	ENTITY/HOSPITAL	NUMBER
	INTEGRIS Health	SYS-CMP-115
	MANUAL	EFFECTIVE DATE
	System Policy & Procedure	10/16
	SUBJECT	REVIEWED
	CJR Beneficiary Notification	REVISED 09/18

1.0 PURPOSE

The Centers for Medicare and Medicaid Services (CMS) requires that the hospitals within INTEGRIS Health (INTEGRIS) that are participating in the Comprehensive Care for Joint Replacement (CJR) Model establish a policy for the provision of written notices to eligible Medicare beneficiaries who will have a CJR Episode of Care. The CMS CJR model does not restrict a Medicare beneficiary’s freedom of patient choice in the discharge planning process. The goal of the CJR model is to encourage the Hospitals and CJR Collaborators to provide better, more coordinated care during a Medicare beneficiary’s stay and following hospital discharge. The CJR model is expected to lower the cost of care to Medicare without increasing patient costs for covered care.

2.0 POLICY

All CJR beneficiaries receiving lower extremity joint replacement (LEJR) must be notified of their participation in the CJR model upon admission to a Hospital or immediately following the decision to schedule an LEJR surgery, whichever occurs later.

3.0 SCOPE


This Policy applies to all organizations and personnel (e.g., employees, independent contractors, vendors, volunteers, etc.) of INTEGRIS and specifically the CMS providers checked below.

<input checked="" type="checkbox"/>	INTEGRIS Baptist Medical Center	<input type="checkbox"/>	INTEGRIS Grove Hospital
<input type="checkbox"/>	INTEGRIS Bass Baptist Health Center	<input type="checkbox"/>	INTEGRIS Hospice
<input type="checkbox"/>	INTEGRIS Bass Pavilion	<input type="checkbox"/>	INTEGRIS Miami Hospital
<input checked="" type="checkbox"/>	INTEGRIS Canadian Valley Hospital	<input checked="" type="checkbox"/>	INTEGRIS Southwest Medical Center
<input checked="" type="checkbox"/>	INTEGRIS Health Edmond	<input type="checkbox"/>	Lakeside Women’s Hospital

4.0 POLICIES & PROCEDURES - GENERAL

4.1 Beneficiary Notice by Hospital. Each participating Hospital will provide a written beneficiary notice to eligible Medicare beneficiaries of their participation in the CJR Model. The notice will be provided to eligible Medicare beneficiaries upon admission to Hospital or immediately following the decision to schedule a LEJR surgery, whichever occurs later. The beneficiary notice must contain all of the following:

- 4.1.1 A detailed explanation of the CJR model and how it might be expected to affect the beneficiary’s care;
- 4.1.2 Notification that the beneficiary retains freedom of choice to choose providers and services;

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- 4.1.3 A statement that all existing Medicare beneficiary protections continue to be available to the beneficiary. These include the ability to report concerns of substandard care to Quality Improvement Organizations and 1-800-MEDICARE.
- 4.1.4 A list of providers and suppliers with whom the Hospital has a Collaborator Agreement.
- 4.2 Beneficiary Notice by CJR Collaborator. Each participating Hospital must require any physician or physician group practice that is a CJR Collaborator to provide written notice of the CJR model and the existence of the physician’s sharing arrangement with the Hospital to any eligible Medicare beneficiary that meets the CJR model inclusion criteria. The notice must be provided at the time the decision to under LEJR surgery is made.
- 4.3 Beneficiary Choice. The CJR model does not restrict a Medicare beneficiary’s ability to choose any Medicare enrolled provider or supplier, or any physician or practitioner who has opted out of Medicare.
 - 4.3.1 Beneficiary Opt Out. CMS prohibits beneficiaries from opting-out of the CJR model when receiving care from a participating Hospital; however, the beneficiary retains their freedom of choice to choose providers and services.
 - 4.3.2 Preferred Providers. The Hospital may identify and recommend preferred providers and suppliers consistent with applicable statutes and regulations, but may not limit beneficiary choice to any list of providers or suppliers in any manner other than that permitted under applicable statutes and regulations.
 - 4.3.3 Patient/Family Preferences. The Hospital will respect patient family preferences when they are expressed.
- 4.4 Compliance with Notification. INTEGRIS Corporate Compliance will randomly conduct periodic audits of each Hospital for compliance with the beneficiary notification requirement.

5.0 DEFINITIONS

- 5.1 “*CJR Collaborator*” is limited, for purposes of this policy, to those physicians or physician group practices that agree to meet CJR Selection Criteria, and with whom a participating hospital intends to gainshare (to the extent CJR program savings are generated).
- 5.2 “*CJR Episode of Care*” is an admission of an eligible Medicare beneficiary to a Hospital that eventually results in a discharge paid under Medicare Severity-Diagnosis Related Groups (MS-DRG) 469 (major joint replacement or reattachment of lower extremity with major complications or comorbidities) or 470 (major joint replacement or reattachment of lower extremity without major complications or comorbidities).
- 5.3 “*Collaborator Agreement*” means a written, signed agreement between a CJR collaborator and a participating INTEGRIS hospital that meets the requirements of 42 CFR § 510.500(c).