September 2020

Dear Colleague:

RE: Modifications to CY 2021 ORYX Policies

The Joint Commission has streamlined and simplified ORYX policy requirements effective CY2021. The new modified policies integrate an organization’s E-App data to better define the applicable ORYX Policy. The ORYX Policies have been consolidated within the Direct Data Submission Platform (DDSP) to determine each organization’s associated ORYX requirements. An HCO’s ORYX requirements will be calculated based upon the size of the organization as defined by the number of Licensed Beds and/or volume of Outpatient Visits, instead of average daily census.

Starting with CY 2021, for the Hospital Accreditation Program (HAP) and Critical Access Hospital Accreditation Program (CAH), ORYX data submission requirements include the following:

**ORYX eCQM and/or Chart-Abstracted data submission:**

- Acute Care Hospitals are now defined as having Licensed Beds >= 26 OR Outpatient Visits >= 50,000, and no longer defined by ADC >10
- Small Hospitals are now defined as having Licensed Beds <26 AND Outpatient Visits < 50,000, and no longer defined by ADC <= 10
  - See note below regarding Eliminating “self-reporting” of ORYX Data
- Freestanding Psychiatric Facility
  - No change to ORYX Policy
- Critical Access Hospital Accreditation Program
  - No change to ORYX Policy
  - See note below regarding Eliminating “self-reporting” of ORYX Data
- Eliminating “self-reporting” of ORYX data
  - With the enhanced functionality of the Direct Data Submission Platform (DDSP), all hospitals must submit eCQM and/or chart-abstracted data on the DDSP.
  - Hospitals that self-reported in the past are now expected to submit their data, starting with CY 2021, to the DDSP.
- Eliminating ORYX Designated Specialty Hospital
  - Effective CY 2021, this designation is removed from the ORYX program.
  - HCOs with this designation had services and/or populations that made it difficult to meet full ORYX policy requirements.
  - Starting with CY 2021, all hospitals will be placed in the appropriate ORYX policy based upon Licensed Beds and/or Outpatient Visits listed above.
  - The Department of Quality Measurement (DQM) will work with these organizations to determine how they can meet their full ORYX Policy requirements.
- Exemption for Extenuating Circumstance
  - If an HCO is unable to submit data for a defined time period due to an approved reason, (e.g., technology upgrade, natural disaster, merger in process), the HCO can request an exemption using the Extenuating Circumstance form and process.
  - Approved Extenuating Circumstances are reassessed annually.
Suspended ORYX Requirements

- The following facilities continue to have ORYX requirements suspended:
  - Freestanding Children’s Hospitals
  - Long Term Acute Care Hospitals (LTACHs)
  - Inpatient Rehabilitation Facilities (IRFs)
  - Acute care hospitals participating in CMS PPS-Exempt-Cancer Hospital Quality Reporting (PCHQR) Program

For more information:

- Please contact us at HCOORYX@jointcommission.org.

Specifics regarding the CY2021 ORYX requirements and measures will be shared with HCOs by the end of September 2020. In addition, The Joint Commission will be offering a Pioneers in Quality webinar regarding the CY2021 ORYX requirements in October.

Thank for your continued partnership with The Joint Commission toward our shared goal of quality improvement through performance measurement.

Department of Quality Measurement
The Joint Commission