

How to Become Eligible for Aetna's Institutes of Quality Program

www.aaos.org/registries

Agenda

- **Registry Program Overview**
- Aetna Institutes of Quality (IOQ) Program
- Steps for IOQ Eligibility
 - Registry Participation
 - The Joint Commission Total Hip and Knee Replacement Advanced Certification
 - Measures and Report Card Submission
- Q&A

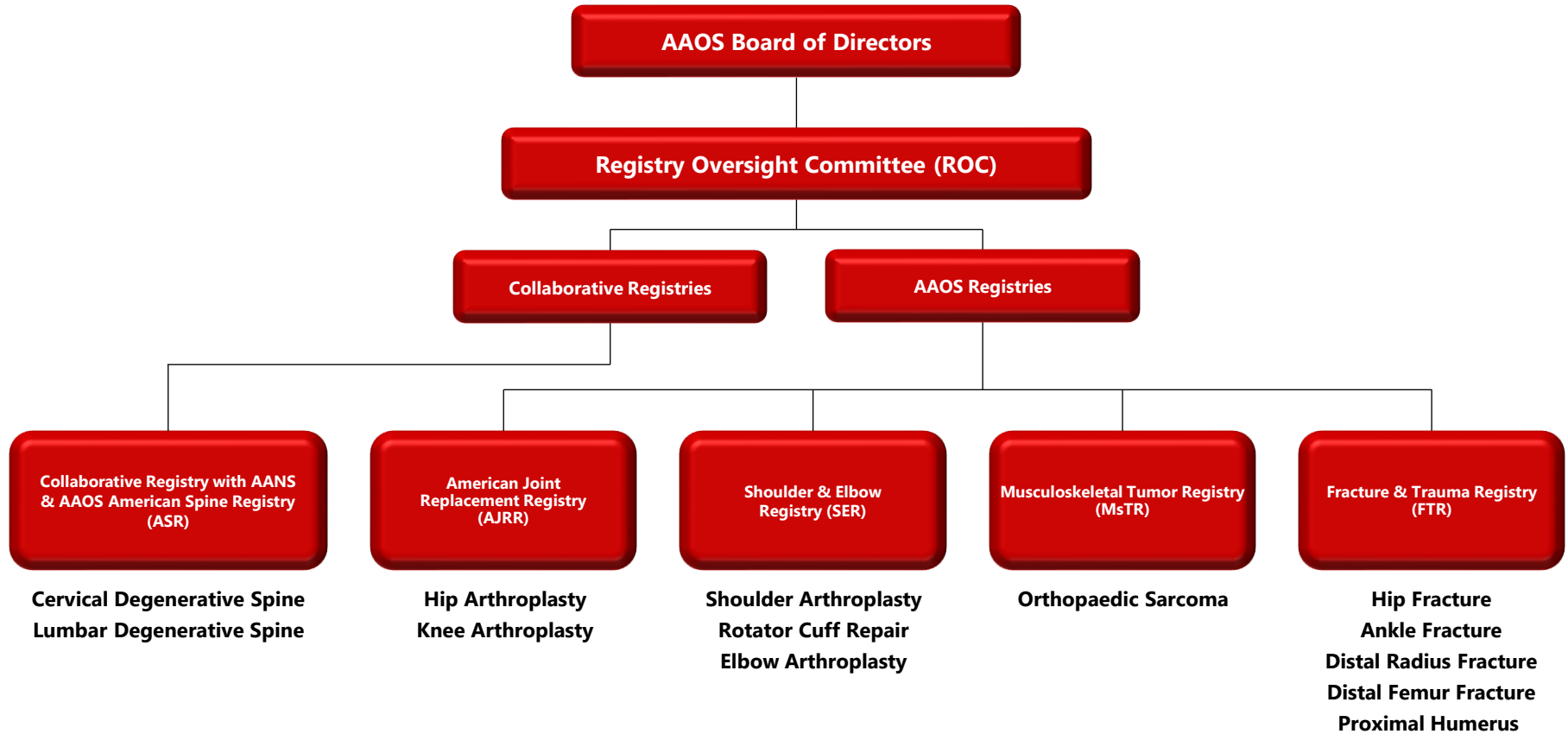
At the Core of Academy Strategy



Registry Effort Goals

- ✓ Collect unique clinical information demonstrating ***real-world practice***
- ✓ Enable ***performance measurement*** by physicians for physicians
- ✓ Facilitate national registry-driven ***quality improvement*** programs
- ✓ Support novel scientific ***research***

AAOS Family of Registries



Registry Data Collection: Core Data Elements

These *Core Data Elements* are collected across all AAOS and Collaborative Registries.

Procedure

Patient

- Name (Last, First), Date of Birth, SSN
- Diagnosis (ICD-10, CPT)
- Gender
- Race/Ethnicity
- Height + Weight/Body Mass Index
- Payer Status

Site of Service

- Name and Address (TIN/NPI)

Surgeon

- Name (NPI)

Procedure

- Type (ICD-10, CPT)
- Date of Surgery
- Implants (Manufacturer, Lot #)
- Anesthesia Type

Procedure, continued

- Length of Stay
- American Society of Anesthesiologists Score
- Charlson Comorbidity Index (CCI)

Comorbidities & Complications

- Comorbidities (ICD-10)
- COVID-19 as prior diagnosis
- Height + Weight/Body Mass Index
- Length of Stay
- American Society of Anesthesiologists Score
- Charlson Comorbidity Index (CCI)
- Operative and Post-operative Complications



American Joint Replacement Registry



AJRR Data Element Overview

In addition to the Core Data Elements, AJRR will collect the following:

Procedure

Procedure

- Type (ICD-9/10, CPT)
- Surgical Approach
- Surgical Technique
- Laterality
- Tourniquet Use

Comorbidities and Complications

- Comorbidities (ICD-9/10)
- CJR Risk Variables

Two Modules Available

- Hip Arthroplasty
- Knee Arthroplasty

Patient-reported Outcomes

Recommended:

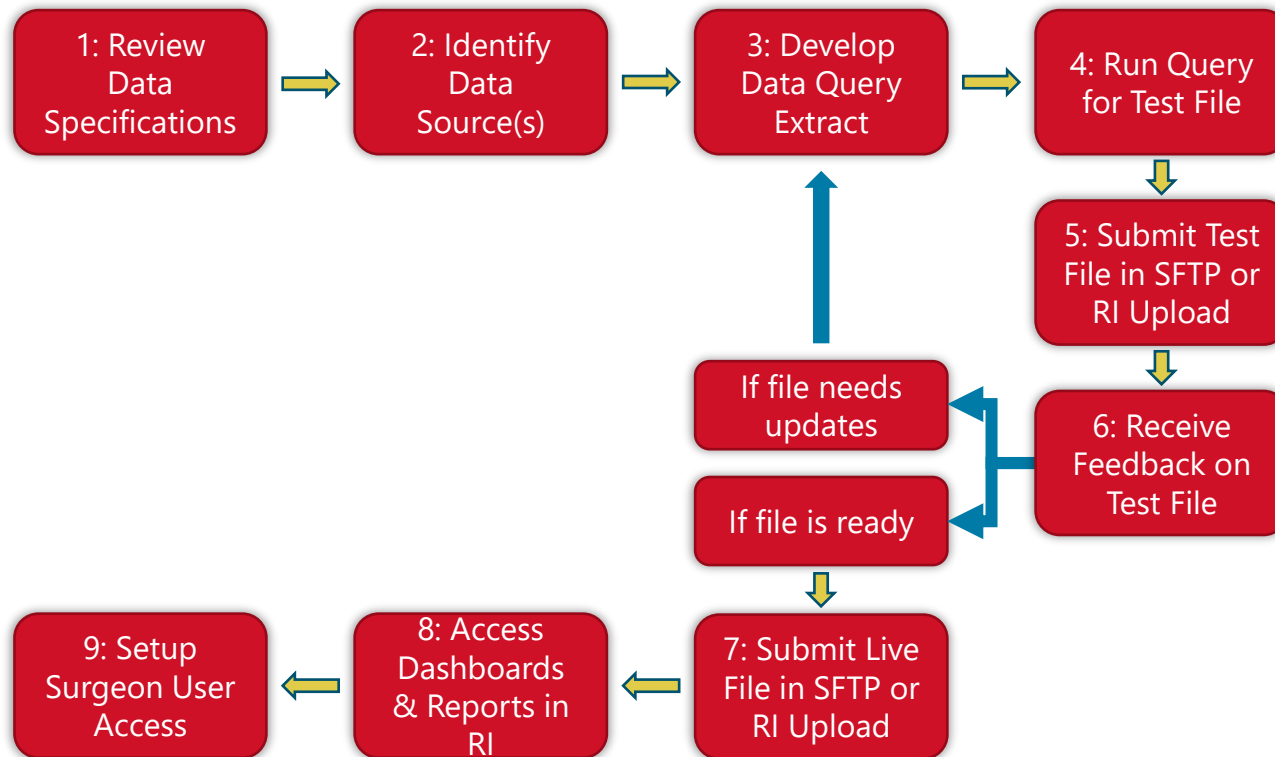
- PROMIS-10 Global
- VR-12
- HOOS Jr. /KOOS, Jr.

Also Accepted:

- SF-36 v1
- HOOS/KOOS
- Oxford Hip and Knee Scores
- Knee Society Knee Scoring System
- Harris Hip Score
- WOMAC (Modified via HOOS and KOOS)
- SF-12, EQ-5D, WOMAC (only accepting final scores)
- PROMIS-29
- PROMIS Anxiety
- PROMIS Depression
- PROMIS Pain Interference

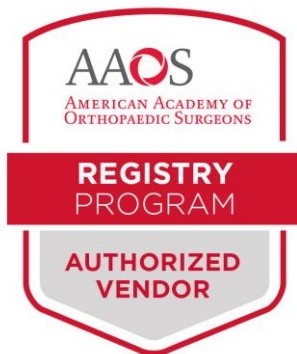
This page is a summary of the AJRR data elements and is not all inclusive.

Registry Data Submission Process



*Recently submitted files can always be reviewed for rejections or flags in RegistryInsights® (RI)

**Data should be submitted *at least quarterly* with best practice being *at least monthly*



Decrease Data Collection Burden

- AAOS has partnered with technology vendors to facilitate the data submission process
- Re-use data that already exists in medical record, practice management and PRO systems
- Direct data submission and management can be handled by a technology provider with sites able to fix rejected files

Three Ways to Access Data



Custom
Reports

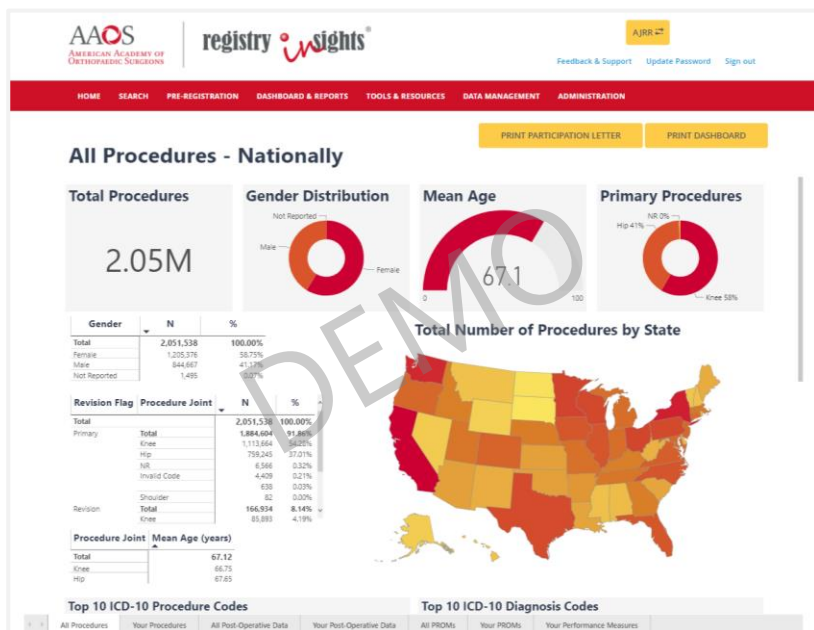


RegistryInsights®
Dashboards



Registry Analytics
Institute®

RegistryInsights® Dashboards



On-demand practice specific dashboards



Compare your practice to national performance benchmarks



Unlimited surgeon accounts with access to system, site, and surgeon level dashboards



Why Do Sites Participate?



Compare your practice to **national performance benchmarks**



Access to on-demand practice specific **reports and dashboards**



Qualify for **The Joint Commission** Advanced Certifications (THKR & ACSS)



Attain certification credits for **ABOS MOC & ABNS CC**



Facilitate site, practice-specific, **payer-incentivized performance improvement** programs such as Aetna IOQ & Blue Distinction



Use for reporting to **quality improvement programs** such as the QPP Merit-based Incentive Payment System (MIPS)



Inform orthopaedic practice & contribute to **orthopaedic advocacy**



Improve the **value of care** delivered to Patients

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Aetna IOQ Overview

- Recognizes health care sites that demonstrate high levels of quality
- Provides qualitative feedback on the institution level to Aetna so sites around the U.S. can report on the quality of care they deliver
- Assists with internal quality tracking and monitoring
- AJRR developed metrics based on existing AJRR data elements

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AJRR Participation

The Joint Commission (TJC) provides the Aetna IOQ quality review for Aetna's total hip and knee replacement (THKR) surgery program

AJRR participation is a requirement for TJC THKR Advanced Certification



Steps to a Successful Start

Contract & Welcome

- Execute contract
- Schedule a welcome call to identify your site's key contacts and roles with the Registry

Data Collection & File Build

- Walk through file development and file build
- File submission (SFTP/HTTPS) account creation

Test File Submission

- Two rounds of test file submissions

Live File Submission

- Final production set up and first live data submission

RegistryInsights® Walkthrough

- Once data has been submitted, sites will have a walkthrough with staff to review dashboards, reports, PROMs, and other platform functionality

- ❖ Aetna IOQ measures require submission of procedural and post-operative files for calculation
- ❖ TJC measures are calculated from procedure and PROMs case data



Advanced Total Hip and Knee Replacement Certification

Loren Salter
Associate Director, Hospital Certification
The Joint Commission

May 23rd, 2022

The Gold Standard in Private Accreditation

For health care accreditation, the knowledge and experience of The Joint Commission is unmatched. Our commitment to excellence is applied with equal passion and rigor to our Orthopedic Certification program.



Advanced Total Hip & Knee Replacement (THKR)

The Joint Commission offers this certification in collaboration with the American Academy of Orthopedic Surgeons (AAOS).



Advanced Total Hip and Knee Replacement Certification

Advanced Certification for Total Hip and Total Knee Replacement (THKR)

The Advanced Certification program helps organizations develop consistent communication and collaboration among all health care providers involved in the care of the patient — from the pre-surgical orthopedic consultation with their surgeon to the intraoperative, hospitalization or ASC admission, rehabilitation activities and then the follow-up visit with the orthopedic surgeon.

Key Requirements

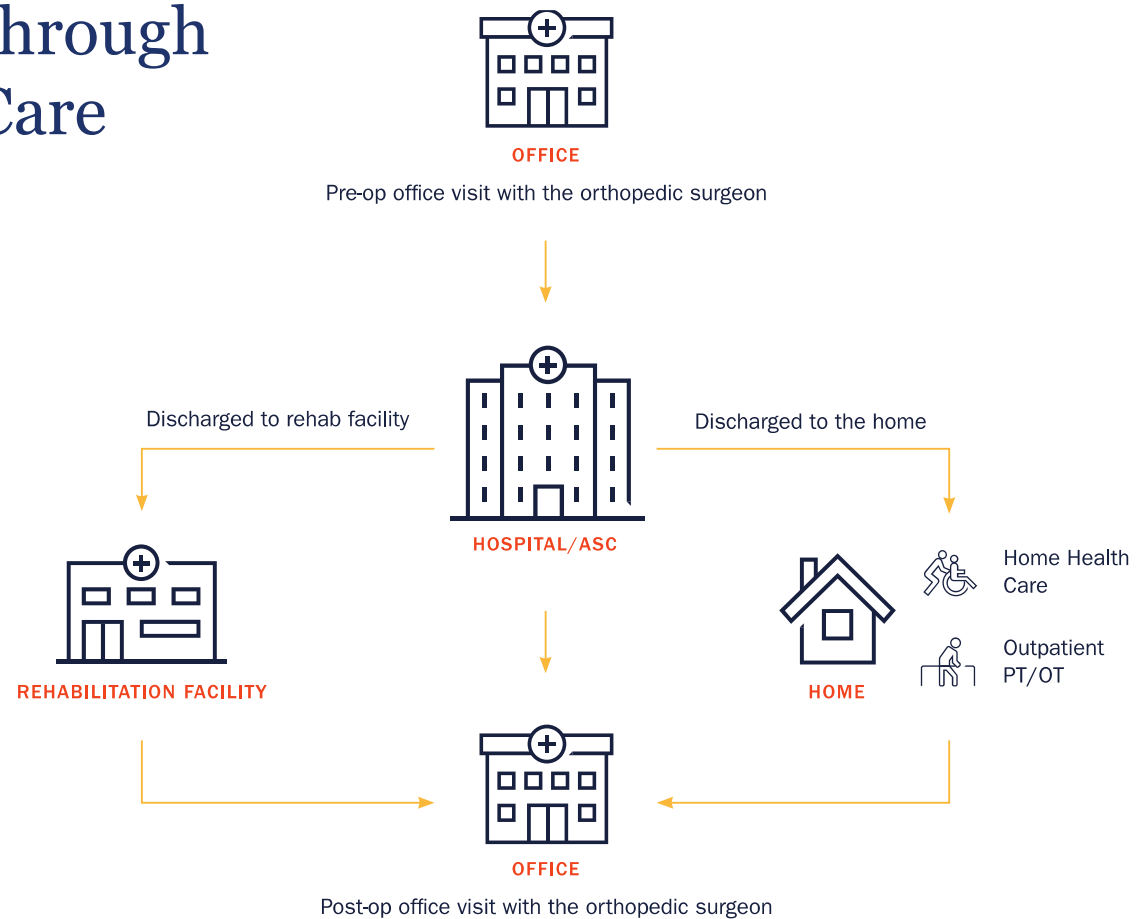
- Patient-centered care from consultation through follow-up
- Site of procedure (hospital inpatient or outpatient, or ambulatory care)
- Instructions and advice provided to patients and caregivers
- Staff proficiency in all patient settings and transition of care
- Shared decision-making with patient throughout continuum of care
- Collaboration among the clinical team
- Ongoing improvement processes



Advanced Total Hip and Knee Replacement Certification

Communications Through the Continuum of Care

- Communication and collaboration among intraoperative and PACU staff
- Patient education and discharge planning and physical/occupational therapy



Orthopedic Systems of Care

What is Orthopedic Certification?



Our orthopedic certification provides structure for programs to improve their patient outcomes and reduce patient risk.

Certification shows an organization's commitment to continuous performance improvement. Orthopedic Certification options are evaluated under the Disease-Specific Care Certification manual and have three components:

- Standards
- Clinical Practice Guides
- Performance Measurement

This structure provides a framework for consistency of care to improve patient outcomes.

Disease Specific Care Certification Standards

A hospital is asked to demonstrate elements of 6 categories of standards

- DSPR: Program Management
- DSDF: Delivering / Facilitating Care
- DSSE: Supporting Self-Management
- DSCT: Clinical Information Management
- DSPM: Performance Measurement
- CPR: Certification Participation Requirements

Requirements specific to Total Hip and Total Knee Replacement

This is the framework for self-assessment

Disease Specific Care Certification Standards

Standards, Elements of Performance, and Scoring

Standard DSPR.1

The program defines its leadership roles.

Elements of Performance for DSPR.1

1. The program identifies members of its leadership team.

Requirement Specific to Total Hip and Total Knee Replacement

- a. The organization identifies a medical director for the total hip and total knee program.

Note: *The medical director for the program must have experience in the care of patients undergoing total hip and total knee replacements in order to provide clinical guidance and administrative leadership to the program.*

2. © The program defines the accountability of its leader(s).
3. The program leader(s) guides the program in meeting the mission, goals, and objectives.

Requirement Specific to Total Hip and Total Knee Replacement

- a. The program leader(s) collaborates with community health care settings and providers to support the continuum of care and patient outcomes.
-

Clinical Practice Guidelines

Clinical care is provided based on industry guidelines / evidence-based practice

Hospitals will be expected to demonstrate their application of and compliance with clinical practice guidelines, which may include the guidelines and recommendations published by *the American Academy of Orthopaedic Surgeons* relevant to the patient being treated

Guidelines to cover the entire continuum of care

- Pre-Operative Evaluation/Optimization
- Post-Operative Care
- Anesthesia (Regional)
- DVT Prevention
- Early Mobilization
- Pain Management
- Recommendations for Rehabilitation

Performance Measurement

Centers seeking certification are required to collect and submit data for a specified measure set

- THKR 1 Regional Anesthesia
- THKR 2 Postoperative Ambulation on the day of Surgery
- THKR 3 Discharged to Home
- THKR 4 Preoperative Functional/Health Status Assessment
- THKR 5 Postoperative Functional/Health Status Assessment

Most recent 4 months of collected data should be reported to The Joint Commission prior to the on-site review

Organizations will collect monthly data on measures and report the data on a quarterly basis on *The Joint Commission Connect* extranet site

Performance Improvement

5 questions regarding improvement planning

- Scope of Performance Improvement Activities
- Composition of Disease Management Team
- Performance Improvement Goals and Objectives
- Activities that are underway to achieve Goals and Objectives
- Process by which data and analysis is shared across the organization
- Where the Performance Improvement plan fits in the context of the larger organization-wide plan
- Identify the individual by title that has ultimate responsibility for the organization wide performance improvement plan

Benefits of Orthopedic Certification

Achieving certification through The Joint Commission sets your program above the rest.

- Provide organizations with a pathway to excellence
- Provide a framework to improve patient outcomes
- Reduce variation in care delivery
- Establish a consistent approach to care, reducing the risk of error
- Demonstrate commitment to a higher standard of clinical service
- Organize teams across the continuum of care
- Provide a competitive edge in the marketplace
- Enhance staff recruitment and development

The Steps to Apply Certification Roadmap

Connect with your Associate Director

- Contact certification@jointcommission.org

Pre-Application

- Review Standards in E-dition® and analyze gaps
- Review Standardized Performance Measures
- Identify Clinical Practice Guidelines
- Complete Performance Improvement Plan
- Establish a Ready Date

Complete Application on Connect® portal

- No Performance Measure data required

Prepare for Onsite Review

- Use the Review Process Guide on Connect® portal
- Upload most recent 4 months of measure data

Onsite Review

- 2 Day x 1 Reviewer

Joint Commission Reviewers

Provide best-in-class expertise and create a collaborative experience for our certifying organizations



Our reviewers are subject-matter experts in the program being reviewed and provide enormous value for your organization:



-  Provide leading practices to improve/grow the programs they are reviewing
-  Conduct educationally focused reviews
-  Lead a collaborative engagement that helps to increase staff awareness and education
-  Inspire staff to improve the quality of patient care

Why Work with the Joint Commission

Your Source for Orthopedic Certification



Looking to Elevate and Strengthen Your Orthopedic Program?

The Joint Commission can help. With a comprehensive suite of offerings to choose from — backed by the expertise and insight of our robust orthopedic care experience — you will find the guidance, knowledge and framework you need to achieve improved outcomes and continued success.

Reach out today

For more information on Joint Commission orthopedic certification, please contact us at certification@jointcommission.org today.

The Joint Commission Disclaimer

- These slides are current as of May 23rd, 2022 and are only meant to be cue points, which were expounded upon verbally by the original presenter and are not meant to be comprehensive statements of standards interpretation or represent all the content of the presentation. Thus, care should be exercised in interpreting Joint Commission requirements based solely on the content of these slides.
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Aetna IOQ Measures

In-Hospital Mortality

Definition (Numerator): Percentage of cases where patients expired on or before discharge date.

Population (Denominator): All elective total hip or total knee arthroplasties, respectively. All cases with a diagnosis of a femoral neck fracture (FNF) were removed from the data set.

90-Day Readmission

Definition (Numerator): Percentage of cases where patients were initially readmitted to the hospital within 90 days of receiving hip or knee arthroplasty.

Population (Denominator): All elective total hip or total knee arthroplasties when postoperative complications data has been submitted. All cases with a diagnosis of a femoral neck fracture (FNF) were removed from the data set.

Aetna IOQ Measures

Surgical Site Infection (SSI)

Definition (Numerator): Percentage of cases where the reported postoperative complication diagnosis code (up to 30 fields) indicates infection for the initial postoperative encounter, as defined below using mapped ICD-10-CM codes¹.

Population (Denominator): All elective total hip or total knee arthroplasties when postoperative complications data has been submitted. All cases with a diagnosis of a femoral neck fracture (FNF) were removed from the data set.

90-Day Mortality

Definition (Numerator): Percentage of cases where patients expired on or after procedure date, and within 90 days of procedure date.

Population (Denominator): All AJRR elective total hip or total knee arthroplasties, for the performance period. All cases with a diagnosis of a femoral neck fracture (FNF) were removed from the data set.

Next Steps

- Sign Data Sharing Agreement with AAOS to submit measures to Aetna
- Submit data for applicable measures
 - Minimum requirements include submission of THA/TKA procedures as well as postoperative case data
 - Required data elements
 - Procedure Date
 - Discharge Date
 - Patient Death Date (when applicable)
 - Primary procedure code
 - Primary diagnosis code
 - Readmission Date
 - Readmission diagnosis

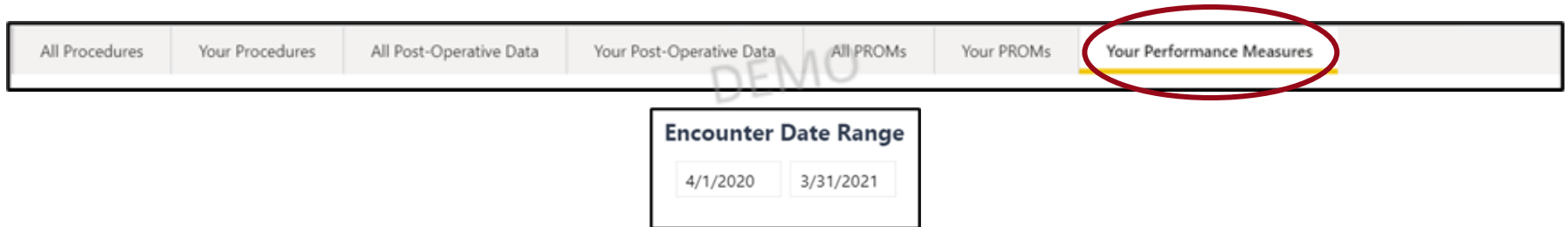
Accessing Measure Data on RegistryInsights® Dashboard

- Sites can view real-time performance in RegistryInsights® dashboards for all IOQ metrics
 - Access RegistryInsights® platform and select "AJRR"
 - Select "Institution Dashboard" from header menu tabs



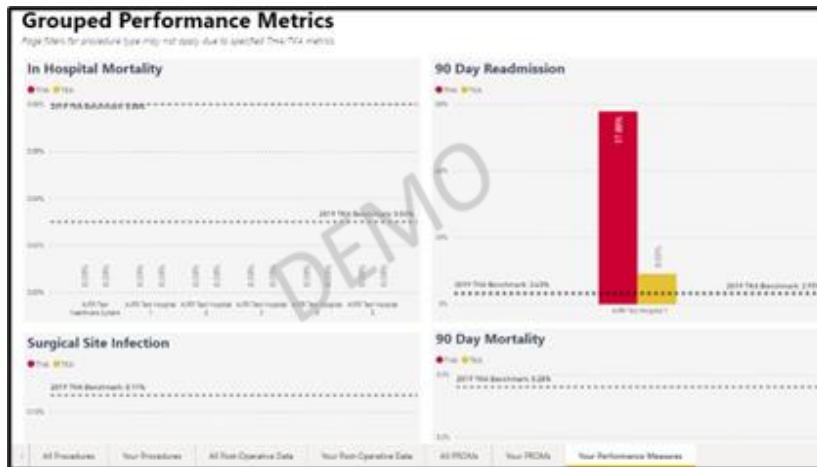
Accessing Measure Data on RegistryInsights® Dashboard

- Select “Your Performance Measures” from footer menu tabs and set the encounter date range



- Scroll down to “Grouped Performance Metrics” to view IOQ Metrics

Accessing Measure Data on RegistryInsights® Dashboard



- Dashboard visuals and an excel report can be exported for internal review

Institution Grouped Performance Metrics Compared to AJRR Benchmark				
Institution	Institution ID	Institution State	Total Hip Arthroplasty Benchmark Status for In-Hospital Mortality	Total Hip Arthroplasty Benchmark Status for 90 Day Readmission
AJRR Test Healthcare System	1040823		Statistically significantly lower than national rate	Insufficient data to calculate
AJRR Test Hospital 1	1040824	IL	No statistically significant difference from national rate	Statistically significantly higher than national rate

Report Card Submission

- Once all required data is submitted, AAOS staff seeks approval from the institution
 - Approved report summary sent to Aetna for IOQ designation review
- Only one quarterly report is required per 3-year cycle for IOQ designation
- Sites will receive a letter from Aetna with their IOQ designation decision



Report Card Example

Institution Name	Institution Account ID	THA Metric	AJRR Benchmark	Benchmark Status
Institution Name	1234567	Benchmark Status for In-Hospital Mortality	0.137	Not Significantly Different from National Rate
		Benchmark Status for 90-Day Readmission	3.973	Not Significantly Different from National Rate
		Benchmark Status for Surgical Site Infection	0.102	Statistically Significantly Higher than National Rate
		Benchmark Status for 90-Day Mortality	0.441	Statistically Significantly Lower than National Rate
		TKA Metric	AJRR Benchmark	Benchmark Status
		Benchmark Status for In-Hospital Mortality	0.023	Statistically Significantly Higher than National Rate
		Benchmark Status for 90-Day Readmission	3.452	Statistically Significantly Lower than National Rate
		Benchmark Status for Surgical Site Infection	0.090	Not Significantly Different from National Rate
Benchmark Status for 90-Day Mortality	0.101	Not Significantly Different from National Rate		

Data Source: AJRR Q2 2020-Q1 2021 (submitted by end of Q2 2021)

Contact the AAOS Registry Program

General: RegistryInfo@aaos.org

Technical Support: RegistrySupport@aaos.org

Contracts, Invoicing, & Onboarding: RegistryEngagement@aaos.org

Custom Analytics: RegistryAnalytics@aaos.org

Registry Analytics Institute: RegistryAnalyticsInstitute@aaos.org

Phone: (847) 292-0530

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

Improving orthopaedic
care through **data.**

Questions?

RegistryInfo@aaos.org

www.aaos.org/registries