

# CJR 101: Initial Target Prices and Baseline Data



*Comprehensive Care for  
Joint Replacement Model*

*February 2, 2016*

# Webinar Agenda

- How to Request and Receive Data
- Reports Available on CJR Data Portal
  - Target Price Reports
  - Historical Claims File
  - Historical Claims Summary File
  - Specifications and layouts
- Target Prices Review
- Calculating Target Prices

# Requesting and Receiving Data

- CJR hospitals must request baseline and quarterly data
- Email [CJRSupport@cms.hhs.gov](mailto:CJRSupport@cms.hhs.gov) to receive the CJR Data Request and Attestation Form
- Once the form is received, CMS will provide instructions on accessing the data portal

# Understanding Reports

# Data Portal

CJR

Download

Report

## Download

Below you will find your hospital's most recent CJR data files/reports. If you cannot find (or are having issues opening) a specific file, please contact the CJR Support Team at:

CJRsupport@cms.hhs.gov or 1-844-711-CMMI (2664) Option 1

### Select your Organization

Organization

Please enter an organization name or CCN.

DCH Regional Medical Center - 010092

### List of available reports for download for this organization

File Name	File Type	File Size	Date Added	Download
README	ZIP	1.003 MB	January 21, 2016	<a href="#">Download</a>
Historical Aggregate Clai...	ZIP	2.751 KB	January 21, 2016	<a href="#">Download</a>
Historical Raw Claims Data	ZIP	8.332 MB	January 21, 2016	<a href="#">Download</a>
Target Prices	ZIP	1.278 KB	January 21, 2016	<a href="#">Download</a>

# Available on the Portal Today

- What's included:
  - README file of CJR episode and target prices methodology (technical specifications in PDF format)
  - Target prices for April-September 2016
  - Historical claims (includes enrollment, claim, and episode summary information). \*These files contain personally-identifiable information.\*
  - Historical claim summaries (statistics on episodes for your hospital and region)
  - File layouts
- Target prices, historical claims, and historical claim summary files don't have an extension. To open in Excel, rename the file to have .csv at the end. File layouts can be opened in Notepad or renamed to have a .txt at the end.

# Target Price Report Variables

<u>Variable</u>	<u>Description</u>
CCN	Anchor CCN
NAME	Hospital name
REGION	Number of CJR region that hospital is assigned to
DRG	MS-DRG of the anchor hospitalization (469/470)
FRACTURE	Identifies anchor stays with hip fractures
TARGET_PRICE	Hospital's individual target price
NO_HISTORY	No episodes in historical period
LOW_VOLUME	Fewer than 20 CJR episodes in historical period

# Sample Target Price Report

	A	B	C	D	E	F	G	H
1	CCN	NAME	REGION	DRG	FRACTURE	TARGET_PRICE	NO_HISTORY	LOW_VOLUME
2	XXXXX	Hospital Center	(6) EAST SOUTH CENTRAL	469	0	xxxxx	0	0
3	XXXXX	Hospital Center	(6) EAST SOUTH CENTRAL	469	1	xxxxx	0	0
4	XXXXX	Hospital Center	(6) EAST SOUTH CENTRAL	470	0	xxxxx	0	0
5	XXXXX	Hospital Center	(6) EAST SOUTH CENTRAL	470	1	xxxxx	0	0
6	→							

Note: 0 = "No"; 1 = "Yes"



# Historical Claim Files

## Table of Contents

EPI	CJR episode summaries
EPIEXC	Excluded CJR episode summaries
IP	Inpatient claims
OP	Outpatient claims
HH	Home health claims
SN	Skilled nursing facility claims
PB	Carrier/Part B claims
DM	Durable Medical Equipment claims
HS	Hospice claims
DXPX	Diagnosis and procedure code from claims
DENOM	Enrollment info. for beneficiaries w/ Enrollment CJR episodes
BDUAL	Dual eligibility for beneficiaries w/ CJR episodes

# Claims Variables

		STD_AMT_EPI	COSTINC	NON_STD_SUB	PRORATED
STD_AMT_EPI	Standardized allowed payment included in episode spending	11342.61	1	0 0	
		12098.79	1	0 0	
		12098.79	1	0 0	
		19746.01	1	0 0	
COSTINC	Indicating whether the Claim amount is included in the episode	12098.79	1	0 0	
		11749.98	1	0 0	
		12098.79	1	0 0	
		12098.79	1	0 0	
		12098.79	1	0 0	
NON_STD_SUB	Indicating whether standardized amount was imputed	12098.79	1	0 0	
		12723.32	1	0 0	
		12223.03	1	0 0	
		12098.79	1	0 0	
PRORATED	Indicating whether the Claim amount is prorated				

# Sample Claims File

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
1	EPI_ID	GEO_BENE_SK	CLM_DT_SGNTR_SK	CLM_TYPE_CD	CLM_NUM_SK	BENE_SK	CLM_HIC_NUM	CLM_FROM_DT	CLM_THRU_DT	CLM_PROVIDER	STUS_CD	PRPAYCD	MCOPDSW	DRG_CD	ADMSN_DT	DSCHRGDT	OUTLR_CD
2	xxxxxxx	xxxxx	xxxxxxxxx	xx		1 xxxxxxxx xxxxxxxxxxxx		27-May-13	29-May-13	xxxxx	x			470	27-May-13	29-May-13	0
3	xxxxxxx	xxxxx	xxxxxxxxx	xx		1 xxxxxxxx xxxxxxxxxxxx		18-Mar-13	21-Mar-13	xxxxx	x			470	18-Mar-13	21-Mar-13	0
4	xxxxxxx	xxxxx	xxxxxxxxx	xx		1 xxxxxxxx xxxxxxxxxxxx		16-Apr-13	19-Apr-13	xxxxx	x			470	16-Apr-13	19-Apr-13	0
5	xxxxxxx	xxxxx	xxxxxxxxx	xx		1 xxxxxxxx xxxxxxxxxxxx		13-Mar-13	22-Mar-13	xxxxx	x			945	13-Mar-13	22-Mar-13	0
6	xxxxxxx	xxxxx	xxxxxxxxx	xx		1 xxxxxxxx xxxxxxxxxxxx		9-Mar-13	13-Mar-13	xxxxx	xx			470	9-Mar-13	13-Mar-13	0
7	xxxxxxx	xxxxx	xxxxxxxxx	xx		1 xxxxxxxx xxxxxxxxxxxx		1-Mar-12	5-Mar-12	xxxxx	xx	N		470	1-Mar-12	5-Mar-12	0
8	xxxxxxx	xxxxx	xxxxxxxxx	xx		2 xxxxxxxx xxxxxxxxxxxx		27-Feb-13	2-Mar-13	xxxxx	x			470	27-Feb-13	2-Mar-13	0

Note: Inpatient Claims File- [IPHDR](#)

# Linking Files

- There are multiple files for each claim type, to give header (claim), detailed (revenue/line), and value file information
  - Claim type: *IP, OP, HH, SN, PB, DM, and HS*
- Use the following variables to merge files:
  - Claims to claims: *EPI\_ID, GEO\_BENE\_SK, CLM\_DT\_SGNTR\_SK, CLM\_TYPE\_CD, and CLM\_NUM\_SK*
  - Episode file to claims: *EPI\_ID*
  - Episode file to enrollment: *BENE\_SK*

# Historical Claim Summary Files

## Table of Contents

Hosp\_Sum      Hospital-specific descriptive statistics

Reg\_Sum      Region-specific descriptive statistics

# Hospital Summary File Layout

TARGET_PRICE	Target price from DRG-fracture combination
COUNT_EPISODES	Number of episodes for DRG-fracture combination
MEAN_EPI_TOTAL	Mean of total episode spending during historical period
MIN_EPI_TOTAL	Minimum of total episode spending during historical period
MEDIAN_EPI_TOTAL	Median of total episode spending during historical period
MAX_EPI_TOTAL	Maximum of total episode spending during historical period
SD_EPI_TOTAL	Standard deviation of total episode spending during historical period
MEAN_ACUTE	Mean of acute care payments
MEAN_PB	Mean of Part B payments
MEAN_IRF	Mean of Inpatient Rehab Facility payments
MEAN_SNF	Mean of Skilled Nursing Facility payments
MEAN_HH	Mean of Home Health payments
COUNT_ACUTE	# episodes with acute care payments
COUNT_PB	# episodes with Part B payments
COUNT_IRF	# episodes with Inpatient Rehab Facility payments
COUNT_SNF	# episodes with Skilled Nursing Facilities payments
COUNT_HH	# episodes with Home Health payments
PCT_ACUTE	Proportion of total episode spending attributable to acute care payments
PCT_PB	Proportion of total episode spending attributable to Part B payments
PCT_IRF	Proportion of total episode spending attributable to Inpatient Rehab Facility payments
PCT_SNF	Proportion of total episode spending attributable to Skilled Nursing Facilities payments
PCT_HH	Proportion of total episode spending attributable to Home Health payments

# Target Prices Review

# Target Prices

- CMS will provide CJR participants with episode target prices at least twice each performance year (PY).
- Separate target prices are determined for each DRG (469/470) or fracture (yes/no) combination
- Available today:
  - Target prices for PY1 episodes that start between 4/1/16 and 9/30/16
- Available September 2016:
  - Target prices for PY1 episodes that start 10/1/16 and end before 12/31/16



# Target Prices (Contd.)

- Target prices are calculated using historical episodes
  - PY1 historical period covers episodes that start between 1/1/12 and 12/31/14 and end before 3/31/2015
- Target prices delivered in September of a performance year will account for changes to payment systems that take effect in October

# Target Prices (Contd.)

- The target price methodology removes the effect of incentive programs on prices
  - Claim- and line-level standardized payment amounts produced using the CMS Price (Payment) Standardization Methodology
  - Final target prices re-introduce geographic wage differences

Note: Use of several national parameters make it difficult to fully replicate reported target prices

# **Methodology used to calculate Target Prices**

# Summary

- PY1 target prices, historical claims, and historical claim summaries are available on the portal
- File layout documentation is available within each zip file
- The README zip file includes technical specifications on episode and target price methodologies
- Historical claims files contain PII
  - Secure storage and transmission

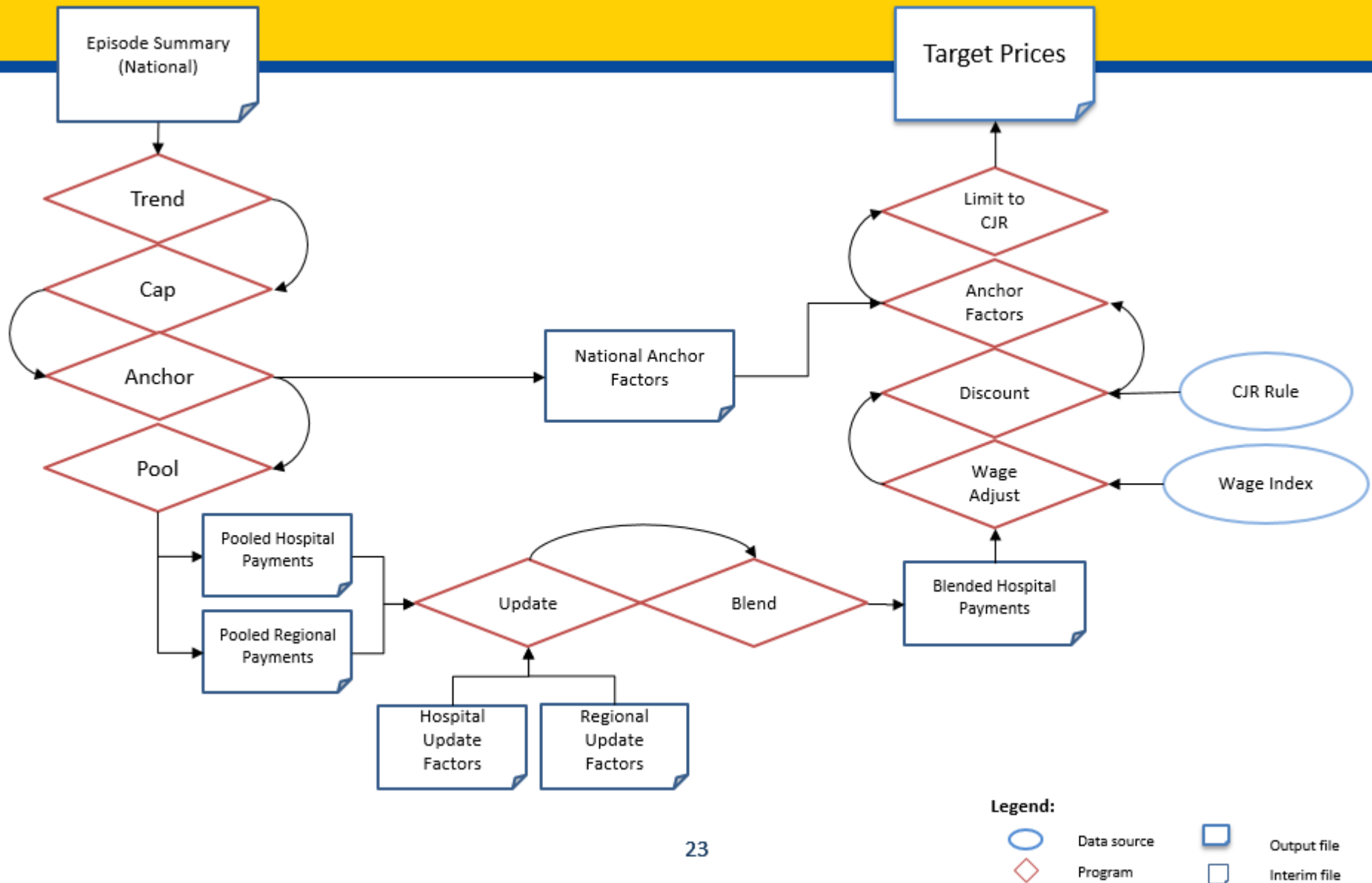
# Input Data

- National episode summary file
  - Episode-level file for all CJR episodes between 2012 and 2014 with information on the anchor stay, anchor hospital, and episode spending.
- Update factors
  - Hospital and regional-level files with update factors to account for differences in payment systems between the end of the baseline period and the performance period
- Wage index
  - Hospital-level file with wage indices

# Methodology Overview

- Trend historical episode payments to 2014 dollars
- Cap high-cost episode payments
  - Cap high-cost episodes at 2 standard deviations above the regional mean for each DRG-fracture combination.
- Pool historical episode payments for each hospital
- Trend the pooled payment to 2016
  - Trending is done through update factors
- Blend hospital and regional payments
- Reintroduce wage factors
  - Moves pooled averages to real dollars
- Calculate target prices for each DRG-fracture combination
  - 3% discount is applied

# Target Price Flow Chart



# Questions