AJRR Board of Directors and Staff Go to Capitol Hill
Second Annual AJRR Advocacy Fly-In
*Full story on page 3*

CONTENTS
AJRR’s Newest Participants  p. 4  Welcome New Staff  p. 9
Breaking News  p. 4
Publications of Interest  p. 5  The Register Survey  p. 9
AJRR Launches PQRS Reporting  p. 6  Level II and Level III Pilot Update  p. 10
Champions of the Quarter  p. 7  AJRR Completes First Data Audit  p. 11
Upcoming Events  p. 8  Back Cover
What is the AJRR?

The American Joint Replacement Registry (AJRR) is a multi-stakeholder, independent, not-for-profit organization with diverse national constituents. The AJRR’s goal is to optimize patient outcomes through collection of data on all primary and revision total joint replacement procedures in the U.S. The mission of the registry is to enhance patient safety, improve quality of care, and reduce the cost of care.

With an estimated 90 percent capture rate, the registry will provide more comprehensive orthopaedic knowledge and have the potential to identify problems before they are discovered by public health agencies.

More than a data repository, the AJRR provides a wide range of actionable information and reporting that helps improve patient care and hospital management. The AJRR will help with improved patient follow-up and intervention, informed clinical decision-making, better quality control, early detection and an improved product, and increased leverage with payers.

Did You Know?

- AJRR is Hosting Introductory Webinars.
  Would you like learn more about AJRR and what it means to be a participating hospital? We have published our calendar of monthly webinars for those interested in learning more about AJRR’s reporting and dashboard capabilities. [Click Here](#) to register for a webinar.

- AJRR Promotional Materials for Participants.
  We have developed a few items which hospitals may use to promote their collaboration with AJRR. We are happy to provide an “AJRR Participant” logo for use on brochures, newsletters, or websites. We also have a template press release which you are free to tailor for your Surgeon Champion and local community. If you did not receive these materials, but would like to use them at your participating hospital, please contact info@ajrr.net.

The Register is the official quarterly e-newsletter of the American Joint Replacement Registry serving to keep interested stakeholders updated on its activities. To contact The Register with article ideas, comments, or concerns, please contact Lori Boukas, Director of Marketing and Communications at boukas@ajrr.net.

Contributing authors: Caryn Etkin, PhD, MPH, Judi Buckalew, BSN, MPH, and Lori Boukas
Page layout and coordinator: Lore Venable
© 2014. All rights reserved.
One of the goals of the AJRR is to engage with governmental agencies, medical societies, and the Public Advisory Board to ensure the AJRR remains current in the requirements and objectives of improving patient outcomes. We accomplish this through education and awareness, including visits to Capitol Hill. AJRR held its Board of Directors meeting in Washington, DC on September 10, 2014. While in town, AJRR leaders visited and held meetings with Congress, the Food and Drug Administration (FDA), and the Centers for Medicare & Medicaid Services (CMS) to engage proactively on issues of concern.

The meeting at CMS was with Daniel Green, MD, Medical Officer for the Center for Clinical Standards and Quality and Molly MacHarris, QCDR Program Director. The focus of the meeting was to get information on pathways to obtaining access to Medicare claims data to facilitate AJRR longitudinal studies and to clarify various Qualified Clinical Data Registry (QCDR) operational questions. Our group engaged in a very informative dialogue on Physician Quality Reporting System (PQRS) implementation and implications for enhanced registry utilization.

The meeting at FDA was with Danica Marinac-Dabic, PhD, MD, Director of the Division of Epidemiology at the Center for Devices and Radiographic Health. Our meeting was very timely, as plans for a three-day FDA public meeting devoted to registry discussions had just been announced, and AJRR was asked to play a leadership role in organizing and presenting at the October 16 session on orthopaedic registries.

AJRR leaders also held meetings in both chambers of Congress to stress the need for alleviating uncertainty over the regulatory requirements of the Common Rule which is creating barriers for hospitals that would otherwise participate in registry data collection efforts.

In the Senate, AJRR met with staff for the leaders of the Senate Health, Education, Labor, and Pensions (HELP) Committee, Senator Tom Harkin (D-IA) and Senator Lamar Alexander (R-TN), and with staff representing Senate Finance Committee Chair Ron Wyden (D-OR). All were eager to hear about the data collection efforts from a functioning registry. Though Senate action is not expected this year, staff shared that they are already engaged in a review of the Common Rule and that a Congressional hearing and legislation might be considered in the new Congress.
AJRR’s Newest Participants

**Catholic Health Initiatives**
- Alegent Creighton Health Mercy Hospital
- Avista Adventist Hospital
- Avista Surgery Center
- Castle Rock Adventist Hospital
- Creighton University Medical Center
- Good Samaritan Hospital
- Harrison Medical Center
- Highline Medical Center
- Immanuel Medical Center
  - Jewish Hospital
  - Lakeside Hospital
- Littleton Adventist Hospital
- Memorial Hospital - Chattanooga
- Memorial Hospital - Hixson
- Mercy Hospital - Corning
- Mercy Medical Center
- Mercy Regional Medical Center
- Midlands Hospital
- Parker Adventist Hospital
- Penrose Community Urgent Care
- Penrose Hospital
- Porter Adventist Hospital
- St. Anthony Hospital - Gig Harbor
- St. Anthony Hospital - Lakewood
- St. Anthony North Hospital
- St. Anthony Summit Medical Center
- St. Catherine Hospital
- St. Clare Hospital
- St. Elizabeth Hospital
- St. Francis Hospital - Federal Way
- St. Francis Medical Center
- St. Gabriel’s Hospital
- St. Joseph East
- St. Joseph Medical Center
- St. Mary-Corwin Medical Center
- St. Rose Ambulatory & Surgery Center
- St. Thomas More Hospital

**University Hospitals Health System**
- Southwest General Health Center
- St. John’s Medical Center, Cleveland
- UH Regional Hospitals, Bedford, and Richmond Campuses
- University Hospital Ahuja Medical Center
- University Hospitals Case Medical Center
- University Hospitals Conneaut Medical Center
- University Hospitals Elyria Medical Center
- University Hospital Geauga Medical Center
- University Hospitals Geneva Medical Center
- University Hospitals Parma Medical Center
  - Bergen Mercy Medical Center
  - Berkshire Medical Center
  - Carondelet St. Joseph’s Hospital
  - Douglas County Hospital
  - Glens Falls Hospital
  - Harlingen Medical Center
  - Health Central Hospital
- Hennepin County Medical Center
- Keck Hospital of USC
  - Largo Medical Center
- Marshalltown Medical and Surgical Center
- Meritus Medical Center
- Midwest Orthopedic Specialty Hospital
- MidState Medical Center
  - Monroe Clinic
  - Montefiore Medical Center
- Nebraska Orthopaedic Hospital
- New England Baptist Hospital
- Newton Medical Center
- Riverwood Healthcare Center
  - St. Charles Medical Center
- University of Arizona Medical Center - South Campus
- University of Arizona Medical Center - University Campus
- University of Mississippi Medical Center
  - Virtua Marlton
  - Virtua Voorhees

**Cleveland Clinic Foundation**
- Amherst Hospital
- The Cleveland Clinic Foundation
- Cleveland Clinic Children’s Hospital for Rehabilitation
  - Fairview Hospital
  - Lakewood Hospital
  - Marymount Hospital
  - South Pointe Hospital
- Ashtabula County Medical Center
- Cleveland Clinic Florida Clinic Weston
  - Euclid Hospital
  - Hillcrest Hospital
  - Lutheran Hospital
  - Medina Hospital

Visit us at [www.ajrr.net](http://www.ajrr.net) for a full list of our participating hospitals.
Omnibus Ruling

On January 17, 2013, the U.S. Department of Health and Human Services unveiled its final omnibus rule (Final Rule) which implements privacy, security, and enforcement measures under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Health Information Technology for Economic and Clinical Health Act (HITECH), and the Genetic Information Nondiscrimination Act (GINA). The compliance deadline for Covered Entities and their Business Associates was September 23, 2014. We thank our participants for their cooperation with completing Final Rule compliant contracts.

AJRR Annual Report

AJRR is pleased to announce that our first Annual Report will soon be released. This first report will present de-identified Level I data on over 43,000 procedures from 123 participating hospitals. It will also contain updates on our progress with Level II and Level III data, the component database, and strategic alliances. The report will be available on our website in early November.

An unbiased review of the document was completed by members of the AJRR Commission. Commission members are non-conflicted individuals who conducted an independent review of the data included in the Annual Report. We appreciate the efforts of all of those who participated in the review process.

AJRR Total Joint Replacement Risk Calculator

AJRR received a Total Joint Replacement Risk Calculator by Ortho Apps, a collaborative of Massachusetts General Hospital, Mayo Clinic, and the University of California, San Francisco. The calculator is intended to assist surgeons in assessing patient risk in relation to their co-morbidities. The risk tables were generated utilizing several years of CMS data and includes table values for over 30 co-morbidities. Once co-morbidities and patient information are entered, such as gender and hip or knee replacement, the calculator provides two risk graphs: 1) Patient Mortality within 90 Days and 2) Periprosthetic Joint Infection within Two Years. Each graph includes comparisons on the risk for the patient, the same demographic with no co-morbidity, and the Medicare population average. The Risk Calculator will be posted on the AJRR web site in early November.


A significant accomplishment for AJRR in 2014 was being named a Qualified Clinical Data Registry (QCDR) by the Centers for Medicare & Medicaid Services (CMS). A QCDR is an entity that collects medical and/or clinical data for the purpose of patient and disease tracking to foster improvement in the quality of care provided to patients. This centrally compiled information, which will include physician and patient observations and data, will highlight joint replacement concerns, advance orthopaedic learning, and ultimately, improve patient care and outcomes.

New to Physician Quality Reporting System (PQRS) in 2014, a QCDR allows practitioners to define and deploy healthcare quality measures specific to their areas of practice. CMS then approves the measures and adopts them into the QCDR PQRS program, giving Eligible Professionals (EPs) greater flexibility in reporting measures. Through a QCDR, EPs can report PQRS measures, non-PQRS measures, or both. Successful PQRS reporting makes EPs eligible to seek CMS incentive payments, avoid penalties, and participate in the Physician Value-based Payment Modifier (VBM) program for reporting year 2014.

AJRR will be partnering with CECity, a leading provider of cloud-based registry platforms for performance improvement, value-based payment, and professionalism, to create the custom platform for data submission to CMS. The CECity platform will assure that EPs meet all of the data, scoring, and attestation requirements before they submit their PQRS reports to CMS for payment.

It is important for our constituents to note that CECity is a third-party contractor with AJRR. If EPs wish to submit quality measures using the process described here, they will be required to utilize the CECity online platform. CECity will submit batch data on EPs who are under contract with AJRR so it can be integrated into our data system.

To pre-register for the QCDR, visit [www.medconcert.com/AJRR](http://www.medconcert.com/AJRR).
Champions of the Quarter

Each month since the inception of The Register, we have been highlighting individuals from a participating hospital who have demonstrated outstanding cooperation and professionalism while helping to implement the AJRR registry into their organization. This quarter, we are pleased to share with you two individuals who are true AJRR Champions.

Alan Willis is the Director of Surgical Services at Marshalltown Medical and Surgical Center in Marshalltown, Iowa and has oversight of 10 operating rooms and two endoscopy rooms.

Besides overseeing the implementation of the AJRR registry, Mr. Willis has demonstrated success with leading multiple departments involving Surgical Services and producing new service lines while improving upon others, to include five da Vinci Robot programs, Joint Camp, Bariatric Program, Open Heart, ENT, Wound Care, and a regionally recognized medical training lab. Additionally, he has assisted with multiple anesthesia service reorganizations that produced better service-line delivery for patient, physician, and staff satisfaction outcomes.

Mr. Willis is a tenured leader promoting staff and physician relations, possessing a well-forged acumen for customer service. In addition to operational oversight of the inpatient and outpatient surgical experience, he is assisting with the planning and implementation of the new construction of phase I building project of their Outpatient Surgery Center.

Mr. Willis’ busy career and life remains grounded with the assistance of his wife, Dawnette, of 25 years and their four children’s various activities. Thank you to Mr. Willis and his team for your participation and support!

Erin Almeda has a degree in Health Management and Policy from the University of New Hampshire and a Master of Business Administration from Rivier College. She has worked at Concord Hospital in Concord, New Hampshire for twenty-seven years serving in various project management and strategic capacities to develop and implement new clinical programs. She is currently the Director of Program Development for the Orthopaedic Institute at Concord Hospital. In this role, she serves as the point of contact for the various orthopaedic practices regarding administrative and strategic initiatives and is responsible for overseeing the orthopaedic service line.

As an organizational priority, Ms. Almeda worked with the orthopaedic leadership team at Concord Hospital to join the American Joint Replacement Registry in 2013 in order to benchmark against other providers around the country to continually strive to provide the best care possible to its patients.

With the support and efforts of the Concord orthopaedic team, the AJRR registry moved from signed contracts to data submission smoothly and quickly. Thanks to Ms. Almeda and all the folks at Concord Hospital for their support and dedication!
Welcome New Staff!

Meet Lori Boukas, AJRR’s new Director of Marketing and Communications. In this newly created position, Ms. Boukas will help shape the marketing and communications activities of the AJRR bringing focus and clarity to its messaging, setting strategy, and defining campaigns and programs to help deliver on the organization’s mission. She will also oversee the recruitment efforts as well as manage the Program Advancement team.

With more than 25 years of marketing and communications experience, Ms. Boukas has served in a variety of industries, including over 10 years in healthcare. Before joining AJRR, she was Director of Communications and Meeting Services at the American Board of Medical Specialties, the organization overseeing physician board certification and maintenance of certification programs. Previously, Ms. Boukas held leadership marketing positions at VeridianHealth and Bell & Howell. Ms. Boukas received a master’s degree in Integrated Marketing Communications from Roosevelt University, in Chicago, Illinois and a bachelors degree in Communications from Illinois State University, in Normal, Illinois. An avid Chicago sports fan, she’s looking forward to seeing the Chicago Cubs play in a World Series championship game once in her lifetime!

The Register – Tell Us What You Think.

- AJRR introduced The Register newsletter two years ago in the summer of 2012. Click Here to view past issues of The Register.
- It’s always been our goal to provide readers with the latest news and information pertaining to our organization and the registry.
- In an effort to continue to provide relevant and interesting news to you, we’ll be revamping this newsletter in the future and would like your help in the improvement process.
- Please click on the question mark and take a moment to answer a few questions pertaining to The Register.
In the House, AJRR met with staff of the House Energy & Commerce Committee, Representative Fred Upton (R-MI) and Representative Henry Waxman (D-CA), to thank them for voting H.R. 5214 out of Committee on July 30, 2014. The bill was introduced by Representative Pete Olson (R-TX) and requires HHS to publish recommendations within a year of enactment on the development and use of registries to improve care. AJRR, working with the Registry Coalition, was able to secure a commitment from Energy & Commerce Committee staff that our Common Rule language will be included in H.R. 5214 when it is considered for a vote by the House of Representatives.

AJRR Board members also met with Representative Bill Pascrell, Jr., (D-NJ) to thank him for his continued leadership on behalf of AJRR and clinical data registries.

AJRR met with the House Ways and Means Committee staff to discuss draft legislation entitled “The Protecting Integrity of Medicare Act of 2014” which contains a provision requiring the Office of Human Research Protection to issue guidance on the applicability of the Common Rule to clinical data registries within one year of enactment. It is unlikely that Congress will be able to pass either H.R. 5214 or the Medicare Integrity Act this year, but AJRR expressed appreciation for Congressional recognition of the Common Rule clarification issue.

During the Welcome Back to Congress Reception held at the AAOS Office of Government Relations in Washington, DC, AJRR staff and Chair William Maloney, MD met with numerous Congressional Members and staff including Representative C.A. Dutch Ruppersberger III (D-MD). Congressman Ruppersberger is the Ranking Democrat of the House Permanent Select Committee on Intelligence and is a national media spokesperson on international terrorism and war. He also serves on the Congressional Pro Sports Caucus, the Congressional Brain Injury Task Force, The Congressional Heart and Stroke Coalition, and the House Biotechnology Caucus.

Level II and Level III Pilot Update

In November 2013, AJRR launched a pilot program of our Level II and Level III data systems. The pilot program concluded in August and collected data on over 9,000 procedures from 18 of our participating hospitals. Consistent with our earlier pilot findings (as reported in the Spring 2014 issue of The Register), all pilot sites were able to extract Level II data from their Electronic Medical Record (EMR) system. Sites then submitted Level II data in conjunction with their Level I data via a .xls or .csv file.

We recognize that the burden on hospitals to submit Level II is significant. To avoid creating undue burden on our participants, AJRR is developing final Level II data definitions, specifications, and required data elements. These will be released in the next few months. Subsequent updates to the Level II specifications will be made on a yearly basis. With robust Level II data in our system, AJRR will be able to provide risk adjusted data to our participants.
Starting in April 2014, the West Virginia Medical Institute (WVMI) undertook a process to audit a sample of AJRR’s 2013 data. The audit included two parts: a) a review of the accuracy of the records submitted to AJRR by hospitals and b) a completeness assessment to ensure hospitals were submitting to AJRR all primary and revision hip and knee arthroplasty cases performed during a given time frame.

The accuracy audit reviewed 40 records from each of the 11 randomly selected facilities for a total of 440 records. Using an audit tool created by WVMI, their staff reviewed data submitted by facilities to AJRR compared to hospital medical records. The overall audit agreement rate was 92.3%. While 92.3% is an acceptable score, there were a few issues that arose during the audit process, which we are now addressing. One example of this is the data element “Ethnicity.” It is an optional field that was predominately missing from both registry and facility data. As such, it was not included in the final calculations.

The completeness assessment compared a list of cases provided by the AJRR with a primary procedure code for hip or knee replacement for a specified time period. The overall record completeness assessment rate was 77.6%. There were 190 records submitted by the facilities that were not found in the AJRR registry list. This was due to the fact that some facilities submitted procedural data to WVMI for ICD-9 procedure codes that AJRR does not accept. Based on the inclusion criteria of primary procedure code (PPX) and primary procedure date (PPXDATE), there were no similarities or trends observed to suggest a reason why these records were not submitted to the AJRR.

We thank the 11 hospitals who participated in our first audit. Their assistance in this process was invaluable to us. We learned a great deal about hospital data submission and gained insight on how we can better serve our participants in the future.
Please support the AJRR through donations to the Orthopaedic Research and Education Foundation. Scanning this QR Code will take you directly to the AJRR donation page.

We’re Moving

Please update your records.

On December 5, the AJRR offices will be moving to our new location.

American Joint Replacement Registry
9400 W. Higgins Road
Suite 210
Rosemont, IL 60018-4975

All contact phone numbers will remain the same.

AJRR is moving along with the American Academy of Orthopaedic Surgeons. To learn more, visit www.buildingorthopaedics.org