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American Joint Replacement Registry (AJRR) tapped to provide orthopaedic patient outcome data to Centers for Medicare and Medicaid Services (CMS)  
Registries put patients first by tracking quality outcomes, highlighting concerns

ROSEMONT, Ill.—The American Joint Replacement Registry (AJRR), the nation’s largest orthopaedic registry, is one of 41 organizations recently designated as a Qualified Clinical Data Registry (QCDR) by the Centers for Medicare and Medicaid Services (CMS) to provide expanded, comprehensive medical procedure outcome information, including patient safety data. 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.

The AJRR is an independent nonprofit organization, created to optimize patient outcomes through the collection of data on primary and revision total joint replacement procedures in the U.S.

The QCDR program is part of the CMS Physician Quality Reporting System (PQRS), a data collection effort that utilizes reimbursement incentives to encourage the reporting of patient outcomes. Currently, eligible professionals (primarily physicians) provide data and information directly to CMS. With the new program, physicians will provide information directly to a designated QCDR.

Initially, AJRR will provide a broad range of data on hip and knee replacement outcomes to CMS. Currently, AJRR receives data from 1,800 orthopaedic surgeons performing more than 100,000 procedures at 170 hospitals in 48 states. Next year, AJRR hopes to expand its data collection to include more than 250,000 procedures, and include physician as well as patient feedback on outcomes. Working with the American Academy of Orthopaedic Surgeons (AAOS), AJRR hopes to expand its data collection to include other orthopaedic procedures.

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For the first time, patients also will be encouraged to provide online feedback regarding the success, side-effects and other outcomes pertaining to their specific treatment and device to the QCDRs. Orthopaedic patients will provide feedback to AJRR. Beginning in 2015, physicians who send outcome data to an appropriate and accredited QCDR will receive higher CMS reimbursements.

Through this new program and accreditation, “more orthopaedic surgeons will provide a broader range of data, and encourage their patients to do the same, on important hip and knee replacement outcomes, including side-effects, pain relief and post-surgical mobility,” said William J. Maloney, MD, chair of the AJRR board of directors, and chair of orthopaedic surgery at Stanford University Medical Center. “The collection of this information through one central registry has the potential to significantly improve orthopaedic outcomes, including patient safety.”

“These registries put patients first,” said AAOS President Frederick M. Azar. “Patients need to know that there is a platform for sharing their joint-replacement perceptions and experiences. The Academy looks forward to working with AJRR to expand the number of procedures included in the data compilation shared with CMS to ultimately provide safer, more successful and cost-effective orthopaedic care.”

“The American Association of Hip and Knee Surgeons (AAHKS) fully supports the development and implementation of registry data collection as a great benefit for our patients,” stated Brian S. Parsley, MD, president of AAHKS. “The AJRR will provide a valuable resource to critically evaluate the outcomes of total joint replacements in the U.S. The knowledge gained through AJRR will help identify Orthopaedic Best Practices, best products and result in continuous improvements in patient care.”

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