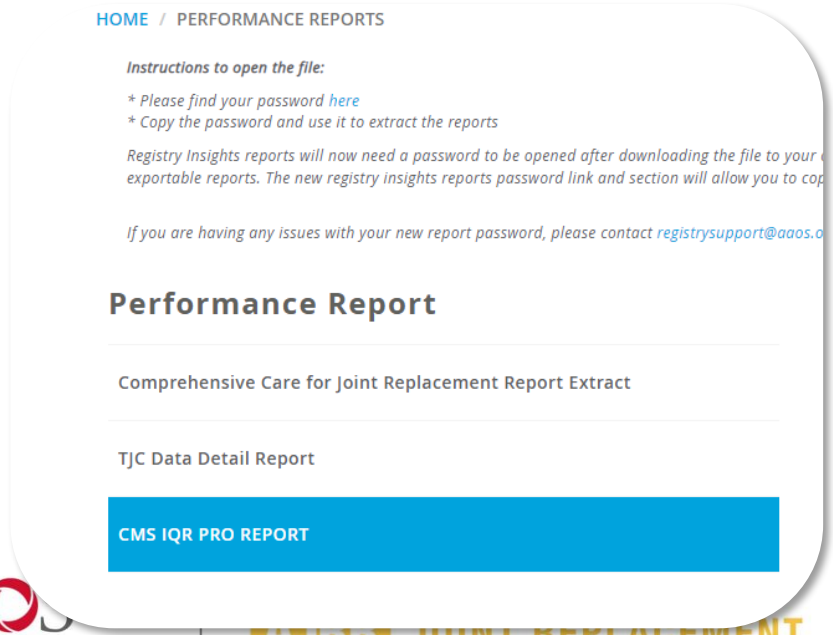
Q1 2024

- Release of 2024v1 Specifications with new IQR fields
  - Medicare Bene ID (procedure file)
  - Chronic Narcotics Use (procedure file)
  - Person Completing Assessment (PROMs File)

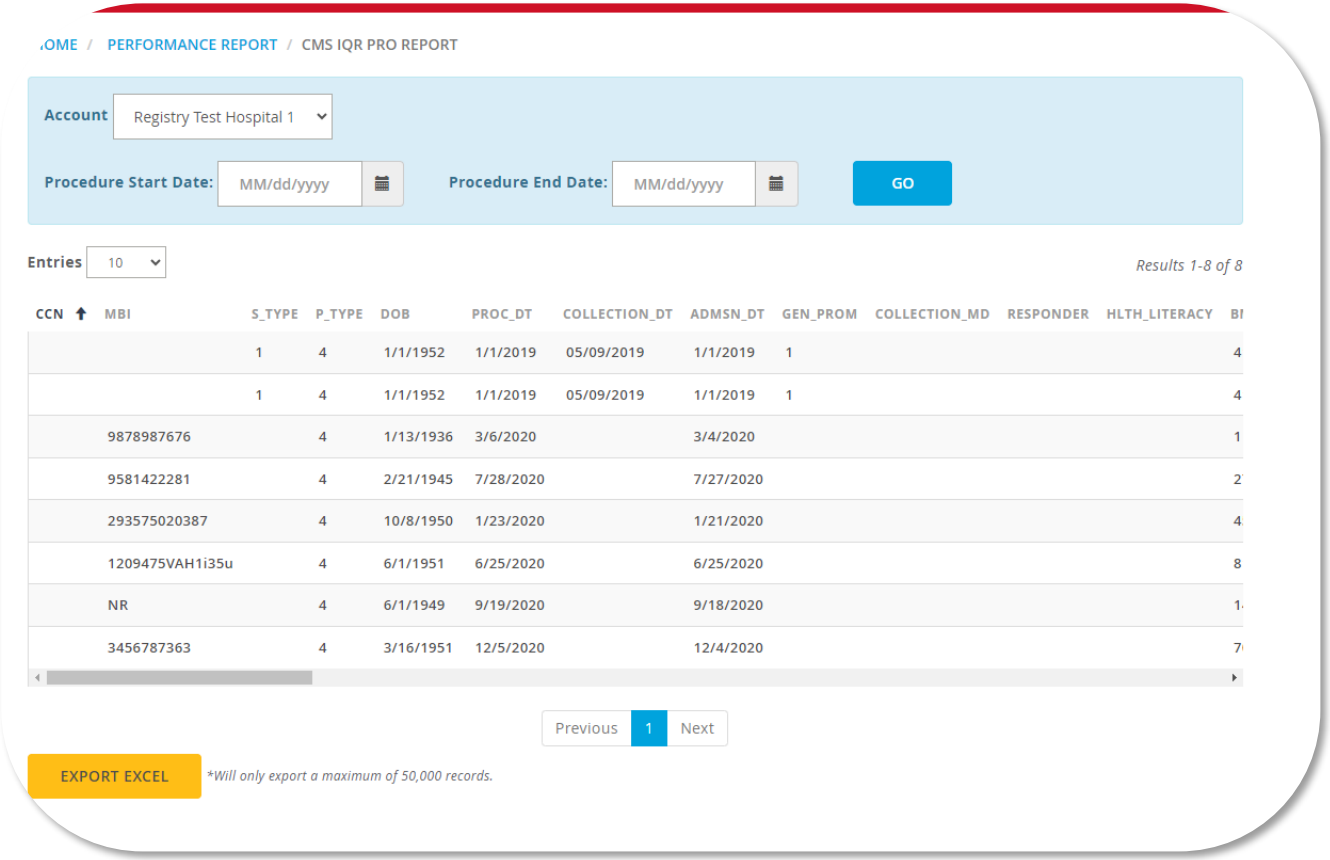
CMS IQR PRO-PM | AJRR REPORT

Q1 2024





The IQR PROMs Performance Report allows sites to track their PROMs completion and scores for the 65+ primary total hip and knee cases and uses the CMS-required format for submission



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CMS IQR PRO-PM | REPORTING PROCESS

Site Elects to Report

- BAA for new participants & Separate CMS Data Share Agreement for new and established sites
- Registry team provides IQR PRO-PM fact sheet **(website)**

Data Submission

- **Website** & Data Specifations provide site **required data elements for submission and how to review** dashboard-available extract
- Site submits data quarterly at minimum
- Site reviews dashboard to track PROMs in RegistryInsights

Reporting

- Two Options:
- **Site downloads extract and submits to CMS in excel format**
- **AAOS submits excel file to CMS through IQR portal once site approves extract**

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Q2 2024

- Updating to PROMIS Global v1.2
  - Current specifications are utilizing v1.1
  - Update to be released on **May 9th**
  - **All sites submitting on 2024v1 need to submit with v1.2 formatting**

CMS IQR PRO-PM | REQUIREMENTS

WHO ?

Included

- Age 65 and older
- Enrolled in Medicare fee-for-service
- Primary elective THA/TKA reimbursed as INPATIENT

Excluded

- Medicare Advantage Patients
- Revisions/Removals/Mechanical Complications
- Partial/Hemi/Uni-compartmental
- Musculoskeletal Malignancy
- Fractures

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CMS IQR PRO-PM | REQUIREMENTS

WHAT ?

The listed elements need to be completed for a **minimum of 50%** of eligible patients.

Data Element Type	Preoperative Data Elements	Postoperative Data Elements
Patient-Reported Outcome Measures (PROMs)	THA patients: HOOS, JR TKA patients: KOOS, JR	THA patients: HOOS, JR TKA patients: KOOS, JR
Patient- or Provider-Reported Risk Variables	Mental Health Subscale items from either PROMIS-Global or VR-12	N/A
	Health Literacy (SILS2)	
	BMI or Height/Weight	
	Use of Chronic Narcotics	
	Total Painful Joint Count: Patient-Reported Pain in Non-Operative Lower Extremity Joint	
	Quantified Spinal Pain: Patient-Reported Back Pain, Oswestry Index Question	
Matching Variables	Medicare Provider Number	Medicare Provider Number
	MBI	MBI
	Date of Birth	Date of Birth
	Date of Procedure	Date of Procedure
	Procedure Type	Procedure Type
	Date of Admission	Date of Admission
PROM-related Variables	Date of PRO Data Collection	Date of PRO Data Collection
	Mode of Collection	Mode of Collection
	Person Completing the Survey	Person Completing the Survey
	Generic PROM Version	N/A

BMI: Body Mass Index; HOOS, JR: Hip dysfunction and Osteoarthritis Outcome Score for Joint Replacement; KOOS, JR: Knee injury and Osteoarthritis Outcome Score for Joint Replacement; PROMIS-Global: Patient-Reported Outcomes Measurement Information System; SILS2: Single Item Literacy Screener; VR-12: Veterans Rand-12; MBI: Medicare Beneficiary Identifier; PROM: Patient-reported Outcome Measure

CMS IQR PRO-PM | REQUIREMENTS

Pre-op Patient- or Provider-Reported Risk Variables

- PROMIS-10 Global **OR** VR-12
- At the moment, what is your back pain?
  - 0 = None, 1 = Very Mild, 2 = Moderate, 3 = Fairly Severe, 4 = Very Severe, 5 = Worst Imaginable
- How comfortable are you filling out medical forms by yourself? (Single Item Literary Screening (SILS)-2)
  - 0 = Not at all, 1 = A little bit, 2 = Somewhat, 3 = Quite a bit, 4 = Extremely
- What amount of pain have you experienced in the last week in your other knee/hip?
  - 0 = None, 1 = Mild, 2 = Moderate, 3 = Severe, 4 = Extreme

Pre- and Post-Operative Functional Status Assessments

- Knee PROM – KOOS Jr.
- Hip PROM – HOOS Jr.

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CMS IQR PRO-PM | REQUIREMENTS

WHEN?

INPATIENT THA/TKA PRO-PM PERFORMANCE YEAR 1 COVERING PROCEDURES JULY 1, 2024 – JUNE 30, 2025				
Pre-Op Collection	**Pre-Op Submission Deadline**	**Post-Op Colleciton**	**Post-Op Submission Deadline**	**CMS Public Reporting**
*0-90 Days before procedure		*300-425 days after procedure		
April 2, 2024 – June 30, 2025	September 30, 2025	April 27, 2025 – August 29, 2026	September 20, 2026	2027

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CMS IQR PRO-PM | SCORING

HOW?

How will hospitals be scored?

CMS will publicly report the percentage of patients who achieve a substantial clinical benefit (SCB).

Substantial Clinical Benefit Threshold	
HOOS, JR. - 22 points	KOOS, JR. – 20 points

CMS will factor in all the risk variable data you submitted, as well as your claims data, to create your final "risk-standardized improvement rate" (RSIR).

For example, you achieve a 60% RSIR, that means that, in general, 60% of your patients reported a substantial improvement after their THA/TKA procedure

CMS IQR PRO-PM | FINANCIAL IMPLICATIONS

What is the financial penalty for not reporting a complete data set for 50% of all eligible patients?

CMS will reduce 25% of the Annual Payment Update (usually 2-4%) for **ALL** the hospital's Medicare Fee-for-Service Part A claims, including non-orthopaedic claims

FOR EXAMPLE:

$100M Medicare fee-for-service Part A claims

+

APU is 4%

=

$1M

Lost Revenue

RISK VARIABLES | AJRR CAPTURE

Low Back Pain, **Health Literacy**, & **Total Painful Joint Count** Via

- Submitted via AJRR Procedure & PROMs file layouts submitted by a hospital or an authorized 3rd party vendor

OR

- Via the RegistryInsights PRO Tool
  - Make sure the "CMS Risk Assessment" is listed as a pre-op assessment in your PRO profile
  - To update a PRO Profile, please reach out to our support team
- **BMI** is calculated from Height & Weight data elements submitted with the procedure file
- **Chronic Narcotics Use** is a new element in the 2024v1 procedure file

PROMS_CJRSILS2	Single Item Health Literacy Screening (SILS2) questionnaire	# (0 = Not at all; 1 = A little bit; 2 = Somewhat; 3 = Quite a bit; 4 = Extremely); Not reported or NR
PROMs_CJRPatRepPain	Patient-Reported Pain in Non-operative Lower Extremity Joint	# (0 = None; 1 = Mild; 2 = Moderate; 3 = Severe; 4 = Extreme); Not reported or NR
PROMs_CJRBackPain	Patient-Reported Back Pain (Oswestry Index Question)	# (0 = None; 1 = Very Mild; 2 = Moderate 3 = Fairly Severe; 4 = Very Severe; 5 = Worst Imaginable); Not reported or NR

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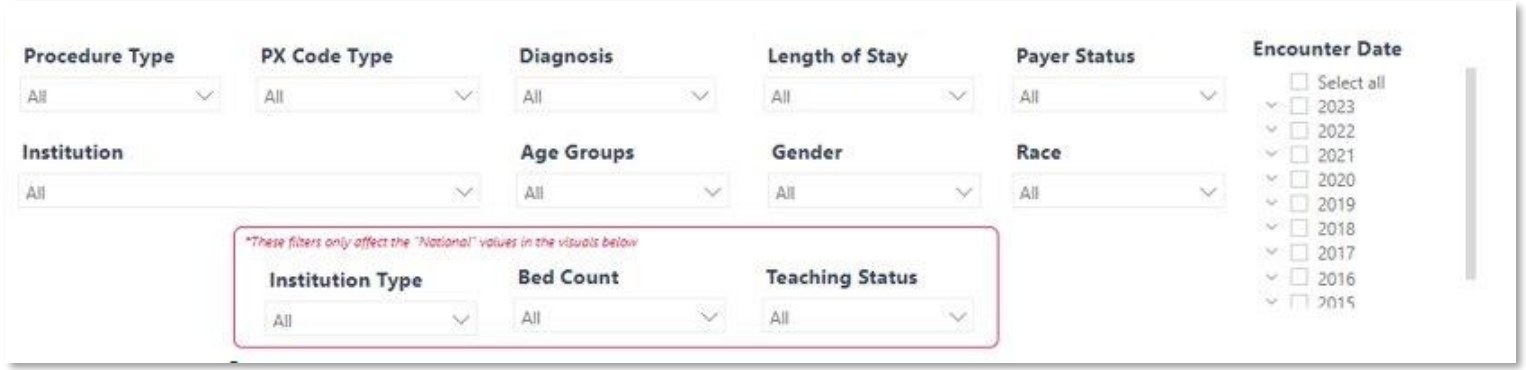
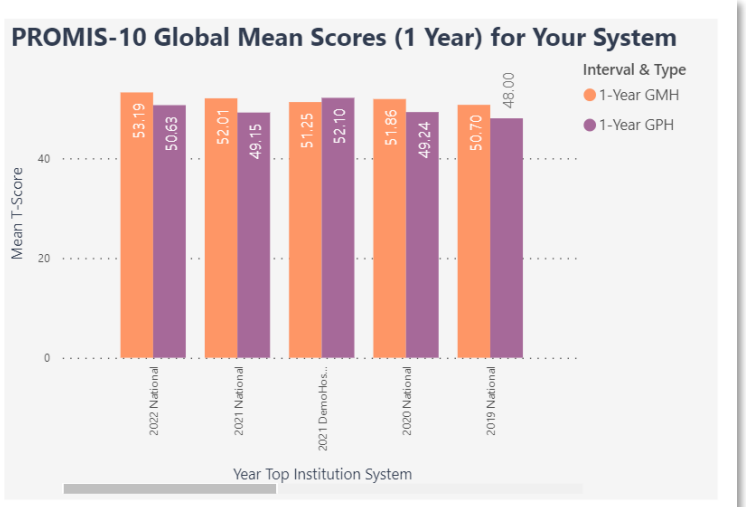
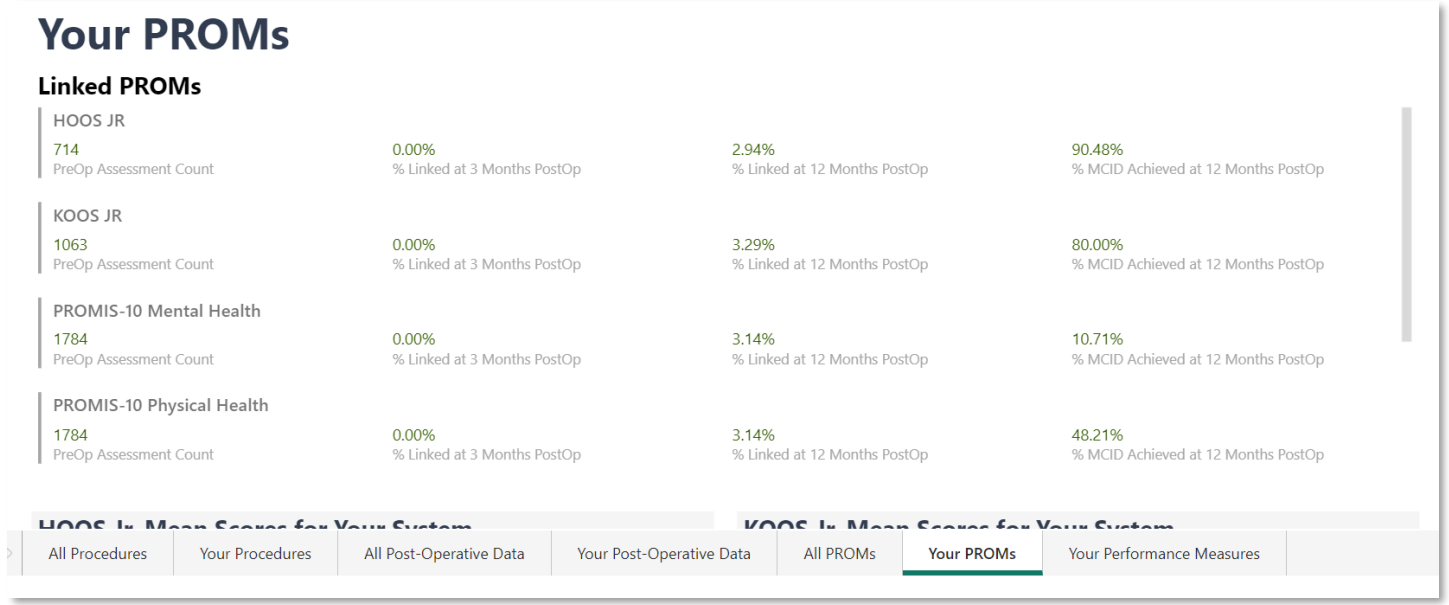
REGISTRYINSIGHTS® | PROMS

- Collection & Maintenance of PROs
- Track PROMs Completion Rate and Outcomes Over Time with National Outcomes Comparison







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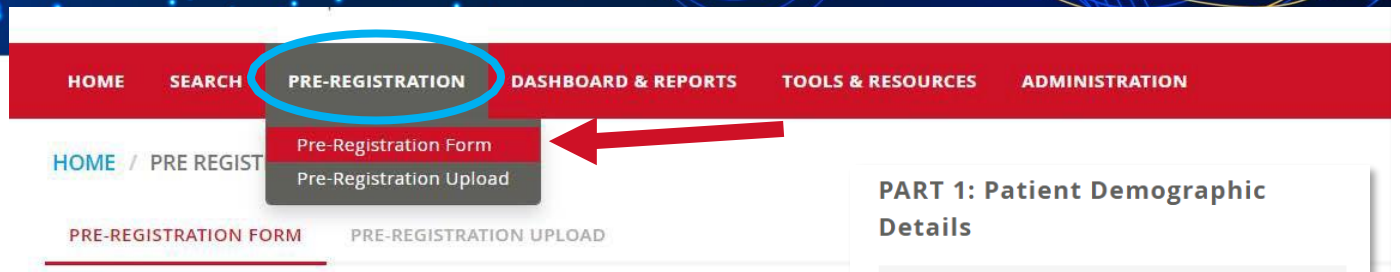
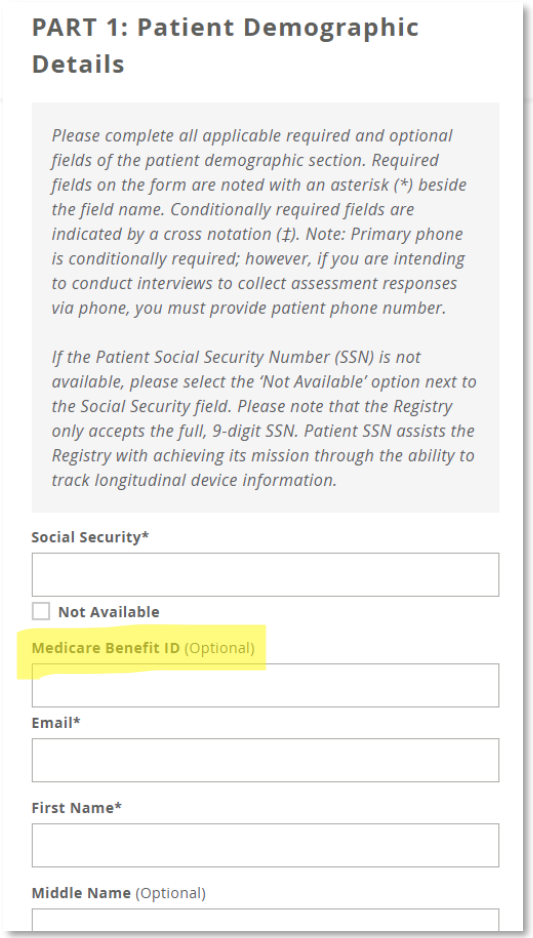
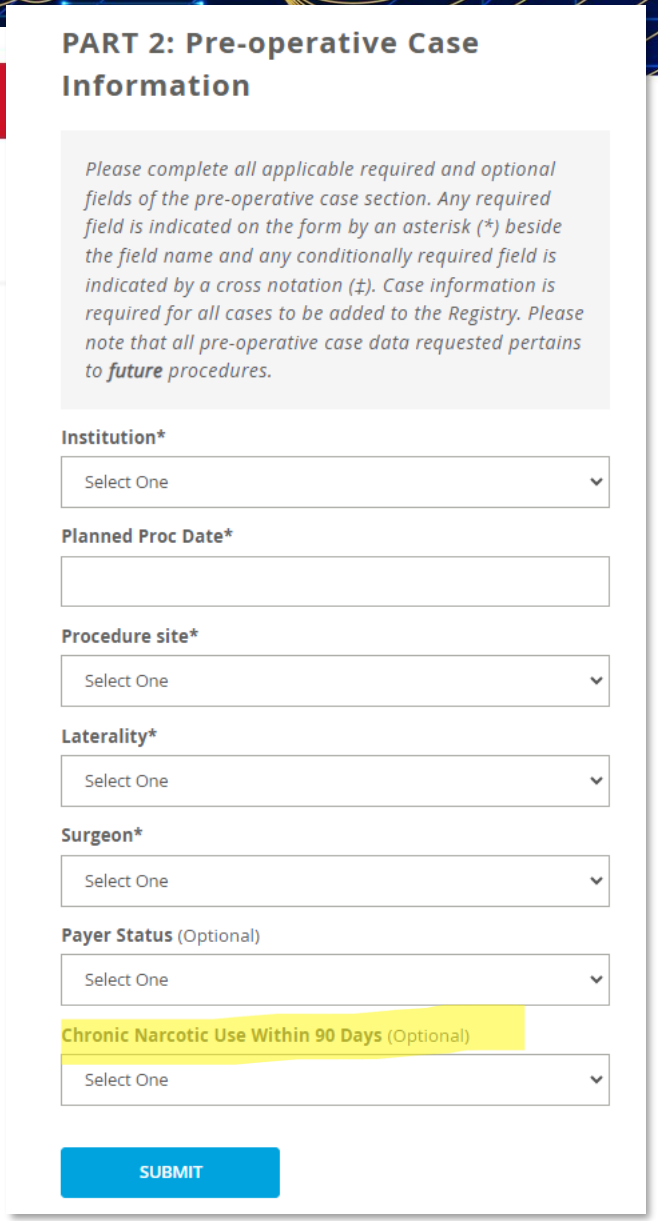
REGISTRYINSIGHTS | PROMS



- Patients can be registered individually or via a bulk pre-registration file upload
- Once registered, PROMs can be collected two ways into the platform:
  - Patient accesses PROM assessments via the RegistryInsights kiosk mode
  - Manual entry





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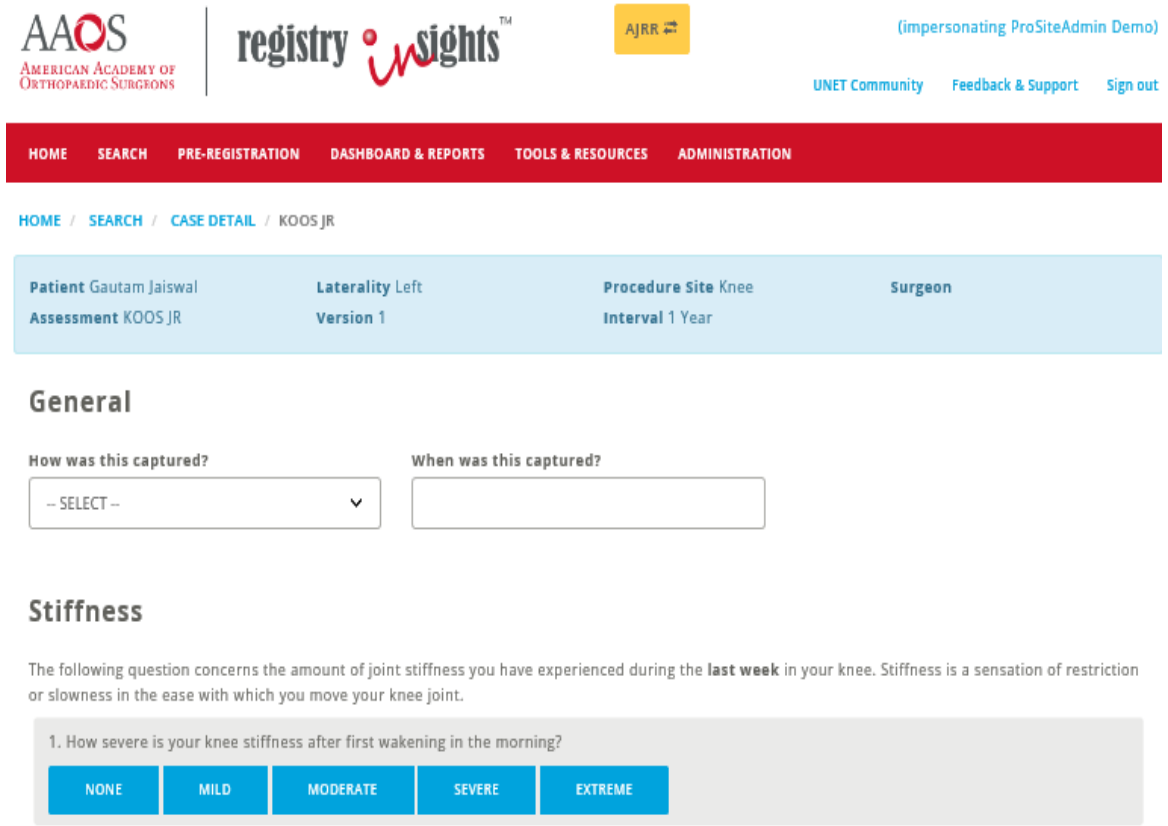
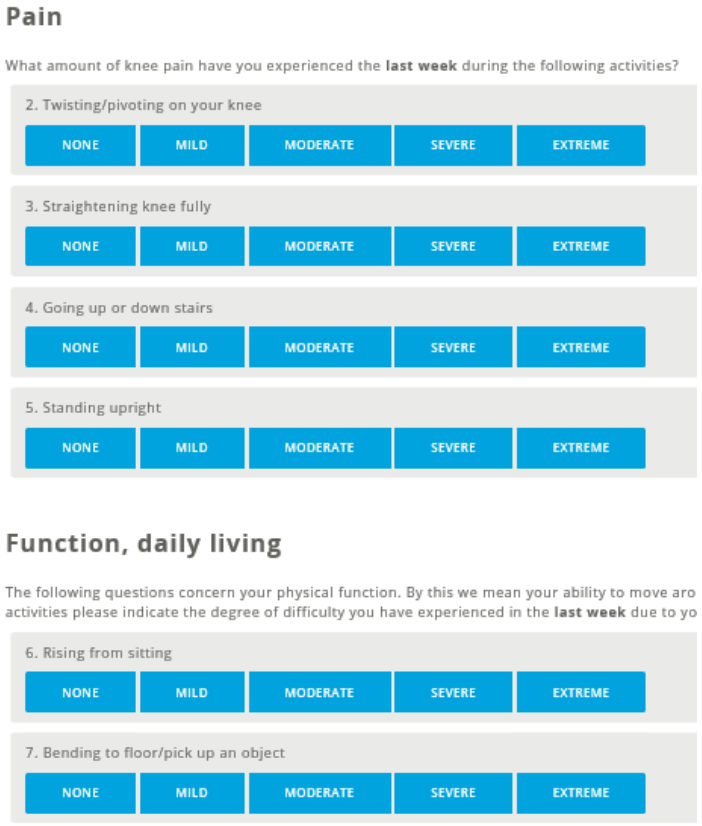
ACCESS TO PRO INSTRUMENTS





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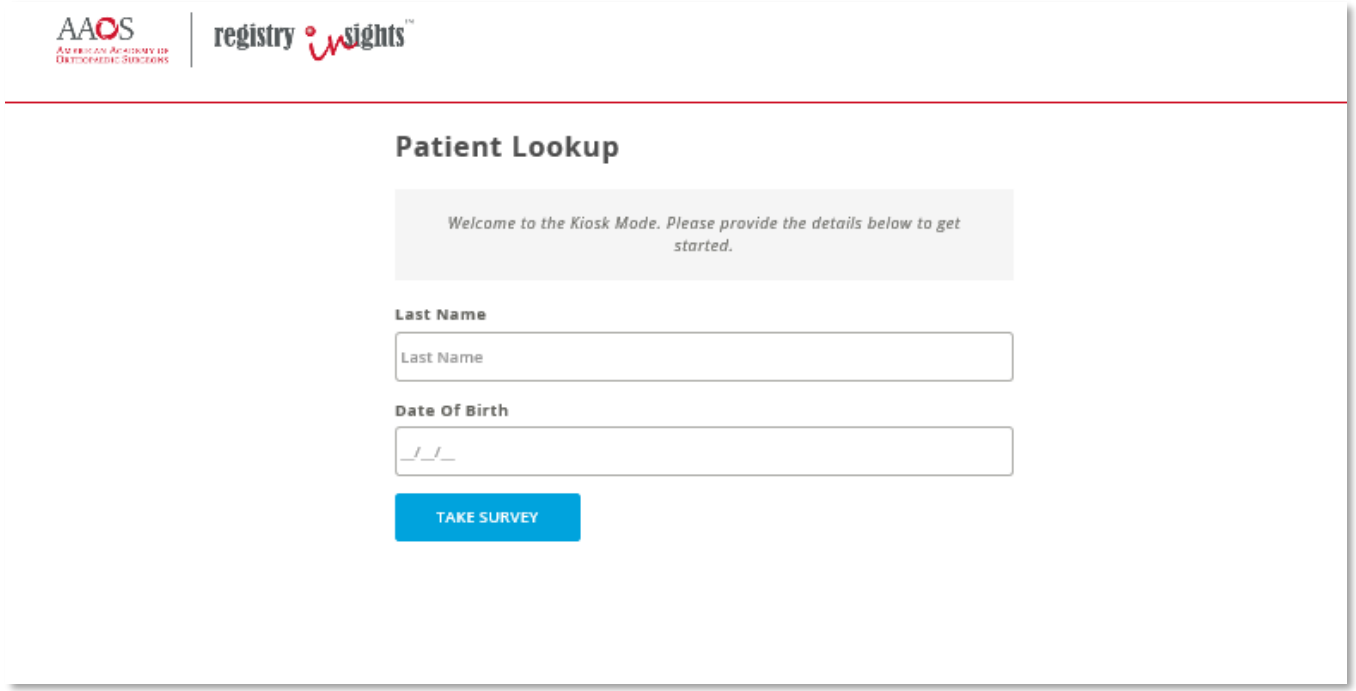
ACCESS TO PRO INSTRUMENTS | EMAILS & KIOSK MODE

Institutions can setup automatic generation of a link to be emailed by the Registry Platform to patients for PROM collection

This link takes them directly to the survey for completion and automatic upload to the registry

OR

The Kiosk Mode can be pulled up during a clinic or joints class pre-op visit for completion on computer or tablet



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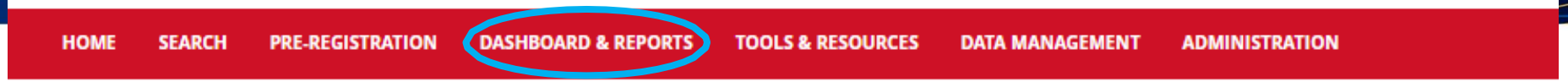
DASHBOARD AND REPORTS



HOME / REPORTS

Procedure Reports

- Count of Components by Type
- Count of Procedures by ICD-10 Procedure Codes
- Count of Procedures by CPT Procedure Codes
- Procedures With Component Information (ICD-10)
- Procedures Submitted to Shoulder Arthroplasty (ICD-10)
- Procedures Submitted to Rotator Cuff (ICD-10)
- Count of Procedures By Surgeon

Patient Reported Outcomes Reports

- Assessment Summary
- Patient Status Report
- All Patients Due For Survey Report
- Patient Compliance Report
- Assessment Overview

BCBS BLUE DISTINCTION TOOLKIT & REMINDERS

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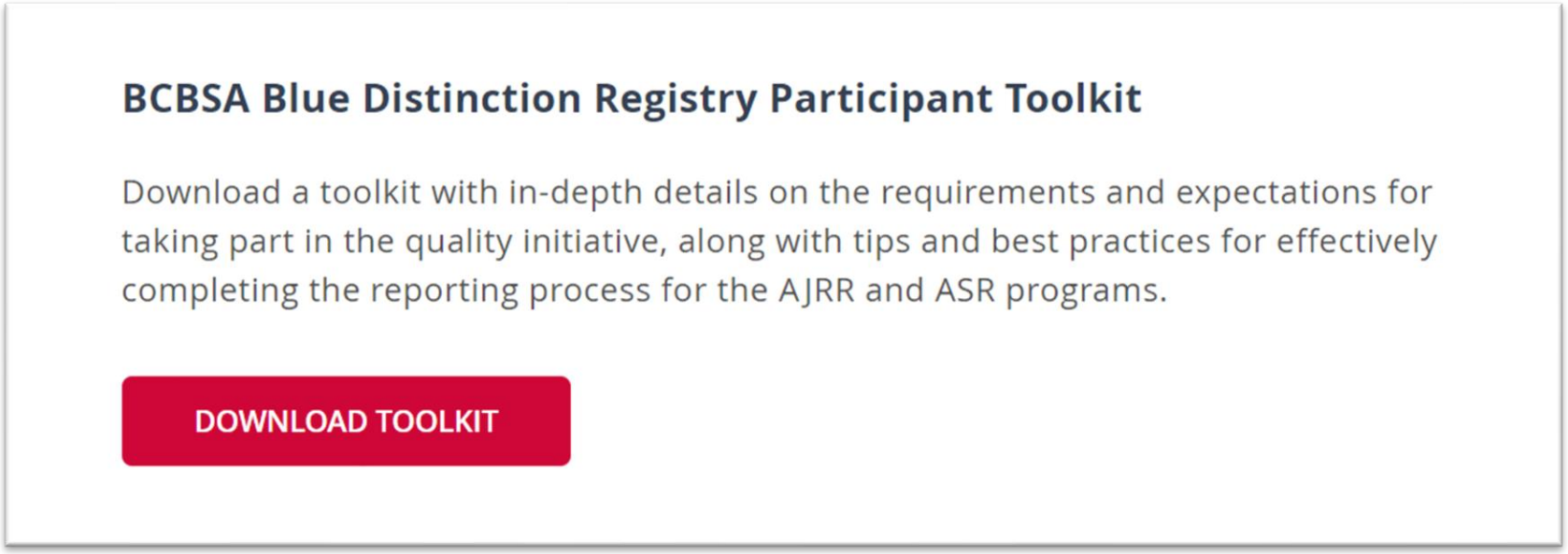
BCBS BLUE DISTINCTION TOOLKIT

https://www.aaos.org/registries/quality-collaborations/blue-distinction-specialty-care-centers/



PROGRAM OVERVIEW

The AJRR and BCBSA Collaboration

AJRR is collaborating with BCBSA to allow quality outcomes from the registry to be evaluated by BCBSA for current and prospective the **Blue Distinction Centers for Knee and Hip Replacement Program**

The registry will provide a pathway for reporting patient-aggregated, deidentified site and surgeon level data from AJRR participants, if opted in, to BCBSA on a recurring basis.

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The Blue Distinction Centers for Knee and Hip Replacement Program will evaluate acute care hospitals and ASCs that offer elective THA/TKA services for adult patients with degenerative disease.

Click Here to learn more about the program evaluation components.

PROGRAM OVERVIEW

What is the Blue Distinction Specialty Care Center Program?

Blue Distinction Specialty Care is a national designation program, awarded by local BCBS companies, recognizing health providers that demonstrate expertise in delivering quality and affordable health care to meet consumers' specialty care needs safely, effectively, and cost-efficiently.

Program Goal

To help patients find both quality and value for their specialty care needs, while providing a credible foundation on which employers may customize their employee benefits.

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PROGRAM OVERVIEW | WHY PARTICIPATE?

By creating pathways for organizations like BCBSA to seamlessly evaluate authorized, high-quality data, AJRR is advancing the utility and transparency of registry outcomes data. Together, AAOS and BCBSA are positively impacting the future of patient care.

Enhanced Reputation

The Blue Distinction Center designation is a mark of quality, indicating that a site has met rigorous standards for delivering safe, effective, and cost-efficient care for hip and knee surgeries.

Reduced Burden

AJRR will aggregate and stratify the required BCBSA quality measures on behalf of participating sites.

This streamlines the process for sites for submitting measures for each race and ethnicity breakdown across the 5 specialty distinction measures.

PERFORMANCE MEASURES OVERVIEW

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PERFORMANCE MEASURES

How will sites submit?

AJRR will provide BCBSA with aggregate, patient deidentified performance metric reporting at the site and surgeon level for participating sites that have consented.

*Note: Data will be reported by Race and Ethnicity and overall patient outcomes for each measure listed.

What measures are being reported for participation?

- ☑ 90-day unplanned all cause inpatient readmission (hospitals) / admissions (ASCS)
- ☑ 90-day major complications composite
- ☑ 90-day postoperative mortality rate

Preoperative and postoperative functional/health assessment status inpatient measures, for hospitals:

- ☑ THKR-IP-4a – Preoperative Functional/Health Assessment Status – Hip and Knee Overall
- ☑ THKR-IP-5a – 3 month postoperative Functional/Health Assessment Status – Hip and Knee Overall

Preoperative and postoperative functional/health assessment status inpatient measures, for ASCs:

- ☑ THKR-OP-4a – Preoperative Functional/Health Assessment Status – Hip and Knee Overall
- ☑ THKR-OP-5a – 3 month postoperative Functional/Health Assessment Status – Hip and Knee Overall

PERFORMANCE MEASURES | OVERVIEW

Measure Name	Numerator	Denominator*	Denominator Exlcusions
90-Day Mortality Rate	Patients with a death date performed within 90 days of the index discharge date	Patients undergoing a total hip or total knee replacement	Procedures indicating device complication, fracture, or certain malignant neoplasms
Unplanned 90-Day Readmission Rate	Patients with an unplanned readmission within 90 days of the index procedure discharge date	Patients undergoing a total hip or total knee replacement	Procedures indicating device complication, fracture, or certain malignant neoplasms
90-day Composite Complication Rate	Patients with an unplanned readmission within 90 days of the index procedure discharge date AND at least one code submitting in the post-op file from the composite complications code list	Patients undergoing a total hip or total knee replacement	Procedures indicating device complication, fracture, or certain malignant neoplasms
Pre-operative Functional/Health Status Assessment	Number of patients who completed the general health and joint specific functional status assessments within -90-0 days prior to surgery.	Patients undergoing total hip or total knee replacement.	Length of stay (discharge - admin dates) greater than 120 days; Procedures indicating device complication, fracture, or certain malignant neoplasms
3-Month Post-operative Functional/Health Status Assessment	Number of patients who completed the general health and joint specific functional status assessments within 30-150 days after surgery.	Patients undergoing total hip or total knee replacement.	Length of stay (discharge - admin dates) greater than 120 days; Patient mortality before day 150 post-op; Procedures indicating device complication, fracture, or certain malignant neoplasms

*Denominator includes all patients receiving a Total Hip or Total Knee replacement

HOW TO GET STARTED

HOW TO GET STARTED

If your site is already participating in the registry....

1

Execute Consent

- Work with registry engagement staff to complete and submit the consent form

2

Review Measure Specifications

- Review the detailed measure specifications:
  - Measure definitions
  - Numerator / Denominator
  - Procedure Inclusion
  - Denominator Exclusion

3

Validate Your Site's Submission

- Are your submissions current?
- Are you submitting the appropriate data elements?

4

Monitor Performance*

- Participants can leverage a performance/detail data report and dashboard visuals for the measures via the Registry Insight's Portal to validate measure calculations and update data as needed

**Performance data report available late May 2024; Dashboard updates available late June 2024*

TIMELINE | PARTICIPATION

Beginning in June 2024, submit performance metrics via the BCBS survey tool or the AAOS Registry Program 2025 Designation Evaluation.

To be included in the first reporting cycle, AJRR participating sites must provide consent on or before **June 18, 2024**

To be included in the ongoing quarterly submission for the current distinction period, sites must have applied by June 18, 2024 to be included in the BCBSA Appeals period

Note: AAOS registry participation will be the sole pathway for performance measure submission starting with all future review cycles.

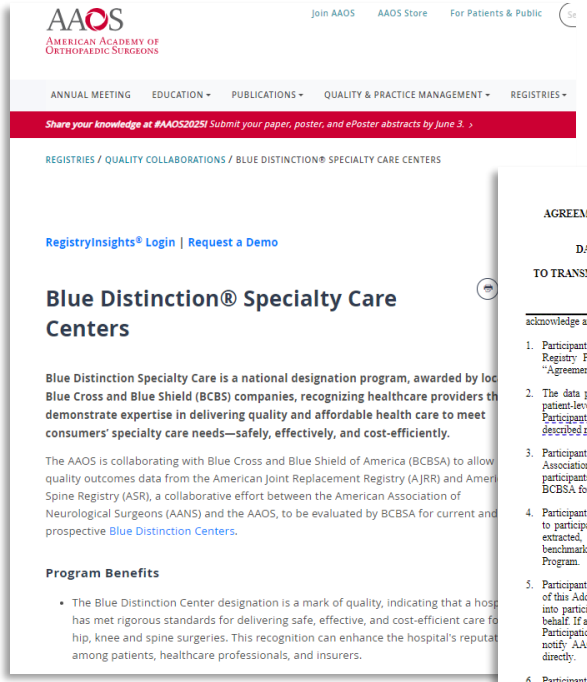
REQUIRED FOR DATA SUBMISSION

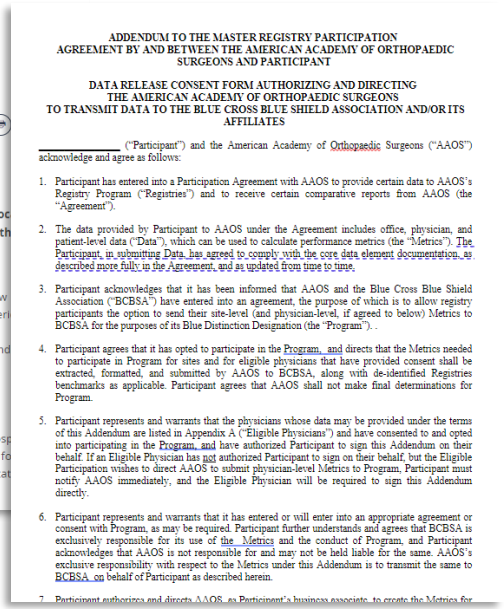
- Data collected from January 2023 through December 2023
- Data from the following AJRR file layouts:
  - Procedure
  - PostOp
  - PROMs

PROGRAM RESOURCES

PROGRAM RESOURCES

CLICK HERE *to find program information, tools & resources*





ADDENDUM TO THE MASTER REGISTRY PARTICIPATION AGREEMENT BY AND BETWEEN THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS AND PARTICIPANT

DATA RELEASE CONSENT FORM AUTHORIZING AND DIRECTING THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS TO TRANSMIT DATA TO THE BLUE CROSS BLUE SHIELD ASSOCIATION AND/OR ITS AFFILIATES

_____ ("Participant") and the American Academy of Orthopaedic Surgeons ("AAOS") acknowledge and agree as follows:

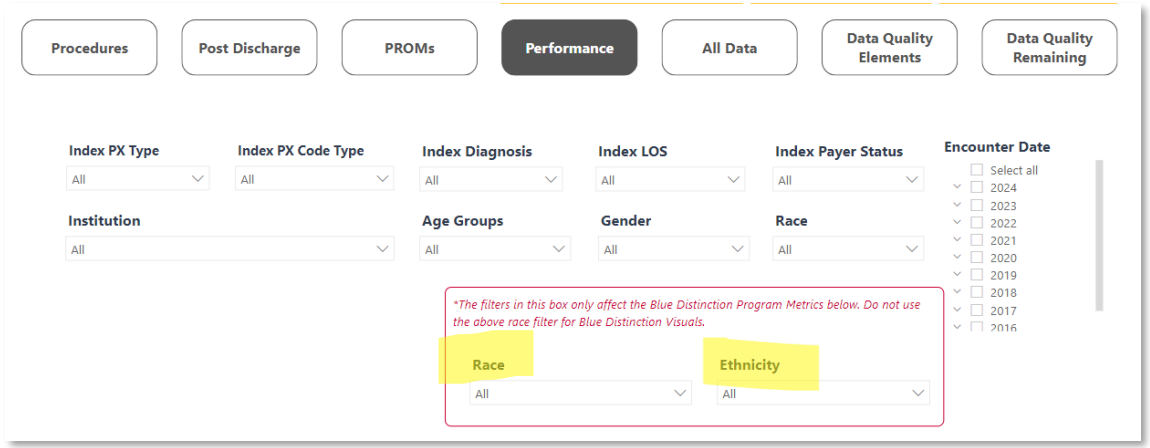
1. Participant has entered into a Participation Agreement with AAOS to provide certain data to AAOS's Registry Program ("Registries") and to receive certain comparative reports from AAOS (the "Agreement").
2. The data provided by Participant to AAOS under the Agreement includes office, physician, and patient-level data ("Data"), which can be used to calculate performance metrics (the "Metrics"). The Participant, in submitting Data, has agreed to comply with the core data element documentation, as described more fully in the Agreement, and as updated from time to time.
3. Participant acknowledges that it has been informed that AAOS and the Blue Cross Blue Shield Association ("BCBSA") have entered into an agreement, the purpose of which is to allow registry participants the option to send their site-level (and physician-level, if agreed to below) Metrics to BCBSA for the purposes of its Blue Distinction Designation (the "Program").
4. Participant agrees that it has opted to participate in the Program, and directs that the Metrics needed to participate in Program for sites and for eligible physicians that have provided consent shall be extracted, formatted, and submitted by AAOS to BCBSA, along with de-identified Registries benchmarks as applicable. Participant agrees that AAOS shall not make final determinations for Program.
5. Participant represents and warrants that the physicians whose data may be provided under the terms of this Addendum are listed in Appendix A ("Eligible Physicians") and have consented to and opted into participating in the Program, and have authorized Participant to sign this Addendum on their behalf. If an Eligible Physician has not authorized Participant to sign on their behalf, but the Eligible Participation wishes to direct AAOS to submit physician-level Metrics to Program, Participant must notify AAOS immediately, and the Eligible Physician will be required to sign this Addendum directly.
6. Participant represents and warrants that it has entered or will enter into an appropriate agreement or consent with Program, as may be required. Participant further understands and agrees that BCBSA is exclusively responsible for its use of the Metrics and the conduct of Program, and Participant acknowledges that AAOS is not responsible for and may not be held liable for the same. AAOS's exclusive responsibility with respect to the Metrics under this Addendum is to transmit the same to BCBSA on behalf of Participant as described herein.
7. Participant authorizes and directs AAOS, as Participant's business associate, to create the Metrics for

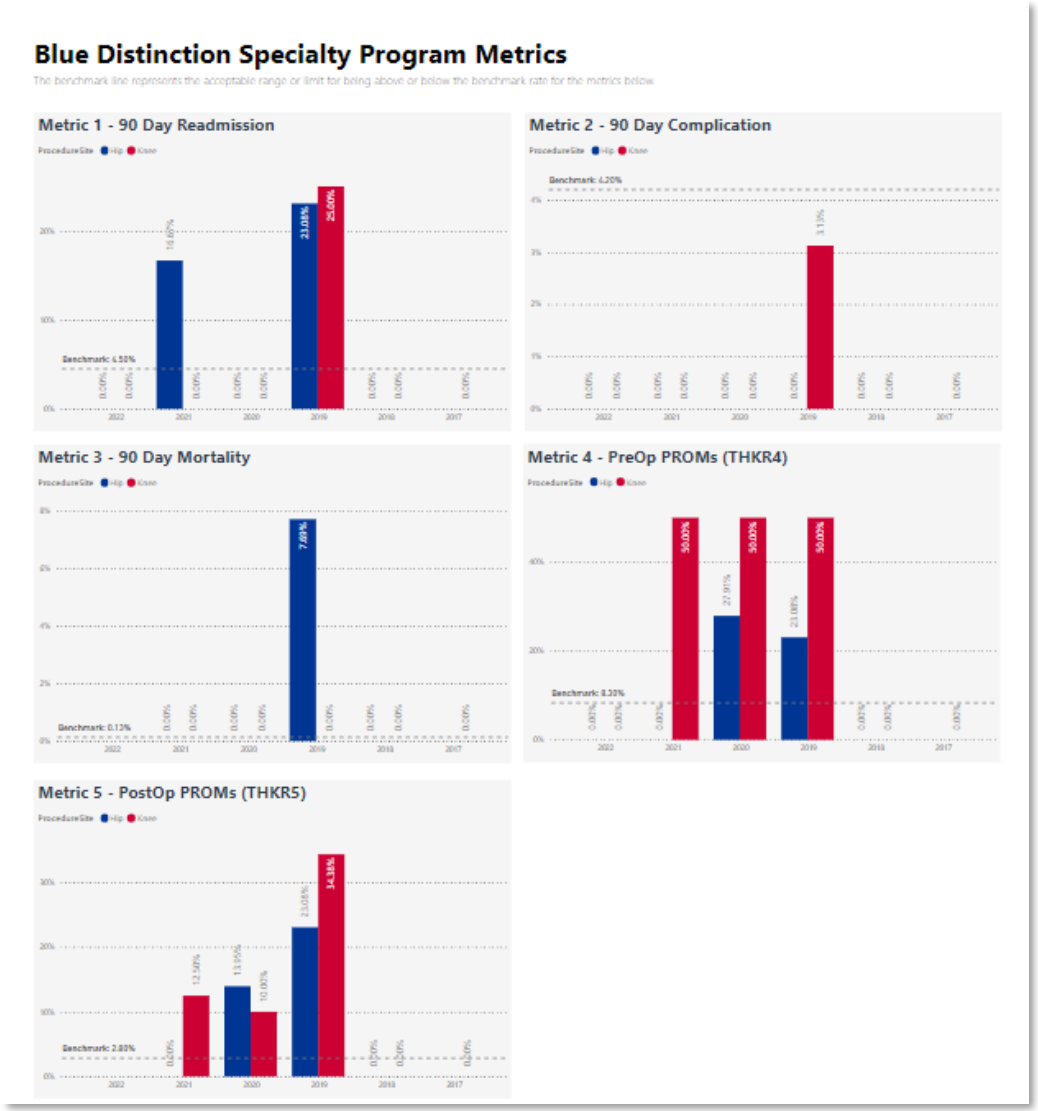
Direct Resource Links

- Blue Distinction Speciality Care Overview
- Frequently Asked Questions (FAQs)
- Program Consent Form
- Measure Specifications

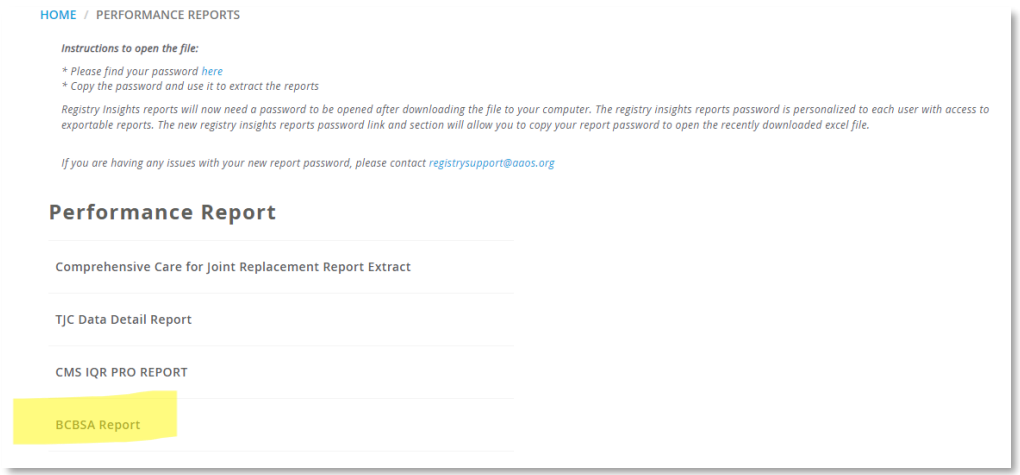
Participant Toolkit & Report Guide Coming Soon

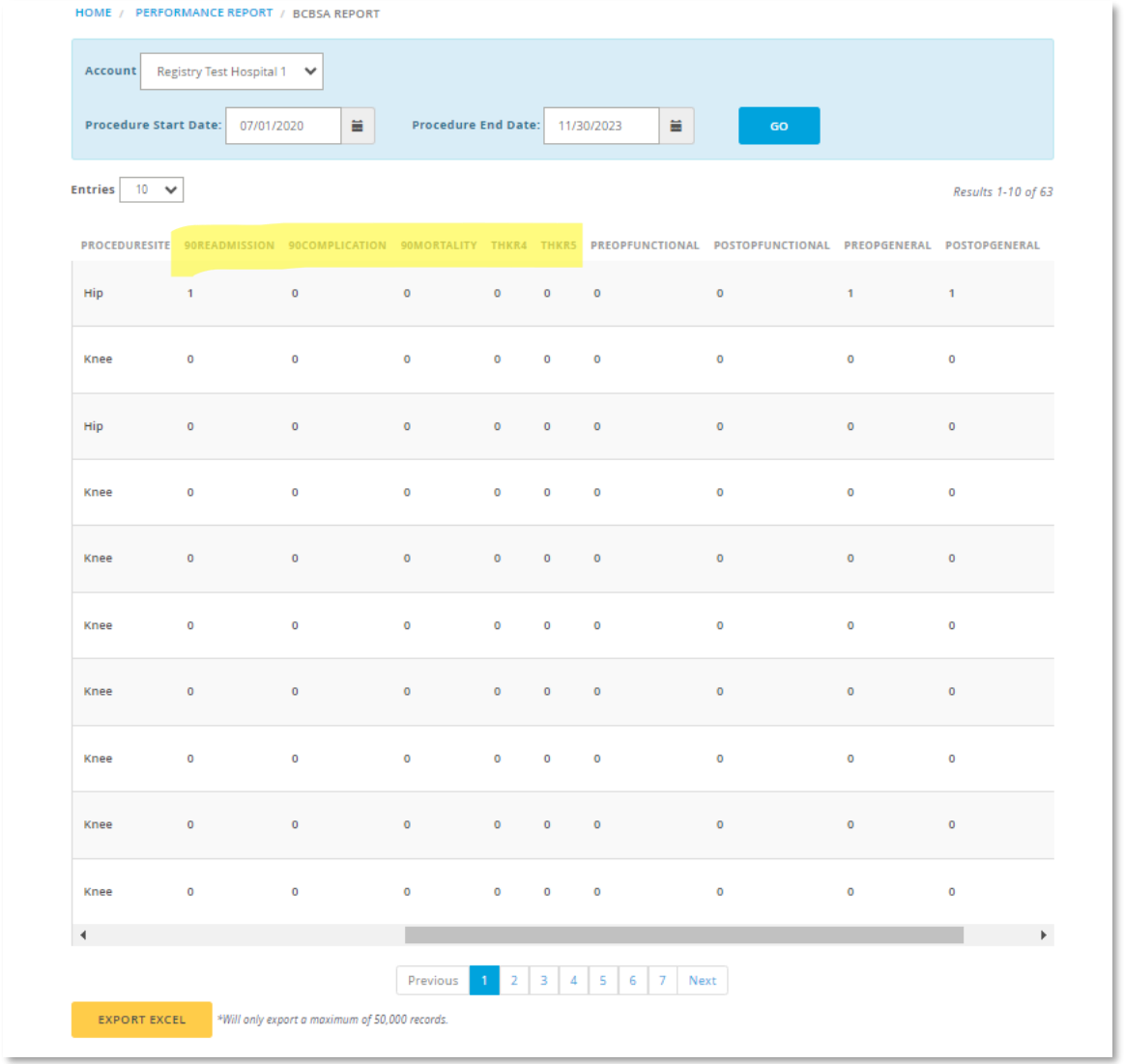
PROGRAM RESOURCES | REGISTRYINSIGHTS TRACKING





PROGRAM RESOURCES | REGISTRYINSIGHTS TRACKING





AAOS
American Academy of Orthopaedic Surgeons

AJRR AMERICAN JOINT REPLACEMENT REGISTRY