Calculation Error (CE) Form Overview

The CE form included in this reconciliation report package must be used to appeal matters related to reconciliation, payment, repayment, or quality measures affecting payment. Errors may fall into the following categories:

(1) Inclusion or exclusion of Medicare beneficiaries/episodes in the baseline or performance year (PY)
(2) Inclusion or exclusion of specific claims within episode spending in the baseline or PY
(3) Reconciliation amount calculations (including payment adjustment factors used in calculation computations)
(4) Application or use of composite quality score during reconciliation or in determining the performance percentile

Comprehensive Care for Joint Replacement (CJR) model participant hospitals must provide written notice of a CE to the Centers for Medicare & Medicaid Services (CMS) within 45 days of the date the reconciliation report is issued if they believe a CE was made. Please note that CMS will only accept CE forms from participant hospitals (42 CFR §510.310); appeals submitted by consultants or contractors will not be accepted. Unless CMS receives a hospital's written notice of CE as outlined below, the CJR reconciliation report will be deemed final 45 calendar days after issuance. CMS will provide a written response to the participant hospital's CE form within 30 calendar days of its receipt. CMS reserves the right to an extension of this 30 calendar day period upon written notice to the participant.

Please note that in some instances participant hospitals may be unable to exactly replicate episode spending amounts, because under current law, we are not permitted to provide Substance Abuse and Mental Health Services Administration (SAMHSA) claim-level information in participant hospital claims files. Per CMS policy, SAMHSA claim totals, while included in episode totals, are not provided in your claim-level files.

Completing the CE Form

The CE form is included in the "Reports" folder on the CJR Data Portal. The types of calculation errors are outlined on the first tab of the CE form. Each error type has a separate corresponding table located on separate tabs within the CE form. Please only complete the tables that are applicable to your review request.

1. CJR participants can list multiple calculation errors for the same performance year on one form for a single CCN.
    i. Do not include calculation errors for multiple CCNs or multiple performance years on one CE form.

2. Required fields in each table are marked with an asterisk (*).

3. If the error is related to the baseline period, please provide the date "stamp", i.e., the date CMS created the file, on the historical data file.

i. To find this date, right-click the unopened file and select "Properties". A properties window will pop up with the created, modified, and accessed dates. Please record the created date.

ii. To ensure you are reviewing the most current version of the file, please compare the file's created date with the date of the historical file in the CJR Data Portal.

4. For calculation errors type (1) and (2), i.e. beneficiary, episode or claim related errors, please do not send any data apart from that listed below:

Data field	Definition
CCN	CMS Certification Number
EPI_ID	System-generated episode case ID
GEO_BENE_SK	Integrated Data Repository (IDR) system variable - 4-part-key to identify a claim
CLM_DT_SGNTR_SK	IDR system variable - 4-part-key to identify a claim
CLM_TYPE_CD	IDR system variable - 4-part-key to identify a claim
CLM_NUM_SK	IDR system variable - 4-part-key to identify a claim
DROPREASON	Reason code why anchor stay is dropped (listed in the EPIEXC file)
EXCLUSION_CODE	Reason why a claim's payment was excluded from the episode total (listed in the claim file)

None of the variables we are requesting contain Personal Identification Information (PII) or Personal Health Information (PHI) data. For more information on the variables listed above, please see the CJR Data Dictionary and File Layouts available on the CJR Data Portal.

5. Complete the CE type (3) table if the error relates to computation of the reconciliation payment amount. The only column in this table that is required is the notes column to explain the calculation error and/or to state the adjustment factor you believe should have been used, e.g., wage index value, if you believe an incorrect factor was applied. The other data elements listed in the table are optional. Please submit two forms if you wish for an episode to be excluded from one year, but included in the other.

6. Complete the CE type (4) table if the error relates to the composite quality score or its components. The only column in this table that is required is the notes column where you will explain the error. The other data elements listed in the table are optional.

7. If you need to report more than six errors for a given error type, simply use the "Unprotect Sheet" function in Excel and add rows of data as appropriate. If you use a screenreader and need to report more than six errors for a given error type, please use

the CE form in file format CSV (comma-separated values), which is included in this package.

CE Submission Process for CJR Participant Hospitals

(1) Once the CE form has been completed, you must email the file to the CMS Appeals team at CJRreconciliation@cms.hhs.gov within 45 calendar days of the date this reconciliation report is issued. The subject line of this email must contain (1) your hospital's CCN and (2) the applicable performance year, and (3) "CE Review Request". This email must come directly from the participant hospital and not from a third party. **Do not include any PII or PHI on the CE form or in the email (see below for detailed list of PII and PHI).** Because no PII or PHI should be present, we also ask that you not encrypt emails or the attached CE form.

Directions for Submitting Appeals-Related PII or PHI to CJR Data Portal

If PII or PHI must be included, please upload the necessary documents to the CJR Data Portal using the following instructions. (If you need to obtain access to the CJR Data Portal, please use the instructions detailed in the Data Sharing section (page 36) of the document "Frequently Asked Questions" which can be found in the links at the bottom of this page: https://innovation.cms.gov/initiatives/cjr/index.html).

a. *Log in to the CJR Data Portal.*

b. *Click the "**Upload Files**" tab.*

c. *Use the **Select Your CCN** and **File Type** drop down menus to select your file information (choose "Calculation Error Report 1" for any PII/PHI related to PY1 Final Reconciliation and choose "Calculation Error Report 2" for any PII/PHI related to PY2 Initial Reconciliation).*

d. *Click the **Select File** button and upload the document.*

e. *Enter a brief description of the file in the **File Upload** Information textbox.*

f. *Select **Upload** to add the document to the **Upload History** table (Select **Remove** to remove a document).*

g. *After the file is uploaded, a confirmation message will display.*

h. *Select the close icon (**X**) to close the confirmation message.*

i. *Once the **Uploaded Files** screen is refreshed, the uploaded supporting document will display in the **Upload History** table.*

j. ***Please ensure that your CJR appeals-related email(s) to the CJR Appeals team (CJRReconciliation@cms.hhs.gov) indicate you have uploaded PII/PHI documentation to the portal.***

(2) Upon CMS's receipt of your email, you will receive an automatic reply from the above email address indicating your CE form was successfully submitted.

(3) CMS will respond to your CE review request within 30 calendar days of its receipt, unless you are otherwise notified. If you would like additional individuals to receive CMS's response, please carbon copy (CC) those individuals on the submission email.

(4) If you are dissatisfied with CMS's response to your CE review request, you may request a reconsideration review ("second-level" appeal). Please email your second-level appeal request to CJRreconciliation@cms.hhs.gov within 10 calendar days of the issue date of CMS's initial response. The subject line of this email must contain (1) your hospital's CCN and (2) the applicable performance year, and (3) "Reconsideration Review". **Do not include any PII or PHI in the email or any attachments you send in the email.** Because no PII or PHI should be present, we also ask that you not encrypt emails or attached documents.

If PII or PHI must be included in your second-level appeal, please use the instructions above entitled "Directions for Submitting PII or PHI" to submit.

If CMS does not receive the request within 10 calendar days of the issue date of CMS's initial response, then CMS's response is deemed final and CMS will proceed with reconciliation payment or repayment processes, as applicable.

PII and PHI Data Elements

The following information, often used to distinguish individual identity, is classified as PII (under the definition used by the National Institute of Standards and Technology) and/or PHI (under the U.S. Health Insurance Portability and Accountability Act (HIPAA)). Unique codes assigned by the investigator to code the data are not included.

- Full name, first or last name
- Home address including country, state, city or postal code
- Email addresses (if private from an association/club membership, etc.)
- National identification number, including social security number
- Passport number
- Medical record numbers
- Health insurance beneficiary numbers
- Age, especially if non-specific
- Date of birth
- Birthplace
- Gender or race
- Genetic information
- Telephone numbers and fax numbers
- Vehicle registration plate number
- Driver's license number
- Full face photographic images and any comparable images
- Device identifiers and serial numbers
- Biometric identifiers, including finger, retinal, and voice prints

- Credit card numbers
- Name of school they attend or workplace
- Grades, salary, or job position
- Criminal records
- Account numbers
- Professional certificate/license numbers
- Digital identifier
- Login name, screen name, nickname, or handle
- Web Uniform Resource Locator (URL)
- Linked Internet Protocol (IP) address numbers
- Web cookie
- Any other unique identifying number, characteristic, or code