



Comprehensive Care for Joint Replacement Model (CJR) News: Issue 63. September 13, 2022

CENTER FOR MEDICARE
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News

KEY LINKS

[CJR Connect](#) | [CMMI CJR Model](#) | [CMS Data Portal](#)



Announcement:

Please note that as of September 1, 2021, the LS-CJR@lewin.com inbox has been deactivated. Please email CJR@cms.hhs.gov with any inquiries regarding the CJR model and the Learning System.



Important Updates

Financial Arrangements and Clinician Engagement Lists Due October 26th

This collection applies to participant hospitals currently participating in the CJR model that have not submitted complete financial arrangement and clinician engagement lists.

The deadline for reporting under the CJR model for financial arrangement lists, clinician engagement lists and for the Quality Payment Program is **October 26, 2022, at 11:59PM EST**.

Quality Payment Program:

The Quality Payment Program (QPP) has two pathways for physicians and other clinicians to choose from: Advanced Alternative Payment Models (Advanced APMs) and the Merit-based Incentive Payment System (MIPS). An Alternative Payment Model (APM) is a modified payment approach that gives added incentives to provide high-quality and cost-efficient care. APMs can be structured to apply to a specific clinical condition, a care episode, or a population. Advanced APMs are a subset of APMs and provide incentive to participants for taking on some risk related to their patients' outcomes. Eligible clinicians who achieve threshold levels of participation in Advanced APMs to attain Qualifying APM Participant (QP) status for a year will earn a 5% APM incentive payment by going further in improving patient care and taking on risk through an Advanced APM.

As of 2017, Track 1 of the Comprehensive Care for Joint Replacement (CJR) model is an Advanced Alternative Payment Model (Advanced APM).

Track 1 participation requires that Participant Hospitals use Certified Electronic Health Record Technology (CEHRT) as defined in 42 CFR 414.1305 to document and communicate clinical care to their patients or other health care providers. Each CJR Participant Hospital must elect Track 1 if the participant hospital wants to participate in CJR as an Advanced APM. Each participant hospital in Track 1 must also attest to CEHRT use.

If the participant hospital does not want to participate in the CJR model as an Advanced APM, the participant hospital can either choose Track 2 or in the event of no response to CMS, the participant hospital will be considered a Track 2 participant hospital.

Financial Arrangement List and Clinician Engagement List:

To ensure all participant hospitals' compliance with the requirements of the CJR model, under 42 CFR 510.110, participant hospitals must provide to CMS evidence sufficient to enable the audit, evaluation, inspection, or investigation of the individual's or entity's compliance with CJR requirements, the quality of services furnished, the obligation to repay any reconciliation payments owed to CMS, or the calculation, distribution, receipt, or recoupment of gainsharing payments, alignment payments, or distribution payments.

Therefore, when requested by CMS, each participant hospital must provide their financial arrangement list to CMS including previous and current collaborators, collaboration agents and downstream collaboration agents.

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. For participant hospitals that choose Track 1, if there are no individuals that meet the requirements to be reported on a clinician engagement list, the participant hospital must attest to CMS that there are no individuals to report.

For participant hospitals in Track 2, these hospitals do not need to submit any documentation to CMS. If no documentation is submitted, CMS will consider the CJR participant hospital in Track 2 (Non-advanced APM) and no financial arrangements established for the CJR model.

Again, if the participant hospital submitted the required documentation in March 2022 and does not have any changes, the participant hospital does not need to resubmit the documentation to CMS.

The deadline for reporting under the CJR model for financial arrangement lists, clinician engagement lists and for the Quality Payment Program is October 26, 2022, at 11:59PM EST.

Please email CJRSupport@cms.hhs.gov with any questions.

REMINDER: CJR Performance Year (PY) 6-8 Data Request and Attestation (DRA) Form Submission

On April 29, 2021, CMS issued a final rule in the *Federal Register* (<https://www.federalregister.gov/public-inspection/2021-09097/medicare-program-comprehensive-care-for-joint-replacement-model-three-year-extension-and-changes-to>) to extend the Comprehensive Care for Joint Replacement (CJR) model.

All original CJR model Data Request and Attestation (DRA) forms expired at the end of the 2020 calendar year. All CJR model DRA PY5 Extension DRA forms expired September 30, 2021. As such, **organizations continuing in the CJR model for PY 6-8 are required to submit an updated DRA form to continue receiving data.** Hospital Data Requestors should complete, sign (in blue or black ink), and return the attached form, using the below instructions. If your organization is changing its Data Requestor, please submit an email to CJRSupport@cms.hhs.gov indicating the change of Data Requestor, with the former Data Requestor copied on the email. If the former Data Requestor is no longer with your organization, please submit an email to CJRSupport@cms.hhs.gov advising such.

Please note that forms that are submitted unsecured will not be able to be processed. Therefore, please follow the instructions outlined below.

Please be reminded that DRA forms contain Tax Identification Numbers (TINs), which is information that should be submitted securely per CMS IT security requirements.

Data Portal Submission (Preferred Method)

1. Log into the CJR Data Portal (<https://portal.cms.gov/wps/portal/unauthportal/home/>).
2. Under the CJR Application, navigate to the Upload Files tab.
3. Complete the information on the Upload Files tab.
 1. Use the Select Your CCN drop down menu to select the CCN under which you are submitting the DRA form.
 2. Use the File Type drop down menu to select "Supporting Document 11."
 3. Click the Select File button. A window will display, which will allow you to select your DRA form from your computer. Please note that your file name must not include spaces. The suggested file name is CCN_HospitalName (Example: 123456_FictionalHospital).
 4. You have the option to enter a comment in the File Upload Information textbox. If a comment is entered, it will be viewable in the Upload History table.
4. Select Upload to add the DRA form to the Upload History table. Any files queued for upload may be removed prior to upload if necessary.

5. After the file is successfully uploaded, a confirmation message will display. Once the Upload Files screen is refreshed, the uploaded document will display in the Upload History table.
6. Email CJRSupport@cms.hhs.gov to notify the CJR Support team that the DRA form is available for review and processing.
7. Upon completion of the DRA form review, you will receive a notification from CJRSupport@cms.hhs.gov confirming that the form has been processed or requesting revisions to the form in order to proceed.

Email Submission (if your organization is unable to access the Data Portal)

1. Password encrypt your DRA form using software that is in compliance with Federal Information Processing Standards (FIPS), section 140-2. Currently, CMS recognizes two applications, WinZip and SecureZip.
2. Attach the password encrypted file to an email. Within the email, please include a name and phone number of a point of contact who can be reached to obtain the document password. Please note that, per CMS security requirements, passwords cannot be submitted via email (this includes the original or any subsequent email).
3. Submit the email and secured form to CJRSupport@cms.hhs.gov.
4. A CJR Support representative will reach out via the contact information provided to obtain the password in order to proceed with review and processing of the DRA form.
5. Upon completion of the DRA form review, you will receive a notification from CJRSupport@cms.hhs.gov confirming that the form has been processed or requesting revisions to the form in order to proceed.

Please reach out to CJRSupport@cms.hhs.gov with any questions.

CMMI Connect: Have You Updated Your Login Credentials?

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 Help Desk, 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

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 with your colleagues at your next staff meeting.

- [**CJR Model Final Performance Year Subset 5.1 \(PY5.1\) and Initial Performance Year Subset 5.2 \(PY5.2\) Reconciliation**](#)
This pre-recorded webinar provides an overview of the PY5.1 final and PY5.2 initial reconciliation and appeals process. The webinar opens with payment and repayment information, updates to the reconciliation methodology, information on the reconciliation report and data files available on the CJR Data Portal, and the timeline for appeals. The webinar then reviews the reconciliation methodology – regulations, episode exclusions, and adjustments to episode spending and target prices – and previews the timeline for PY5.2 final reconciliation and PY6 reconciliation. The webinar concludes by addressing questions submitted to the CJR model team by model participants in advance of the webinar. The 2022 Reconciliation Reports, which include PY5.1 final results and PY5.2 initial results, were made available on the CJR Data Portal in May 2022.
- [**CJR Financial Arrangement and Engagement Lists Submission and Connection with QPP \(Spring 2022\)**](#)
This webinar focused on the connection between the Quality Payment Program and the Financial Arrangement and Clinician Engagement List under the CJR Model, as well as the submission process for Financial Arrangement and Clinician Engagement Lists. During the event, the CJR model team reviewed 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 data portal is May 11, 2022, at 11:59pm ET.
- [**Patient Reported Outcomes \(PRO\) Data Collection and Submission: Updates for Performance Years 6-8 \(PYs 6-8\)**](#)
During this webinar, the Yale Center for Outcomes Research and Evaluation (CORE) team shared important updates regarding data submission of patient-reported outcomes (PROs) for CJR participant hospitals. Yale CORE provided instructions for creating a Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) account. Additionally, the Yale CORE team discussed Managed File Transfer (MFT) registration and then walk through CJR PRO PY6 data submission using MFT.
- [**CJR PY6 Reconciliation Methodology**](#)
During this webinar, the Mathematica Policy Research team provided an overview of the payment methodology and related policy updates for PY6 of the CJR model. This included a review of the target price background from PYs 1-5, an overview of the PY6 target price, and a discussion of changes to PY6 target price methodology. After the presentation, attendees had the opportunity to ask questions.

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.

The CJR Data Portal now includes your hospital's quarterly monitoring report. A new monitoring report was uploaded on August 30, 2022, replacing the previous monitoring report.

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.