



News



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## Model Updates

### 2018 CJR Reconciliation Reports - Update

As a result of a technical error that was discovered, distribution of the 2018 CJR model reconciliation reports has been delayed. Delivery is now anticipated to be in early June. Please note that the Centers for Medicare & Medicaid Services (CMS) will adjust the 45 calendar day appeal period based on the date that reports arrive in the data portal. It is expected that payments will be similarly delayed.

As a result, the May 31st CJR Model PY1 and PY2 Reconciliation Office Hours session is re-scheduled to June 12 from 2-3 PM EDT; at that time CMS expects that hospitals will have received their reports and had at least a few days to review and formulate questions.

CMS has hosted a series of webinars to provide an overview of, and answer questions about, PY1 and PY2 reconciliation. You may view the materials associated with these webinars (e.g., on-demand versions, slides) by logging into [CJR Connect](#) and searching for the following content packs in the Libraries:

- [“Webinar CJR Model Performance Year 1 \(PY1\) Final Reconciliation 05 15 18 Materials”](#)
- [“Webinar CJR Model Performance Year 2 \(PY2\) Initial Reconciliation 05 22 18 Materials”](#)

If you have any questions about reconciliation, send an email to [CJRSupport@cms.hhs.gov](mailto:CJRSupport@cms.hhs.gov).

**REMINDER: The deadline for reporting under the CJR model for the Clinician Financial Arrangement Lists, Clinician Engagement Lists, and for the Quality Payment Program is June 8, 2018 at 11:59 PM EDT.**

In an effort to minimize burden to the extent possible, CMS is combining the collection of information on participant hospitals' track selection (Quality Payment Program), financial arrangements, and clinician engagement.

Each participant hospital must provide to CMS a list of previous and current collaborators, collaboration agents and downstream collaboration agents, or submit to CMS that no financial arrangements have been established for the CJR model. For participant hospitals that choose to participate in Track 1 (Advanced Alternative Payment Model track), the participant hospital must submit, if applicable, a clinician engagement list. If there are no individuals that meet the requirements to be reported for a clinician financial arrangement list or a clinician engagement list, the participant hospital must attest to CMS that there are no individuals to report.

The deadline for reporting under the CJR model for financial arrangement lists, clinician engagement lists, and for the Quality Payment Program is June 8, 2018 at 11:59 PM EDT. To access materials regarding reporting requirements for the Financial Arrangement List, the Clinician Engagement List, and the Quality Payment Program, log on to [CJR Connect](#) and search for "Combined Financial Arrangement List, Clinician Engagement List, and QPP Materials" in the Libraries.

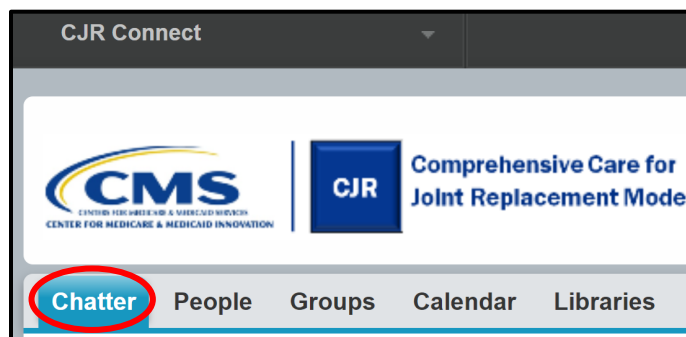


## Fast Fact about CJR Connect

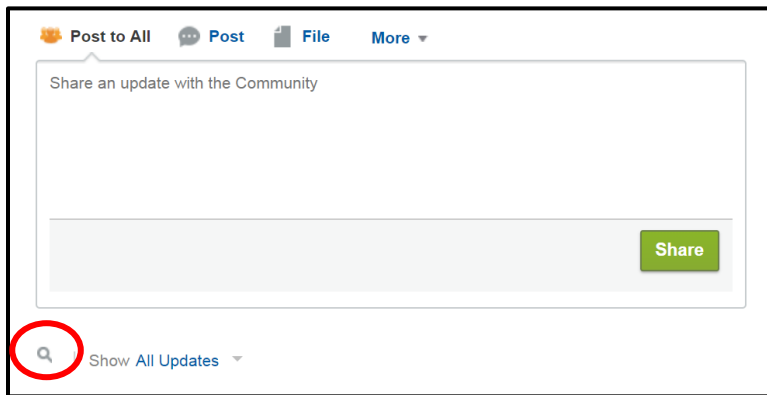
### Searching for Chatter by Topic

Did you know you can search your chatter feed on [CJR Connect](#)? Find a chatter post using keywords.

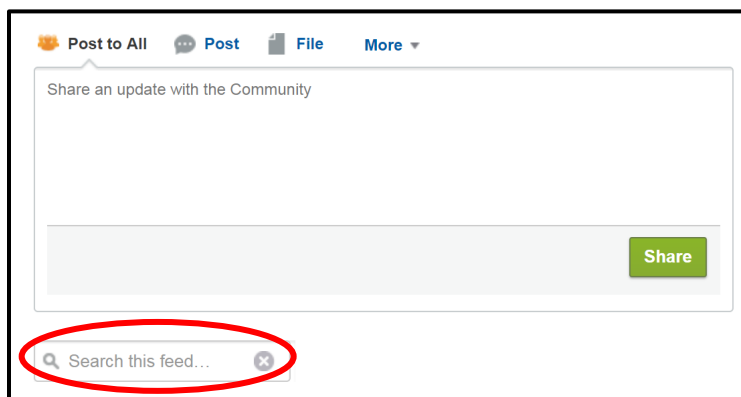
1. Log in to [CJR Connect](#) using your username and password.
2. On the top left of the screen, select the "Chatter" tab.



3. Scroll down the page and look for the "Chatter Post" window. Select the magnifying glass located underneath the "Chatter Post" window.



4. Input your search terms into the search box. After entering your search terms, your chatter feed will display posts containing your search terms.



## CMMI Updates

The CMS Innovation Center website contains useful resources and announcements about CMS' innovative health care payment and service delivery models. Below are some recent updates.

### **The Bundled Payments for Care Improvement (BPCI) Initiative Learning System and Quality Improvement teams will be hosting a panel session at the 2018 National ACO, Bundled Payment, and MACRA Summit.**

Will you or someone from your CJR or BPCI team be attending the National ACO, Bundled Payment, and MACRA Summit in Washington, DC? On Thursday, June 7, 2018 at 1:15 PM EDT, the BPCI Learning System and Quality Improvement teams will be hosting a session about lessons learned from BPCI. During the session, Elizabeth Currier, Senior Advisor for Episode Based Payment Models at the Center for Medicare & Medicaid Innovation (CMMI); Lisa Davis, BPCI and BPCI Advanced Learning System Lead at CMMI; Dr. Steven Farmer, Senior Advisor and Senior Medical Officer at CMMI; and Alicia Goroski, BPCI Learning System Project Director at The Lewin Group, will review the drivers reflected in BPCI successes. In addition, BPCI Awardees will share how they operationalized these drivers in practice. These lessons learned can be leveraged for future work in bundled payments.

For more information about the conference, click [here](#).

## **CMS has posted the shared savings and regression methodologies reports for the Independence at Home Demonstration.**

Home-based primary care allows health care providers to spend more time with their patients, perform assessments in a patient's home environment, and assume greater accountability for all aspects of the patient's care. This focus on timely and appropriate care is designed to improve overall quality of care and quality of life for patients served, while lowering health care costs by forestalling the need for care in institutional settings.

Under the Independence at Home Demonstration, the CMS Innovation Center will work with medical practices to test the effectiveness of delivering comprehensive primary care services at home and if doing so improves care for Medicare beneficiaries with multiple chronic conditions. Additionally, the Demonstration will reward health care providers that provide high quality care while reducing costs. There are 14 participating sites involved in the Independence at Home Demonstration.

CMS has posted the Independence at Home Demonstration's [shared savings report](#) and [regression methodologies report](#).

Find out more about Independence at Home Demonstration [here](#).

## **Medicare Advantage focused fact sheet and updated Frequently Asked Questions for suppliers for the Medicare Diabetes Prevention Program (MDPP) Expanded Model has been posted.**

The MDPP Expanded Model is a structured behavioral change intervention that aims to prevent the onset of type 2 diabetes among Medicare beneficiaries with an indication of prediabetes. The clinical intervention consists of a minimum of 16 intensive "core" sessions of a Centers for Disease Control and Prevention (CDC)-approved curriculum furnished over six months in a group-based, classroom-style setting that provides practical training in long-term dietary change, increased physical activity, and behavior change strategies for weight control. CMS recently posted the [focused fact sheet](#) and [updated frequently asked questions](#).

Find out more about the Medicare Diabetes Prevention Program (MDPP) Expanded Model [here](#).



## **What's New on CJR Connect**

### **New Resources in Libraries**

The following resources are now available in the [CJR Connect](#) Libraries. To access these resources directly, log into [CJR Connect](#), then copy and paste the link into your browser:

- [CJR Learning System Upcoming Events](#) (Content pack updated to include the CJR Learning System Upcoming Events from May 24, 2018.)
- [Webinar Risk Stratification Affinity Group Session Three 05 30 18 Materials](#) (This content pack contains the slides and the Problem Solving Template from the "Risk Stratification Affinity Group Session Three" webinar held on May 30, 2018.)
- [Webinar CJR Model Performance Year 2 \(PY2\) Initial Reconciliation 05 22 18 Materials](#) (This content pack contains the slides and On-Demand Link from the "CJR Model Performance Year 2 (PY2) Initial Reconciliation" webinar held on May 22, 2018.)
- [CJR News](#) (Content pack updated to include the CJR News from May 17, 2018.)
- [Webinar CJR Model Performance Year 1 \(PY1\) Final Reconciliation 05 15 18 Materials](#) (This content pack contains the slides and On-Demand Link from the "CJR Model Performance Year 1 (PY1) Final Reconciliation" webinar held on May 15, 2018.)

## Chatter Post Highlight: Patient-reported Outcomes (PRO) Data

Below is a [CJR Connect](#) Chatter post about PRO data. To participate in the discussion, select "Topics" from the top left sidebar on your Chatter feed and enter "PRO Data" in the Search bar.

Our total joint program is composing a report of graphs illustrating our PRO data (HOOS and KOOS Jr and PROMIS global) for our total joint programs (both CJR and all payors) for performance year one and two. When we used the original HOOS and KOOS, I was able to include the MCID (minimally clinically important difference values) as well as the national benchmarks. I have been unable to locate any national benchmarks or the minimally significant change for the shortened surveys. I know they can be found on the American joint registry but my health system is not a member of the registry. Does anyone know approximately what the benchmarks are?

Topics: [PRO Data](#)

[Comment](#) · [Like](#) · [Share](#) · Two days ago at 12:23 PM

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For questions, assistance, suggestions for Learning System events, or to be added to the CJR News distribution list, please contact [CJRSupport@cms.hhs.gov](mailto:CJRSupport@cms.hhs.gov).