

Blue Distinction Centers for Bariatric Surgery® Program Selection Criteria for 2008/2009 Designations

The evaluation is based primarily on the facilities' responses to the Blue Distinction Centers for Bariatric Surgery detailed clinical request for information (RFI) survey that examines structure, process and outcome measures for bariatric surgery services. A facility must score a minimum total of 90 points (out of 100) to become eligible, which consists of a combination of all 20 points in the required criteria plus a minimum of 70 points from the core criteria. Facilities that have achieved full accreditation by either the American College of Surgeons (BSCN level 1a or 1b) or American Society for Metabolic and Bariatric Surgery (BSCOE - Bariatric Surgery Center of Excellence) will not be required to complete section two of the survey. Additional factors may be considered by the Blue Cross and Blue Shield (BCBS) companies and may affect the decision to invite a facility to participate in the program. Once awarded, BDC for Bariatric Surgery designation is contingent on each facility's ongoing compliance with BDC for Bariatric Surgery selection criteria, subject to thorough investigation on a case-by-case basis for any changes. All BDC for Bariatric Surgery facilities resubmit clinical data periodically. For more detail on the Blue Distinction® selection criteria, contact the Blue Distinction Center® administrator at bcadmins@bcbsa.com.

CATEGORY	RFI	CRITERIA DESCRIPTION	2008 CORE POINTS
FACILITY CRITERIA			
STRUCTURE			
Facility Information	1, 2	Location where services are rendered and contact person responsible for completing the RFI.	Required
Acute Inpatient Facility	prelim	Must be an acute care inpatient facility with intensive care and emergency room services.	Required
Accreditation	prelim	Full facility accreditation by a CMS-deemed national accreditation organization.	Required
Duration	3	Program must have been actively performing bariatric surgery for the most recent 12-month period.	Required
Inpatient Emergency Services	15	24/7 availability of in-house physician to respond to clinical events (i.e., bariatric surgeons, intensivist, hospitalists, critical care specialist, anesthesiologist, pulmonologist, emergency room physician).	Required
Diagnostic/ Interventional Radiology (MRI and/or CT Scan)	15	24/7 availability.	Required
On-call Coverage	16	A written plan that outlines the on-call coverage for inpatients and outpatients.	Required
Leapfrog	17	Publicly reports on the Leapfrog Web site.	1 point
Institute for Healthcare Improvement (IHI)	18	Participation in IHI's 5M Lives campaign.	1 point
Emergency Room Protocols	27	Emergency room staff is provided with written protocols related to the emergency management of bariatric surgical patients.	1 point
Nursing Services	30	Formally trained nursing staff both inpatient and outpatient in the care management of the bariatric surgery and obese patients.	1 point
Dedicated Inpatient Beds	31	Facility has a designated inpatient unit for postoperative bariatric surgery patients.	1 point
Equipment/Instruments	32	A full line of equipment and instruments for the care of bariatric surgical patients including furniture, wheelchairs, operating room tables, beds, radiological facilities, surgical instruments for the morbidly obese.	2 points 1 point for super obese

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FACILITY CRITERIA (cont.)			
STRUCTURE (cont.)			
CT Scan/Lift Equipment	33	CT scanner and lift equipment should support the morbidly obese. Must meet the following minimum requirements: CT scanner >350 lb Lift equipment >450 lb	1 point
Ambulance Services	34	Facility has an internal ambulance service or a formal contract with an ambulance service equipped to manage the bariatric population.	1 point
Physical Therapy/Rehabilitation	35	Program has PT/rehab services specializing in pre- and postoperative bariatric surgical patients.	1 point
Support Groups	36	Program has local/regional support groups available to pre- and postoperative bariatric patients.	2 points
Quality Management Program	46, 47	Facility has a specific Bariatric Surgery Quality Improvement (QA/QI) program. The QI program must consist of a QI committee/process that identifies and addresses issues related to bariatric surgery.	2 points
Data Management	48, 49	Program has an automated data collection system and/or personnel in place to collect, analyze and maintain bariatric program-related data.	2 points
Data Reporting	50	Facility reports bariatric surgery outcomes data to either ASMBS or ACS national registries.	1 point
Outpatient Bariatric Procedures	4	Types of bariatric procedures being performed at facility on an outpatient basis.	Informational
PROCESS			
Patient Satisfaction	19	Program should have written process and data management systems to review how administered, tools used, return rate (if survey), how results are evaluated, actions taken to correct deficiencies or integration into the QI process.	1 point
Patient Selection Criteria	37	Program should have written patient selection criteria.	5 points
Body Mass Index (BMI)	20	The maximum patient BMI that the program will consider for weight-loss surgery.	Informational
Patient Selection Committee/Process	38	Program has a formal patient selection committee. The following personnel regularly attend these meetings: primary bariatric surgeons, bariatric coordinators, program director/coordinator, program physician.	1 point
Informed Consent	39	Program requires that patients sign a consent outlining the risks/benefits of bariatric surgery as well as long-term lifestyle changes and complications.	1 point
Patient Evaluation Process/Procedure	40	Program has a written patient evaluation process/procedure.	4 points
Critical Pathway	41	Program uses comprehensive critical pathways that cover all aspects of patient care during the inpatient stay (admission to discharge).	5 points
Discharge Inpatient Setting	42	Program has written discharge procedures, including: hospital discharge, coordination of post-care needs, protocols for emergency evaluation and treatment and criteria for hospital re-admission.	2 points
Discharge from Care/Follow-up Plan	43	Program has written follow-up plan to include: schedule for follow-up for at least the first year after surgery, testing, communication with referring physician, case management and payers.	5 points
Long-Term Follow-up	44	Program has written long-term follow-up plan.	5 points
Patient Education	45	Program has a comprehensive written education pathway or educational plan addressing all phases of care.	4 points

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CATEGORY	RFI	CRITERIA DESCRIPTION	2008 CORE POINTS
FACILITY CRITERIA (cont.)			
OUTCOMES			
Volume	5	Facility must perform at least 125 bariatric surgical cases over the most recent 12 calendar months. <i>Please note: Low volume rural programs must be approved as an ACS level 2a or 2b program or be in the process for ACS bariatric program approval.</i>	Required
Inpatient Mortality	6	Inpatient mortality rate after the initial bariatric surgery. <u>Thresholds:</u> <1% for Laparoscopic Gastric Banding <3% for all other procedures (open and lap)	Required
Lost to Follow-up (LTFU)	7	Programs must maintain follow-up on at least 70% of the patients having bariatric surgery at the applicant facility at 18 months post- surgery.	Required
30-day Reoperation Rate	22	Number of patients who required re-operation within 30 days of their initial bariatric surgery. <u>Thresholds:</u> <2.5% for gastric banding. <5% for all other procedures (open and lap) Re-operation is defined as open or laparoscopic surgery, within 30 days and at the same site, to treat a complication or to revise a feature from the previous bariatric surgery.	Required
Excess Weight Loss	10	Patient sustains >50% excess weight loss 2 years post-surgery.	> 90% 3 Points 75 - 89 2 Points 50 - 74 1 Point < 49% 0 Points
Re-admission Rates	11	Re-admission within 30 days following initial bariatric surgery. <u>Threshold:</u> <10%	3 points
LTFU: Second Post-Surgical Year	8	Percent of patients followed up two years following initial bariatric surgery.	Informational
Major Complications	9	Complications occurring within 30 days of bariatric surgery.	Informational
Length of Stay (LOS)	12	Postoperative average length of stay following initial bariatric surgery.	Informational
Surgeons' Lap to Open Conversion Rate	13		Informational
TEAM CRITERIA			
STRUCTURE			
Primary Surgeon's Experience	13	Number of years of bariatric program experience at the facility <u>Threshold:</u> >1 year Must have performed/managed > 50 cases within the most recent calendar year. Must have performed/managed >125 cases in career, of these at least >10 open cases and >25 lap cases.	Required
Stable Team	23	Program should have a stable team with no changes in the primary bariatric director, surgeon or attending surgeons in the past 12 months.	1 point
Program Director	24	Program should have a dedicated program director that provides administrative oversight.	2 points
Program Physician	25	Program has a designated program physician with experience in obesity management and is part of the evaluation and long-term management of the bariatric surgical patients.	1 point

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CATEGORY	RFI	CRITERIA DESCRIPTION	2008 CORE POINTS
TEAM CRITERIA (cont.)			
STRUCTURE (cont.)			
Bariatric Clinical Support Team	26	Psychosocial support personnel (psychologist, psychiatrist or social worker) experienced in the evaluation and long-term management of the bariatric surgical patients.	4 points
		One or more dedicated bariatric coordinators (nurse, nurse practitioner and physician extender) with at least one year's experience, who is managing the oversight of pre-surgical evaluations, patient education, treatment coordination and post-surgical follow-up.	
		Exercise physiologists or physical therapists experienced in the evaluation and long-term management of obese patients.	
		Nutritionist/dietician dedicated to the bariatric surgical program that provides pre-surgical evaluations and long-term nutritional counseling.	
Anesthesiologist	28	Program has anesthesiologist specifically trained and experienced in bariatric surgery who is regularly assigned to bariatric surgery cases.	1 point
Multidisciplinary Consultants	29	24/7 availability of bariatric surgery experienced specialists in the following areas: cardiology, pulmonology, thoracic surgery, vascular surgery, infectious disease, internal medicine and interventional radiology.	3 points

BUSINESS REQUIREMENTS

Facility		Facility must be credentialed by local BCBS Plan.	Required
Surgeons		All surgeons must be credentialed and contracted by local BCBS Plan.	Required
Subspecialists	14	Proportion of the bariatric surgical care providers and/or provider groups (i.e., anesthesiologists, radiologists, pathologists, gastroenterologists) that have current contracts with the local Blue Plan.	Informational

OVERVIEW OF PROGRAMMATIC SCORING		Points
Required (includes structure/process)		20
Structure		40
Process		33
Outcomes		7
TOTAL POINTS		
% Process		
% Outcome		
% Structure		
Total		100

Note: Designation as Blue Distinction Centers means these facilities' overall experience and aggregate data met objective criteria established in collaboration with expert clinicians' and leading professional organizations' recommendations. Individual outcomes may vary. To find out which services are covered under your policy at any facilities, please call your local Blue Cross and/or Blue Shield Plan.