The Joint Commission's role in CMS Final Rule on PSOs taking effect Jan. 1

Under a Final Rule issued by the Centers for Medicare & Medicaid Services (CMS) taking effect Jan. 1, 2017, health insurance plans certified by the Health Insurance Marketplace may only contract with hospitals (of greater than 50 beds) that either:

- Work with a Patient Safety Organization (PSO); or
- Meet the reasonable exception criteria by implementing an evidence-based initiative to improve health care quality through the collection, management and analysis of patient safety events.

CMS has confirmed that membership in a Quality Improvement Organization (QIO), Hospital Engagement Network (HEN), or Joint Commission accreditation will qualify as a reasonable equivalent. Health care organizations demonstrate meeting “reasonable exception” criteria to and receive approval from the contracting health insurance plan. Participation in Joint Commission accreditation meets the reasonable exception criteria because organizations’ compliance with Joint Commission standards, policies, and patient safety activities can lead to a reduction in preventable harm, prevention of hospital readmission, and improvements in care coordination. While a hospital's participation in a reasonable exception does not guarantee a strong federal privilege for Patient Safety Work Product that PSOs can offer, The Joint Commission has successfully asserted a state-law privilege for documents in its possession, including those used in the collection, management and analysis of patient safety events through the Office of Quality and Patient Safety. The Joint Commission continues to encourage and support health care organizations' and providers’ participation in PSOs.

The information below describes the Joint Commission policies and requirements for accreditation that help an accredited organization meet the reasonable exception criteria:

- **Sentinel Event Policy:** Careful investigation and analysis of patient safety events (events not primarily related to the natural course of the patient's illness or underlying condition), as well as evaluation of corrective actions, is essential to reduce risk and prevent patient harm. The Sentinel Event Policy explains how The Joint Commission partners with health care organizations that have experienced a serious patient safety event to protect the patient, improve systems, and prevent further harm. Learn more about:
  - Definition of Sentinel Event (SE-1)
  - Responding to Sentinel Events (SE-5)
  - Reporting a Sentinel Event to The Joint Commission (SE-6)
  - Required Response to a Sentinel Event (SE-8)

- **Patient Safety Systems chapter:** The Patient Safety Systems chapter is designed to clarify the relationship between Joint Commission accreditation and patient safety. As the chapter states, “The ultimate purpose of The Joint Commission's accreditation process is to enhance quality of care and patient safety.” Learn more about:
  - Data Use and Reporting Systems (PS-10)
  - Effective Use of Data (PS-11)
  - Using Data to Drive Improvement (PS-14)
• A Proactive Approach to Preventing Harm (PS-14)
• Encouraging Patient Activation (PS-17)
• Appendix. Key Patient Safety Requirements (PS-23)

- Disease-specific care certification
- Performance measures
- Transitions of care portal

For more information, see the Federal Update and Discussion: Section 1311(h) of the Affordable Care Act – Patient Safety Standards presentation on the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs website.

EP review leads to deletions in Hospital program, effective Jan. 1, 2017
The Joint Commission is conducting a multi-phase project to streamline the Hospital accreditation standards. During Phase 2, The Joint Commission continued to evaluate EPs, and 51 EPs were deleted. These deletions will be effective Jan. 1, 2017.

For the most part, the deletions fall into one or more of the following categories:
• Similar to, implicit in, or duplicative of other existing EPs.
• Address issues that have been covered by standards for many years and are now a routine part of operations or clinical care processes, so they no longer need to be addressed in standards.
• No longer address contemporary quality and safety concerns; how they are managed can be left to the discretion of the organization.
• Adequately addressed by law and regulation or other external requirements, so separate Joint Commission requirements are not needed.

View the prepublication standards.

Performance measurement

New FAQ on 2017 ORYX Performance Measurement Requirements
Earlier in September, The Joint Commission announced its 2017 ORYX Performance Measurement requirements, which includes eliminating the measure set reporting requirement. Measure selection and reporting will be by individual measure and include reporting on five required chart-abstracted measures and a choice of six of 13 available electronic clinical quality measures (eCQMs).

The Joint Commission has released a frequently asked question (FAQ) to help accredited hospitals better understand the 2017 requirements. The FAQ document can be found under the “Measurement” section of The Joint Commission’s website.

In December, detailed information on eCQM and chart-abstracted measure selections will be provided, as well as the process for reporting selections. Measure selections will be due in early 2017. (Contact: hcooryx@jointcommission.org)

Recognition

The Joint Commission presents 2016 Enterprise Champion for Quality Award to BrightStar Care®
The Joint Commission presented the 2016 Enterprise Champion for Quality Award to BrightStar Care®, recognizing the national home health care franchisor for its efforts to promote the delivery of high quality, in-home care to its franchisees through Joint Commission accreditation.

This is the fourth consecutive year the award was given to BrightStar Care, which has more than 300 nationwide locations that provide the full continuum of home health care for individuals, families and health care facilities. Its around-the-clock services encompass companionship, personal care, dementia care, transportation, medication set-ups and reminders, skilled nursing care and much more.
The Enterprise Champion for Quality Award carries unique eligibility requirements relevant to franchisors, including:

- The franchisor is legally organized and registered, and maintains an organization of franchisees that are eligible for accreditation by The Joint Commission.
- At the time of application, the franchisor has a minimum of 10 franchisees accredited in good standing by The Joint Commission.
- The franchisor demonstrates that 95 percent of all eligible franchisees are accredited and in good standing with The Joint Commission.

“We commend BrightStar Care for achieving this prestigious recognition,” said Margherita Labson, RN, executive director, Home Care Accreditation Program, The Joint Commission. “Its commitment to promoting quality-focused home care is demonstrated through the organization’s efforts to meet rigorous Joint Commission accreditation requirements. Achieving and upholding accreditation helps providers help those they serve by raising the ‘quality bar’ and strengthening the reliability of care delivery. BrightStar Care continually integrates our standards into training materials and conducts regular mock evaluations to help franchisees uphold them.”

**Joint Commission Resources**

Elsevier selected to publish *The Joint Commission Journal on Quality and Patient Safety*

Joint Commission Resources (JCR), a nonprofit affiliate of The Joint Commission, announced earlier this week that Elsevier will be the new publisher of *The Joint Commission Journal on Quality and Patient Safety* (JQPS), effective Jan. 1, 2017.

Elsevier is a world-leading provider of scientific, technical and medical information products and services. As one of the leading worldwide health sciences publishers and owner of the Lancet family of journals, Elsevier is well positioned to grow JQPS’ impact and contribution.

The transition enables JQPS — which was self-published for the past 40 years — to strengthen support for its authors, readers and subscribers by harnessing cutting-edge publishing technologies at Elsevier, including a robust set of digital tools to simplify the submission, manuscript tracking, author communication and review processes. JQPS also plans to utilize the publisher’s global presence to increase dissemination of content to national and international health care communities, with the goal to champion the burgeoning importance of initiatives dedicated to patient safety and quality of care.

“In a competitive periodical environment, JQPS will now be Elsevier’s premier journal in the area of health care quality improvement,” said David W. Baker, MD, MPH, FACP, editor-in-chief of JQPS and executive vice president for Health Care Quality Evaluation at The Joint Commission. “We look forward to JQPS having a more interactive and discoverable online presence through a new dedicated website to help us to share information about safety and quality around the world. JQPS has been widely read and respected because of its long history and record of publishing seminal articles. While it will continue to provide tremendous visibility to the work of its authors, it will now be on an even bigger platform.”

The Joint Commission plans to work closely with JQPS to make it a key component of how it fulfills its mission to partner with health care organizations to improve patient safety and quality of care.

**Resources**

Check out updates to Transitions of Care Portal

The Joint Commission has expanded and updated its Transitions of Care Portal, which serves as a valuable source of information for health care organizations, focusing on the movement of patients between various health care settings.
Some of the new articles on the portal include:

- National Quality Forum Endorsement Summary: Care Coordination Measures
- Transitions of Care for Stroke Patients: Opportunities to Improve Outcomes
- Medication Discrepancies during Transitions of Care: A Comparison Study

The portal also has new tools like the Best Practices Intervention Packages (BPIPs), as well as new information on standard performance measurement requirements for the Palliative Care program. Visit the Transitions of Care Portal.

Learn more about Joint Commission Resources' offerings online or call 877-223-6866.