



Comprehensive Care for Joint Replacement Model (CJR) News: Issue 48. May 11, 2021

CENTER FOR MEDICARE
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CJR

News

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Important Updates

The Centers for Medicare and Medicaid (CMS) Published the CJR Final Rule on May 3, 2021.

On May 3, 2021, CMS published a final rule in the Federal Register titled [Comprehensive Care for Joint Replacement \(CJR\) Model Three-Year Extension and Changes to Episode Definition and Pricing \(CMS-](#)

[5529-F](#)). The final rule made a number of changes to the CJR model in order to bring the model up to date with changes in practice and Medicare fee-for-service payment. Most notably, it finalized the extension of the CJR model for an additional three Performance Years (PYs), PY6 (October 1, 2021 to December 31, 2022) through PY8 (January 1, 2024 to December 31, 2024). The final rule revised the definition of a CJR episode to now include total knee and hip replacement procedures performed in the hospital outpatient department in light of changes to the Outpatient Prospective Payment System (OPPS) inpatient-only list policies over the past several years. This final rule also made a number of changes to the target price calculation. CMS changed the basis for the target price from three years of claims data to the most recent one year of claims data, removed the national update factor and twice yearly update to the target prices that accounts for prospective payment system and fee schedule updates, removed anchor factors and weights, and changed the high episode spending cap calculation methodology.

Additionally, CMS finalized a number of changes to the reconciliation process. The final rule revised the process from two reconciliation periods (conducted 2 and 14 months after the close of each performance year) to one reconciliation period to be conducted 6 months after the close of each performance year. It also added an episode-level risk adjustment beyond fracture status and a retrospective market trend adjustment factor, as well as changed the high episode spending cap calculation methodology used at reconciliation and changed the quality discount factors applicable to participants with excellent and good quality scores to better recognize high quality care. The final rule also made conforming changes to the beneficiary notification, the gainsharing caps, quality related to patient related outcomes (PRO) reporting, the appeals process, and the waiver sections to align with the model extension as well as the changes to episode definition.

Lastly, this final rule finalized participation of hospitals required to participate in the model since April 1, 2016 located in 34 mandatory metropolitan statistical areas, except for those that are considered rural or low-volume (including those that reclassified as rural prior to July 4, 2021). Hospitals in voluntary MSAs and rural and low-volume hospitals opting to participate in the model since 2018 will no longer participate in the model as of October 1, 2021.

The full text of the May 2021 CJR final rule is available [here](#).

CMS Anticipates Releasing the 2021 CJR Reconciliation Reports in May 2021.

The 2021 CJR Reconciliation Report, which includes the Final PY4 and Initial PY Subset 5.1 Reconciliation information, will be distributed to participant hospitals via the [CJR Data Portal](#) in late May. For hospitals eligible for reconciliation payments who would like to appeal reconciliation results, they will need to complete the Calculation Error (CE) form included in the reconciliation report and email it to CJRReconciliation@cms.hhs.gov within 45 calendar days of report issue. Note that a separate CE form is needed for each performance year and each CMS Certification Number (CCN).

The CJR regulations at 42 CFR 510.310(a)(1) provide that, unless the participant hospital provides written notice of the CE, CMS deems the CJR reconciliation report to be final 45 calendar days after it is issued, and proceeds with the payment or repayment processes as applicable. Section 510.310(a)(2) provides that CMS responds to the notice of CE if it is received within 45 calendar days of the issuance of the reconciliation report.

The CJR model team will release a recording in late May, “CJR Model Final Performance Year 4 (PY4) and Initial Performance Year Subset 5.1 (PY5.1) Reconciliation”, which will review the reconciliation process and methodology, preview the reconciliation report and data files, and outline the process for appeals.

If you have any questions about reconciliation, send an email to CJRSupport@cms.hhs.gov.

CMMI Connect: Login Today!

As part of [CMMI Connect](#), [CJR Connect](#) is CMS’s knowledge management and collaboration platform for hospitals participating in the CJR model.

To log into CMMI Connect you must now use CMS credentials, such as an Enterprise Identity Management (EIDM) or HCQIS Access Roles and Profile (HARP).

For existing Connect users: Before logging in for the first time with CMS credentials please click on “Existing User Verification” on the [CMMI Connect](#) login page. Please follow the prompts to complete the verification process.

For new Connect users: On the [CMMI Connect](#) login page, please click “New User Registration” and then fill out the community registration form that appears. After being granted access to the site by the CMMI Connect HelpDesk, you will receive a Welcome email that contains instructions on verifying your account.

Are you trying to create or link your account but experiencing difficulties? Please contact the Help Desk at CMMIForceSupport@cms.hhs.gov, or call 1-888-734-6433, option 5.



Webinar News

Upcoming Events

Note: The dates and times of the Upcoming Events below are subject to change.

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CJR Model Final Rule: Three Year Extension and Changes to Episode Definition and Pricing

May 12, 2021 • 2-3 PM ET • [Register](#)

This webinar will provide an overview of the recently published final rule, which will extend the CJR model for an additional three years, through December 31, 2024. The final rule made a number of changes to the CJR model in order to bring the model up to date with changes in practice and Medicare fee-for-service payment. Intended for discussion are changes in the episode of care definition, the target price calculation, the reconciliation process, the beneficiary notice requirements and the appeals process. It will cover elimination of the 50-percent cap on gainsharing payments, distribution payments, and downstream distribution payments for certain recipients. Please submit any questions for the CMS CJR model team via the [registration form](#).

CJR Monitoring Results: Base Year through Performance Year 4 (BY-PY4)

June 9, 2021 • 2-3 PM ET • [Register](#)

This webinar is designed for senior leadership, administrators, care coordinators and navigators, quality staff, and data staff; however, registration is not limited to staff in those roles. The CJR Monitoring Team will provide a retrospective summary of key findings from the CJR Monitoring Reports for the BY-PY4 focusing on cost, quality and access. This presentation will include time for questions and discussion by CJR participant hospitals, including brief sharing by hospitals with successful approaches. From this event, you will:

1. Identify strategies used by CJR participant hospitals to achieve success in lowering cost, maintaining or achieving higher quality of care, and improving access; and
 2. Recognize their hospitals strengths and areas for improvement in comparison to aggregate monitoring data.
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On-Demand Events

If you missed or want to revisit any of the most recent webinars, you may click on the on-demand links below to access the recordings. For some of the on-demand links, you may need to register before viewing the recordings. Listen on your own or view with your colleagues at your next staff meeting.

- **[Model Review: Financial Arrangement and Clinician Engagement Lists Submission and Connection with QPP](#)**

This recording focuses on the connection between the Quality Payment Program and the Financial Arrangement and Clinician Engagement Lists under the CJR model, as well as the submission process for Financial Arrangement and Clinician Engagement Lists. The CJR model team reviews how and when CJR participant hospitals must submit their Financial Arrangement List and/or Clinician Engagement List to CMS. The deadline for submitting these lists on the [CJR Data Portal](#) was April 30, 2021 at 11:59 PM EDT.

- **[Adapting and Updating Part Three](#)**

During this third event in the Adapting and Updating webinar series, Molly Keller, RN, MSN, from St. Clair Hospital shared how their organization has modified its pain management and post-acute collaboration processes because of COVID-19 and other external influences to better care for their CJR patients.

- **[Adapting and Updating Part 2: Clinical Protocols](#)**

During the event, presenters from Margaret R. Pardee Memorial Hospital and North Shore University Hospital shared how they have modified their standardized clinical protocols to improve care quality and outcomes.

REMINDER: CJR Data Portal

As a reminder, the [CJR Data Portal](#) is where you can view important data that is specific to your hospital's participation in the CJR model. If you experience any issues accessing the CJR Data Portal or if you have questions regarding the Portal or your Data Use Agreements, please contact the CJR Support Team at CJRSupport@cms.hhs.gov or 1-844-711-CMMI (2664), Option 1.

Please do not reply to the cmslists@subscriptions.cms.hhs.gov email address, as this is an unmonitored inbox. You can continue to contact CJR Support for questions, assistance, suggestions for Learning System events, or to be added to the *CJR News* distribution list at CJRSupport@cms.hhs.gov.

Want to check out past *CJR News* newsletters? Find older issues in the [CJR Connect](#) Libraries.