

Registry Office Hours for The Joint Commission Advanced Certifications Q & A

- 1. Does the American Spine Registry (ASR) have any strategic partnerships that provide financial (i.e., reimbursement) benefits to participation? Is there a cost to sites and how do we justify the cost?**

As a Qualified Clinical Data Registry (QCDR), we do have proof of participation of your site submitting data in a QCDR and that can help with reimbursement from the Medicare perspective. We are exploring different prior authorization pilot programs with payers for the American Joint Replacement Registry (AJRR) to help alleviate that burden and administrative cost. There is no additional cost to the annual registry fee for participating in quality programs.

- 2. For Unplanned Return Visit to the OR, for exclusion, how are multi-stage procedures identified - is it inherent to the ICD-10 or CPT procedure codes?**

An episode of care that is known to involve multi-staged procedures would not be categorized as an unplanned return. Instead, these will be submitted within the Procedure Layout file, and there is a data point that allows these cases to be marked as "Multi_Stage".

- 3. Are cases collected per calendar year or financial year?**

Cases should be submitted on a rolling and monthly basis (no less frequently than quarterly) to be able to meet the requirements for The Joint Commission Advanced Certification.

- 4. Are any certified spine centers reporting measure data directly from ASR to The Joint Commission?**

There is not a direct report from the RegistryInsights® platform currently, however, sites are able to login to their RegistryInsights account to view numerator/denominator rates for the performance measures and enter this data into The Joint Commission portal.

- 5. How does The Joint Commission use AJRR data during certification surveys?**

For the initial certification survey, The Joint Commission wants to see the performance measure data in your presentation portion for the most recent 4 months. This data also needs to be entered into The Joint Commission portal prior to the survey. For recertification visits and intracycle calls, The Joint Commission wants the last year of data to be entered into the portal and be available for review on the call or during the visit.

6. Is there a way I can enter data directly into the ASR instead of having my third-party vendor resubmit data when there are errors?

All ASR participants are provided a secure pathway to drop data files. If a facility no longer chooses to utilize a third party to upload, it can send data through this secure path.

7. If we are established with the ASR, how do we take the next steps for The Joint Commission certification?

Once you are successfully submitting your procedure, post-operative, and patient-reported outcome measures (PROMs) files to ASR, you can reach out to The Joint Commission to identify additional advanced certification requirements and schedule your initial survey date. You should also log in to your RegistryInsights account to view the Advanced Certification in Spine Surgery (ACSS) performance measures. Please review the ACSS resources [here](#) or contact RegistrySupport@aaos.org for any questions around your performance measure data.

8. Does extended stay count as an index visit for readmission?

Yes. This would be part of the same index procedure, as the patient was not discharged. If there is a discharge and then the patient returns to the hospital, that would be submitted in the post-op file.

9. Are measure data as pulled directly from ASR accurate enough to report directly to The Joint Commission?

Yes, the performance measures are calculated based on measure criteria jointly established by ASR and The Joint Commission, utilizing diagnosis coding submitted with your post-op cases and PROMs assessments linked to primary spine degenerative procedures. Please see the [ACSS Participant Toolkit](#) here for detailed information on the data needed to accurately calculate and display your measure data.

10. Our facility is not currently part of a spine registry. What is the process to become a part of the registry?

Please contact RegistryEngagement@aaos.org to help you get started today.

11. Do we have to pull our data back out of the Registry to submit to The Joint Commission or does your team assist with these reports?

There have been discussions with The Joint Commission about directly submitting from RegistryInsights, but currently participants need to log in and pull The Joint Commission measure numerator/denominator information from the dashboard visuals and/or from the [TJC Data Detail Report](#).

12. How does AJRR display inpatient vs. outpatient data for hip and knee? Is there a filter I am missing?

We do not currently display inpatient vs. outpatient data, but we are releasing the feature this fall to include a code type filter to separate out inpatient and outpatient cases in the dashboard. We also have a TJC Data Detail Report that provides the option to filter by care setting and view case-level data.

13. What is the best way to obtain ACSS-08 (pre- and post-op PROMs)?

We are building an ACSS measure detail report to add to the dashboard so sites will be able to drill down to case-level detail and identify patients falling into and out of all performance measures. For obtaining the pre- and post-op PROMs, many sites capture pre-op PROMs in clinic and utilize messaging through an electronic health record (EHR) or third-party vendor to capture the post-op assessments. We have a PRO Tool available in RegistryInsights at no additional cost to participants that includes an email feature to send PROMs links to patients at selected intervals pre- or post-op and via a kiosk mode on computer or tablet in clinic.

14. Why aren't there published measure information sheets for the Spine measures, similar to Joint measures or other measures for The Joint Commission?

The Advanced Total Hip and Knee Replacement (THKR) Certification and other measures for The Joint Commission were created prior to collaboration with the AAOS registries. The ACSS is a younger program, and the measures were created to be based on coding to reduce the data burden. There are also not as many inclusion and exclusion criteria built into these performance measures for that same reason. The main goal of the measures is to have sites capturing and tracking outcomes metrics, and then reassess once The Joint Commission has received more performance data.

15. The national benchmarks marks on The Joint Commission measures are static. When are they going to be updated to reflect current benchmarking?

The static benchmark is a historical one provided by The Joint Commission when we built the measures into the dashboard. Once the data threshold for sites submitting The Joint Commission data elements reaches a threshold to create reliable registry benchmarks, we will be updating these on an annual basis.

16. Will the monthly office hours meetings only cover this information, or will it also cover regular ASR questions?

Future office hours will be specific for either The Joint Commission AJRR or The Joint Commission ASR questions.

17. Where can we find the exclusion criteria for the performance measures for Spine?

Sites can refer to the [TJC ACSS Participant Toolkit](#) for measure details.

18. I have patients who leave Against Medical Advice or via hospice post-surgery. Is there a way to document this in the procedure file?

Yes, the Discharge to Home data element accepts any two-digit Centers for Medicare & Medicaid Services (CMS) code, including those discharged to hospice or AMA. Please refer to the AJRR or ASR data dictionary for additional detail on acceptable values.

19. Is AAOS looking at more benchmark reporting?

Our current dashboard update project is looking to add more benchmarking characteristics for participating institutions (bed count, institution type, etc.). Be on the lookout for announcements and webinars covering these updates in the fall.

20. Is my PROMs portal set up?

Please contact RegistryEngagement@aaos.org to check on your portal or help you get set up otherwise.

21. Does the ASR platform have the ability to score various PROs? For example, our site has scores for individual questions within the VR-12, but we have not calculated the summary scores. Or do you have guidelines on how to calculate these summary scores?

Yes, RegistryInsights will automatically calculate PROMs summary scores based on the individual assessment question answers submitted.

22. You mentioned a 50% capture rate of postop PROMs. Is that for both 90-day and 12-month?

This refers to the CMS Inpatient Quality Reporting THKR PROMs performance measure and it applies to the 1-year time point. The Joint Commission currently requires a 3-month post-op PROM but will be adjusting hip and knee to match the CMS 1-year time point in 2024.

23. Is the 3-month PROM required?

Yes, for The Joint Commission Advanced Certifications, a baseline/pre-operative PROM is required as well as 3-month PROMs which can be collected from 30 days after the procedure to 150 days after the procedure.

24. If we use a vendor to submit our PROMs, is there a fee associated to that vendor?

There would be a fee associated with using the vendor. We have a list of Authorized Vendors who are approved to submit Registry data on your behalf and any agreements would be between your site and the vendor.

25. When did you move to the newest version of the PROMIS Global (V1.2)?

We currently accept all versions and haven't sunset any yet.

26. Is it true The Joint Commission is ending the 90-day PROM and moving to just the 1-year PROM effective in 2024?

Yes, the THKR PROMs measure will move to a 1-year post-op time point in 2024.

27. What's the earliest timeframe to capture the 1-year PROM?

The earliest time you can capture the 1-year PROM is 300 days after the procedure and it will continue to be accepted until 425 days after the procedure.

28. 3-month PROMs are required for spine - is that for The Joint Commission or is that just regular ASR reporting?

It is a requirement for The Joint Commission.

29. Can an outpatient procedure count as an index visit to a subsequent visit?

Yes, we accept outpatient index procedures and can link post-op encounters/readmissions to outpatient primary procedures.

30. The Joint Commission is aligning with CMS on the total hip/knee postoperative measure as of January 2024. Will there be an updated data dictionary or specs for this new change? Our data analyst will need time to reflect this change on our database.

We already accept the 1-year time point within our current data specifications, but we will be making changes to our dashboard measures to pull from the 1-year time point versus the 3-month time point for TJC THKR-5. Sites will need to adjust their capture window to 300-425 days post-op and select the 1-year value for the PROMs Time data field.

31. Will AJRR partner with PatientIQ like how the Fracture & Trauma Registry has?

That is currently being discussed with our other registries and we will make sites aware as new opportunities are available.

32. Is the 50% capture rate for both pre- and post-op PROMs being complete?

Yes, the 50% capture rate threshold applies to the pre- and 1-year post-operative PROMs capture for the eligible fee-for-service Medicare inpatient population for the Centers for Medicare & Medicaid Services Hospital Inpatient Quality Reporting PROMs performance measure for total hip and knee replacement.



Advanced Total Hip and Knee Replacement Certification

Advanced Certification in Spine Surgery