American Joint Replacement Registry’s Orthopaedic Quality Resource Center a CMS approved Qualified Clinical Data Registry (QCDR)
American Joint Replacement Registry’s Orthopaedic Quality Resource Center

The AJRR Orthopaedic Quality Resource Center in collaboration with CECity, is approved by the Centers for Medicare & Medicaid Services (CMS) as a Qualified Clinical Data Registry (QCDR). A QCDR is a registry comprised of PQRS and/or non PQRS-approved measures which qualifies as a CMS-approved reporting tool for PQRS.
What is a Qualified Clinical Data Registry (QCDR)?

- New in 2014, the QCDR method provides a new standard to satisfy PQRS requirements.
- A QCDR is a CMS-approved entity (such as a registry, certification board, collaborative, etc.) that collects medical and/or clinical data for the purpose of patient and disease tracking to foster improvement in the quality of care furnished to patients.
- The data submitted to CMS via a QCDR covers quality measures across multiple payers and is not limited to Medicare beneficiaries.
Qualified Clinical Data Registry (QCDR) Requirements

- At least 9 measures
- Measures must cross at least 3 National Quality Strategy domains including:
  - Communication and Care Coordination, Community/Population Health, Effective Clinical Care, Efficiency and Cost Reduction, Patient Safety and Person and Caregiver-Centered Experience
- Contain at least 1 outcome measure
- Is not limited to measures within PQRS, and may include up to 20 non-PQRS measures
- May include additional measures that are PQRS measures, in addition to the 20 non-PQRS measures

Note: This QCDR has no non-PQRS measures
What is at Risk for 2014?

- **PQRS Incentives/Penalties**
  - PQRS carries an automatic 2% penalty for non-participation, and a 0.5% bonus for those who successfully report PQRS measures

- **Value Based Modifier (VBM) Incentives/Penalties**
  - Budget Neutral Program-Based Upon a Cost and Quality Ratio
  - The VBM applies to providers who are part of a Tax ID Number (TIN) with 10+ providers, and carries an automatic, additive, 2% penalty for non-participation in the PQRS program.
  - Practices of 10-99: the VBM also carries up to a 2% incentive, based on a cost/quality ratio
  - Practices of 100+: the VBM carries a -2 - +2% payment adjustment (penalty or bonus) based on a cost/quality ratio
### 2014 and 2015 Proposed Penalties & Incentives: PQRS & VBM

<table>
<thead>
<tr>
<th>Practice Size (Based on # of providers in Tax ID Number (TIN))</th>
<th>VBM</th>
<th>PQRS</th>
<th>% Medicare Reimbursements At Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-9</td>
<td>0-4% Bonus</td>
<td>2% Penalty</td>
<td>6%</td>
</tr>
<tr>
<td>10-99</td>
<td>-4/+4% Incentive/Penalty</td>
<td>2% Penalty</td>
<td>10%</td>
</tr>
<tr>
<td>100+</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Why use the AJRR Orthopaedic Quality Resource Center?

• Access a tool to support Quality Improvement for measures specifically chosen for Orthopaedic practices specializing in total knee replacement

• Use measure data to submit to CMS to satisfy PQRS requirements
Why use the AJRR Orthopaedic Quality Resource Center?

Participating in this QCDR registry will allow:

• Eligible professionals to submit their quality measure results to CMS to meet their PQRS quality reporting requirements
AJRR Orthopaedic Quality Resource Center

• The AJRR Orthopaedic Quality Resource Center, in collaboration with CECity, is intended for all providers who perform knee replacement. The Center will provide participating providers with:
  • Timely custom continuous performance monitors related to PQRS measures
  • Performance gap analysis and patient outlier identification
  • Access to improvement interventions to close performance gaps including patient care management tools; targeted education; resources and other evidence-based interventions
  • Comparison versus registry benchmarks and peer-to-peer comparison
AJRR Orthopaedic Quality Resource Center Approved as CMS QCDR

1 of 36 approved QCDRs will allow eligible professionals to submit their QCDR quality measure results to CMS to meet their PQRS quality reporting requirements:

- Earn the 0.5% PQRS incentive payment in 2014
- Avoid the 1% value-based payment modifier adjustment in 2015
- Avoid the 2% PQRS payment adjustment in 2016
- 9 total PQRS measures
Measures

• A QCDR is different from a Qualified Registry in that it is not limited to measures within PQRS. A QCDR may submit measures from one or more of the following categories with a maximum of 20 non-PQRS measures allowed:

  • Clinician & Group Consumer Assessment of Healthcare Providers and Systems (CGCAHPS)
  • National Quality Forum (NQF)-endorsed measures
  • Current 2014 PQRS measures
  • Measures used by boards or specialty societies
  • Measures used in regional quality collaborations
AJRR Orthopaedic Quality Resource Center Measures

- Diabetes: Hemoglobin A1c Poor Control
- Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin
- Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis
- Documentation of Current Medications in the Medical Record
- Total Knee Replacement: Shared Decision-Making: Trial of Conservative (Non-surgical) Therapy
- Total Knee Replacement: Venous Thromboembolic and Cardiovascular Risk Evaluation
- Total Knee Replacement: Preoperative Antibiotic Infusion with Proximal Tourniquet
- Total Knee Replacement: Identification of Implanted Prosthesis in Operative Report
AJRR Orthopaedic Quality Resource Center Measures

Eligible Professionals may select one of the following outcome measures:

• Functional Status Assessment for Knee Replacement: Knee injury and Osteoarthritis Outcome Score (KOOS)
• Functional Status Assessment for Knee Replacement: Oxford Knee Score
• Functional Status Assessment for Knee Replacement: Knee Society Knee Scoring System
• Functional Status Assessment for Knee Replacement: SF-36
AJRR Orthopaedic Quality Resource Center Walkthrough
Data Entry

Data entry and upload tools are available to manage the data entry process. CECity can also automate the flow of data from your electronic health record.
Performance Monitor

Quality scores for each measure will be calculated and displayed in the performance monitor (as frequently as daily).

Other features include:

• Performance measure gaps and a list of patient outliers

• Link to interventions and improvement tools.

• Peer comparators.
### Performance Management Dashboard Components

<table>
<thead>
<tr>
<th>Measure Name</th>
<th>Report Period</th>
<th>My Performance</th>
<th>My Score</th>
<th>How Do I Compare?</th>
<th>Outliers</th>
<th>How Do I Improve</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes: Hemoglobin A1c Poor Control</td>
<td>09/14/2014</td>
<td>Trending</td>
<td>Actual: 50.00% Higher is Better</td>
<td>0 gap</td>
<td>100%</td>
<td>Worst</td>
</tr>
<tr>
<td>Functional Status Assessment for Knee Replacement</td>
<td>09/14/2014</td>
<td>Trending</td>
<td>Average: 74.31% Higher is Better</td>
<td>1 gap</td>
<td>100%</td>
<td>Worst</td>
</tr>
<tr>
<td>Perioperative Care: Selection of Prophylactic Antibiotic – First OR</td>
<td>09/14/2014</td>
<td>Trending</td>
<td>Average: 72.73% Higher is Better</td>
<td>1 gap</td>
<td>100%</td>
<td>Worst</td>
</tr>
</tbody>
</table>

- **Measure Name**: Identifies the specific aspect being measured.
- **Report Period**: Date for the performance data.
- **My Performance**: Graphs show performance trends.
- **My Score**: Actual score compared to average.
- **How Do I Compare?**: Indicates performance against peers.
- **Outliers**: Highlights data points outside normal range.
- **How Do I Improve?**: Links to interventions for improvement.

**Key Points**:
- **Performance Trending**: Shows trends over time.
- **Provider Score**: Indicates performance level.
- **Peer Comparators**: Allows comparison against other providers.
- **How do we improve? Links to Interventions**: Guides for improving performance.

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**Additional Information**:
- **American Joint Replacement Registry (AJRR)**
- **Cecity Registry**: A CMS Qualified Clinical Data Registry.
How To Use the AJRR Orthopaedic Quality Resource Center

Steps for Participation

• **STEP 1**: Determine if the professional is eligible to participate
  • The list of EPs able to participate as individuals is available on the PQRS web page at:

• **STEP 2**: Go to the following website to register:
  https://www.medconcert.com/ajrr
2014 Physician Quality Reporting System (PQRS)

Once you have completed the registration follow these steps:

1. Submit data manually or via upload tool
2. Select at least 9 measures for PQRS Reporting
3. Report on at least 50% of your applicable patients (all payers)
4. Ensure that at least 3 NQS Domains are covered
5. Ensure that at least 1 Outcome Measure is selected
6. Complete Attestation Module for submission to CMS
Pricing for PQRS reporting and access to the AJRR Orthopaedic Quality Resource Center is $439 (on an individual eligible professional/healthcare professional basis):

DATA MUST BE SUBMITTED BY

**March 13, 2015**

FOR THE 2014 CALENDAR YEAR REVIEW PERIOD

For Questions please contact: info@ajrr.net or 847-292-0530