

## Model Overlap Frequently Asked Questions (FAQ)

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### **Q1: Can entities participate in both the Bundled Payments for Care Improvement Advanced (BPCI Advanced) model and other models, initiatives, or programs at CMS?**

**A1:** Rules regarding Medicare providers' participation in BPCI Advanced and other Centers for Medicare & Medicaid Services (CMS) initiatives, models, programs or demonstrations appear below:

- Participant hospitals in the Comprehensive Care for Joint Replacement (CJR) model can participate in BPCI Advanced, but they cannot participate in Clinical Episodes also included in CJR. However, Participants who selected the Orthopedic Clinical Episode Service Line Group for itself or any of its Downstream Episode Initiators may be able to trigger Major Joint Replacement of the Lower Extremity (MJRLE) Clinical Episodes at former CJR participant hospitals once they are no longer participating in CJR.
- In Model Years 1-5, BPCI Advanced allowed overlap with the Oncology Care Model (OCM). This meant that one model did not take precedence over the other. Rather, CMS adjusted OCM performance-based payments for BPCI Advanced Net Payment Reconciliation Amount (NPRA) payments based on the proportion of the BPCI Advanced Clinical Episode that overlaps with the OCM episode.
- Similar to the OCM overlap approach, BPCI Advanced will allow overlap with the Enhancing Oncology Model (EOM). When BPCI Advanced and EOM episodes overlap, CMS will prorate the BPCI Advanced Reconciliation amount to capture overlapping expenditures. This prorated BPCI Advanced Reconciliation amount is included in EOM payment calculations such that episode expenditures are not double counted across the two models.
- Participants in the Next Generation Accountable Care Organization (NGACO) Model (applicable to Model Years 1-4), Vermont Medicare ACO Initiative, Comprehensive End-Stage Renal Disease (ESRD) Care (CEC) Model's ESRD Seamless Care Organizations (ESCOs) with downside risk (applicable to Model Years 1-3), the Global and Professional Direct Contracting (GPDC) Model (applicable to Model Years 4-5), the ACO Realizing Equity, Access, and Community Health (ACO REACH) Model, and the Comprehensive Kidney Care Contracting (CKCC) Options of the Kidney Care Choices (KCC) Model can participate in BPCI Advanced. However, beneficiaries who are aligned or assigned to participants in these models are not able to trigger BPCI Advanced Clinical Episodes. If the Medicare provider serves other beneficiaries who are not aligned or assigned for purposes of these models, those beneficiaries would be able to trigger a BPCI Advanced Clinical Episode.
- For Model Years 1 & 2, Participants in an ACO in the Medicare Shared Savings Program Track 1, 1+, 2, BASIC track (levels A thru E), and ENHANCED track (formerly known as Track 3), can participate in BPCI Advanced. However, beneficiaries who are assigned to

an ACO in the ENHANCED track are not able to trigger BPCI Advanced Clinical Episodes. If an ENHANCED track ACO participant serves other beneficiaries outside the ACO, those beneficiaries would be able to trigger a BPCI Advanced Clinical Episode.

- For Model Years 3-6, Participants in an ACO in the Medicare Shared Savings Program (MSSP), for all tracks and levels, can participate in BPCI Advanced. BPCI Advanced will not exclude beneficiaries assigned to any MSSP ACO. To address Clinical Episodes that span between Model Year 2 & 3, CMS will apply the BPCI Advanced Model Year 1 & 2 Medicare Shared Savings Program overlaps policy to Clinical Episodes with a date of discharge from the Anchor Stay or completion of the Anchor Procedure on or prior to December 31, 2019. Clinical Episodes that have a date of discharge from the Anchor Stay or completion of the Anchor Procedure on or after January 1, 2020 will fall under the BPCI Advanced Model Year 3 Medicare Shared Savings Program overlaps policy.
- Hospitals participating in the Rural Community Hospital Demonstration, Pennsylvania Rural Health Model, or those located in Maryland, including those in the Maryland All-Payer Model or Maryland Total Cost of Care Model are excluded from being Episode Initiators in BPCI Advanced. Likewise, Clinical Episodes cannot be triggered at these hospitals.
- Participants in the following models can participate in BPCI Advanced: Comprehensive Primary Care Plus (CPC+) Model (applicable to Model Years 1-4); Primary Care First (PCF) Model; Kidney Care First (KCF) Option of the KCC Model; and End-Stage Renal Disease (ESRD) Treatment Choices (ETC) Model. BPCI Advanced will run concurrently with these models. This means that one model will not take precedence over the other. Rather, CMS may adjust a BPCI Advanced Participant's NPRA or Repayment Amount to account for overlap with these models.

**Q2: If a Physician Group Practice (PGP) is participating in BPCI Advanced and practices at a CJR participant hospital, who gets precedence?**

**A2:** The CJR Model consists of only one type of episode of care—Lower Extremity Joint Replacement (LEJR). BPCI Advanced has various Clinical Episodes, one of which is Major Joint Replacement of the Lower Extremity (MJRLE). For practical purposes, LEJR and MJRLE are referring to the same type of episode composed of Medicare Severity Diagnosis Related Groups (MS-DRGs) 469, 470, 521, and 522. If a LEJR episode is triggered, the CJR episode of care has precedence over all BPCI Advanced Clinical Episodes, including MJRLE. This means that the LEJR episode is attributed to the CJR participant hospital and not the PGP participating in BPCI Advanced.

However, PGPs participating in BPCI Advanced have precedence over a CJR participant hospital that is also participating in BPCI Advanced for all other Clinical Episodes, including Clinical Episodes in the orthopedic Clinical Episode Service Line Group except for MJRLE.

The BPCI Advanced Model's overall precedence rules are as follows:

- Clinical Episodes are attributed at the Episode Initiator (EI) level
- The hierarchy for attribution of a Clinical Episode among different types of EIs is:
  1. The Attending PGP
  2. The Operating PGP
  3. The Hospital

**Q3: Can an independent orthopedics group in a CJR market participate in BPCI Advanced?**

**A3:** Yes, an orthopedic PGP in a CJR metropolitan statistical area (MSA) can participate in BPCI Advanced even if they select to participate in the orthopedic Clinical Episode Service Line Group. However, any procedures under MS-DRGs 469, 470, 521, and 522 performed at a CJR participant hospital are included in the CJR model and not in BPCI Advanced. In addition, PGPs that select the orthopedic Clinical Episode Service Line Group in BPCI Advanced cannot receive Target Prices for the MJRLE Clinical Episode at any CJR participant hospital.

**Q4: If a BPCI Advanced Congestive Heart Failure (CHF) Clinical Episode occurs and a CJR participant hospital subsequently admits the patient for a MJRLE procedure, will CMS drop the CHF Clinical Episode and retain the CJR LEJR episode of care?**

**A4:** Yes, CMS will drop the CHF Clinical Episode in the BPCI Advanced model because CJR takes precedence, and the Major Joint Replacement procedure triggers an episode of care in the CJR model.

**Q5: Can a CJR participant hospital, who also participates in BPCI Advanced, trigger a BPCI Advanced outpatient Total Knee Arthroplasty (TKA) or outpatient Total Hip Arthroplasty (THA) procedure?**

**A5:** No, a CJR participant hospital, who also participates in BPCI Advanced and selected the orthopedic Clinical Episode Service Line Group, will not be able to trigger an outpatient TKA or outpatient THA procedure in BPCI Advanced. This is because the outpatient TKA and outpatient THA procedures are a part of the MJRLE Clinical Episode and not a standalone Clinical Episode with a separate Target Price. As stated previously, participant hospitals in the CJR model can participate in BPCI Advanced, but they cannot participate in Clinical Episodes also included in CJR. However, Participants who selected the orthopedic Clinical Episode Service Line Group for itself or any of its Downstream Episode Initiators may be able to trigger Major Joint Replacement of the Lower Extremity (MJRLE) Clinical Episodes at former CJR participant hospitals once they are no longer participating in CJR.