COMPREHENSIVE JOINT REPLACEMENT MODEL COLLABORATOR SELECTION PROCESS POLICY

WHEREAS, pursuant to §3021 of the *Patient Protection and Affordable Care Act* and 42 CFR §510, the Centers for Medicare & Medicaid Services ("CMS") has mandated implementation of the Comprehensive Care for Joint Replacement ("CJR") model, in which acute care hospitals in certain selected metropolitan statistical areas ("MSAs") will be given the opportunity to earn performance-based payments by appropriately reducing expenditures and meeting certain quality metrics payments for episodes of care for lower extremity joint replacement ("LEJR") or reattachment of a lower extremity (MS-DRG 469, or MS-DRG 470);

WHEREAS, CMS has mandated implementation of the CJR model in the Tampa-St. Petersburg-Clearwater, Florida MSA including Hernando, Hillsborough, Pasco and Pinellas Counties;

WHEREAS, BayCare Health System, Inc. ("BayCare") owns and operates acute care hospitals in the Tampa-St. Petersburg-Clearwater, Florida MSA including Hernando, Hillsborough, Pasco and Pinellas Counties, and thus, participates in the CJR model ("CJR Model");

WHEREAS, BayCare is required to establish a Collaborator Selection Process Policy pursuant to 45 CFR §§510.500(a)(7) and 510.500(b)(5)(i) to develop a process for selecting CJR providers and suppliers for sharing gains and risk as CJR collaborators, BayCare has established the following criteria of which all physician group practices must meet in order to participate as CJR collaborators with BayCare:

COLLABORATOR PHYSICIAN QUALITY METRICS

Measure	Description	Data Source	Fracture Status	Partial Credit Potential	Weighting
Citizenship					
Orthopedic Service Line Meeting Attendance	Physician attendance at Hospital Section or BayCare Orthopedic Service Line meetings	Manual	All	U or 1 meetings per year = 0% 2 meetings per year = 50% 3 meetings per year = 75% 2 meetings per 6-month period = 100%	20%
Outcomes					
Discharge to Home or Home with Home Health	Percentage LEJR discharges to home or home with Home Health	Automatic	Non-Fracture	0.0%-24.9% = 0% 25.0%-49.9% = 50% 50.0%-89.9% = 75% 90.0%-100% = 100%	- 20%
			Fracture (10 case minimum to Qualify)	0.0%-4.9% = 0% 5.0%-10.9% = 50% 11.0%-19.9% = 75% 20%-100% = 100%	
Revisit Rate	AII-Cause hospital revisit rate within 30-days of discharge Date of Index Admission (Percentage)	Automatic	Non-Fracture	12.5% or greater = 0% 10%-12.4% = 25% 8.0%-9.9% = 50% 0.0%-7.9% = 100%	30%
Power Plan Utilization	Percentage of pathway power plan utilized	Automatic	All	0.0%-49.9% = 0% 50.0%-59.9% = 25% 60.1%-69.9% = 50% 70.0%-89.9% = 75% 90.0%-100% = 100%	20%
Internal Cost Metric	Savings on Cement used in procedures, on a cost-per-case measurement; Aquamantys specifically and ALBC*	BayCare Accounting	All	Increased Cost = 0% Decreased Cost 0.1%-0.9% = 25% Decreased Cost 1.0%-2.4% = 50% Decreased Cost 2.5%-4.49% = 75% Decreased Cost 4.5% or Greater = 100%	10%

*If a provider has less than 2% of their total case population in the baseline period with no Aquamantys or ALBC use, they automatically qualify for the full 10% Internal Cost Metric score

Note: 45 CFR 510.500(a)(7) states, "This set of policies must contain criteria for selection of CJR collaborators related to, and inclusive of, the quality of care to be delivered by the CJR collaborator to beneficiaries during a CJR episode. The selection criteria cannot be based directly or indirectly on the volume or value of referrals or business otherwise generated by, between or among the participant hospital, CJR collaborators, and any individual or entity affiliated with a participant

hospital or CJR collaborator. All collaborator agreements must require the CJR collaborator to have met, or agree to meet, the quality criteria for selection.]						