

BlueDistinction[®]

Specialty Care

Program Selection Criteria: Bariatric Surgery

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About this Document

This Program Selection Criteria provides a detailed explanation of methodologies used in the evaluation process to help Blue Plans and Providers understand the Blue Distinction Centers for Bariatric Surgery® program.

About the Blue Distinction Specialty Care Program

Blue Distinction Centers® are part of a national designation program that recognizes facilities demonstrating expertise in delivering quality specialty care, safely and effectively. Building on this foundation of recognizing quality specialty care, we have expanded the program to add another designation level, Blue Distinction Centers+. To earn this designation, facilities must meet the same updated quality criteria as Blue Distinction Centers, and then go an extra step to demonstrate they do so efficiently. The basics of each designation are as follows:

- Blue Distinction Centers (BDC): Meets quality-focused criteria that emphasize patient safety and outcomes.
- Blue Distinction Centers+ (BDC+): Meets the same quality-focused criteria that emphasize patient safety and outcomes, as well as cost of care measures.

The Blue Distinction Centers for Bariatric Surgery program is available to comprehensive centers with inpatient capability or freestanding ambulatory surgical centers (ASCs). The Blue Distinction Centers for Bariatric Surgery program designation includes two types:

- Gastric Stapling
- Gastric Banding

Between April and May 2014, local Blue Plans invited facilities to be considered for the Blue Distinction Centers (BDC) or the Blue Distinction Centers+ (BDC+) designations. Of the 1,764 facilities invited, over 750 facilities applied for designation.

Understanding the Evaluation Process

Guiding principles for the selection process were developed balancing a set of quality, cost, and access considerations. These principles offer consumers meaningful differentiation in value for specialty care facilities that are designated as Blue Distinction Centers (BDC) and Blue Distinction Centers+ (BDC+). The guiding principles include:

Quality

- Nationally consistent approach to evaluating quality and safety was used, incorporating quality measures with meaningful impact, including delivery system features and specific quality outcomes to which all can aspire.

Cost

- Nationally consistent, equitable, and objective approach for selecting Blue Distinction Centers was used to address market and consumer demand for cost savings and affordable healthcare.

Access

- Consumer access to Blue Distinction Centers was considered.

Objective data from a detailed Provider Survey and certain healthcare claims data were used to evaluate and identify facilities that meet the Selection Criteria. To be eligible for the BDC or BDC+ designation, a facility must meet the Program's specific Selection Criteria, defined by the following evaluation components:

DECISION	BLUE DISTINCTION CENTERS	BLUE DISTINCTION CENTERS+
Quality Decision	Based on information provided by a facility in the Provider Survey.	Based on information provided by a facility in the Provider Survey.
Business Decision	Based on information provided by the local Blue Plan, for facilities within its Service Area, on: <ul style="list-style-type: none"> • Facility and Surgeon Participation Status, in the local Blue Plan's BlueCard PPO Network. • Local Blue Plan Criteria, if applicable. 	Based on information provided by the local Blue Plan, for facilities within its Service Area, on: <ul style="list-style-type: none"> • Facility and Surgeon Participation Status, in the local Blue Plan's BlueCard PPO Network. • Local Blue Plan Criteria, if applicable.
Cost of Care Decision	N/A	Based on Blue Plan healthcare claims data.

Each facility that applied for the Bariatric Surgery designation receives a customized *Feedback Report* with its results from the evaluation process. This *Feedback Report* can also be a foundation for discussions within a facility's executive management team or medical staff, to assess and improve the facility's quality and cost performance in comparison to national benchmarks.

Quality Selection Criteria

Blue Distinction Centers for Specialty Care programs seek to establish a nationally consistent and continually evolving approach to evaluating quality and safety, using the following design goals:

Design Goals

- 1 IDENTIFY**
eligible providers with meaningfully differentiated patient outcomes.
- 2 ENHANCE**
transparency and ease of explaining program methods.
- 3 ALIGN**
with credible nationally established measures, where appropriate and feasible.
- 4 EMPHASIZE**
outcome measures based on statistically meaningful differences.
- 5 DECREASE**
emphasis on structure and process measures, where appropriate.
- 6 STREAMLINE**
approach to offer operational efficiencies for evaluation process, where appropriate and feasible.

Facilities were evaluated on quality metrics developed with input from the medical community, through a process that included:

- A review of the medical literature.
- Input from the medical community.
- A review of national quality and safety initiatives.
- A thorough analysis of past Provider Survey information.
- Input from quality measurement experts.

Each bariatric surgery type includes the following Selection Criteria:

- Accreditation.
- Bariatric Surgery Patient Outcomes.

Selection Criterion was established through an empirical analysis of applicant responses to the Provider Survey.

Quality Determination

To complete the quality evaluation successfully, a facility must meet all Selection Criteria specific to the bariatric surgery type, as summarized in [Table 1](#). If a facility failed to provide a response or data was not available in the Provider Survey for a specific metric, the Selection Criterion was considered unmet and the facility did not receive credit for that metric.

National & Bariatric Surgery Program Accreditations

Accreditation results are obtained from responses to the Provider Survey.

The following requirements are part of the Selection Criteria:

The facility is fully accredited by at least one of the following national accreditation organizations (or local equivalent, where applicable), as appropriate for facility type:

Hospital	Ambulatory Surgical Center
<ul style="list-style-type: none"> - The Joint Commission (TJC) (without provision or condition) in the Hospital Accreditation Program. - Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Information Association (AOIA) as an acute care hospital. - National Integrated Accreditation Program (NIAHOSM)—Acute Care of DNV GL Healthcare. - Center for Improvement in Healthcare Quality (CIHQ) in the Hospital Accreditation Program. 	<ul style="list-style-type: none"> - The Joint Commission (TJC) (without provision or condition) in the Ambulatory Care Accreditation Program - Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Information Association (AOIA) as an Ambulatory Surgical Center - American Association for Accreditation of Ambulatory Surgery Facilities--Surgical (AAAASF). - Accreditation Association for Ambulatory Health Care (AAAHC) as an Ambulatory Surgery Center

Additionally, the facility’s bariatric surgery program has full approval, at the appropriate level, with the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) designation (or local equivalent, where applicable):

Gastric Stapling	Gastric Banding
<ul style="list-style-type: none"> - MBSAQIP Comprehensive Center. - MBSAQIP Comprehensive Center with Adolescent Qualifications. 	<ul style="list-style-type: none"> - MBSAQIP Comprehensive Center. - MBSAQIP Comprehensive Center with Adolescent Qualifications. - MBSAQIP Band Center.
<p>The following accreditations are accepted during the transition to MBSAQIP designation levels:</p>	
<ul style="list-style-type: none"> - American College of Surgeons (ACS) Bariatric Surgery Center Network (BSCN) Level 1. - American Society for Metabolic and Bariatric Surgery (ASMBS) Bariatric Surgery Center of Excellence (BSCOE) – Inpatient. 	<ul style="list-style-type: none"> - American College of Surgeons (ACS) Bariatric Surgery Center Network (BSCN) Level 1. - American Society for Metabolic and Bariatric Surgery (ASMBS) Bariatric Surgery Center of Excellence (BSCOE) – Inpatient. - ACS Outpatient or Outpatient New. - ASMBS Freestanding.

Bariatric Surgery Patient Outcomes

Bariatric Surgery outcome metrics are obtained from the Provider Survey. Facility results are established using a

confidence interval (90 percent) around the point estimate from the reported numerator and denominator events in the Provider Survey. The lower confidence limit is then compared to the national selection criteria threshold.

The following requirements are part of the Selection Criteria:

Gastric Stapling	Gastric Banding
<ul style="list-style-type: none"> - The facility reports outcome data on a minimum volume of 100 primary Gastric Stapling patients that meets the “Patient Population for Analysis” criteria defined in the Provider Survey. - Reoperation within 30 days, excluding any planned procedures and/or interventions (limited to endoscopy only), is at or below 2.2%. - Major Complications within 30 days is at or below 2.9%. - Unplanned All-Cause Readmissions within 30 days after discharge, excluding planned readmissions, is at or below 4.8%. - Mortality within 30 days is at or below 0.1%. - For facilities that perform both Gastric Stapling and Gastric Banding procedures, the facility must also meet the BDC Bariatric Surgery program designation Selection Criteria for Gastric Banding. - For Ambulatory Surgical Centers (ASCs), the facility must also meet the following additional selections criteria requirements: <ul style="list-style-type: none"> o ASC meets all selection criteria for Blue Distinction Centers for Bariatric Surgery’s designation for Gastric Stapling o Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) has completed its site visit for that ASC’s bariatric surgery 	<ul style="list-style-type: none"> - The facility reports outcome data on a minimum volume of 100 primary Gastric Banding patients that meets the “Patient Population for Analysis” criteria defined in the Provider Survey. <p style="text-align: center;">OR</p> <p>The facility reports outcome data on a volume of less than 100 primary Gastric Banding that meets the “Patient Population for Analysis” criteria (defined in the Provider Survey) and meets all Selection Criteria for eligibility under the BDC Gastric Stapling Designation.</p> <ul style="list-style-type: none"> - Reoperation within 30 days, excluding any planned procedures and/or interventions (limited to endoscopy only), is at or below 0.6%. - Major Complications within 30 days is at or below 0.9%. - Unplanned All-Cause Readmissions within 30 days after discharge, excluding planned readmissions, is at or below 1.4%. - Mortality within 30 days is at or below 0.1%. - For facilities that perform both Gastric Stapling and Gastric Banding procedures, the facility must also meet the BDC Bariatric Surgery Selection Criteria for Gastric Stapling.

Gastric Stapling	Gastric Banding
<p>program</p> <ul style="list-style-type: none"> ○ MBSAQIP Performance Report confirms that ASC’s bariatric surgery program has full accreditation as a Comprehensive Center, with a copy provided to BCBSA; and ○ All inpatient transfer facility(ies) used by ASC must be currently designated as Blue Distinction Centers for Bariatric Surgery, and must remain so designated at all times. 	

Business Selection Criteria

The business Selection Criteria consists of three components – Facility Participation; Surgeon Participation; and Local Blue Plan Criteria (if applicable). A facility must meet all requirements to be considered eligible for Blue Distinction Centers for Bariatric Surgery program designation.

- **Facility Participation**—All facilities are required to be participating providers in the local Blue Plan’s BlueCard Preferred Provider Organization (PPO) Network.
- **Provider Participation (Surgeons)**—All Surgeons identified in the Provider Survey response as those who perform the bariatric surgery procedures at that facility are required to be participating providers in the local Blue Plan’s BlueCard PPO Network¹.
- **Local Blue Plan Criteria, if applicable**—An individual Blue Plan, at its own independent discretion, may establish and apply local business requirements as additional Selection Criteria for eligibility in a Blue Distinction Centers program, for facilities located within its Service Area.

Cost of Care Selection Criteria

The process of incorporating Selection Criteria for cost of care measures was designed to address market and consumer demand for cost savings and affordable healthcare, by establishing a consistent, equitable, and objective approach for identifying Blue Distinction Centers+.

- Separate cost evaluations were completed for Gastric Stapling and Gastric Banding procedures.
- Evaluation metrics and Selection Criteria were determined based on analysis of Blue claims data.
- Cost decisions resulted from a comparison between facility results and national Selection Criteria.
- Facilities can view their performance results relative to the national Selection Criteria through their customized Provider Feedback Report, via [BD LinkSM](#).

¹ De Minimis Rule may be applied, at the local Blue Plan’s discretion.

Quality is key: only those facilities that first meet Blue Distinction Centers' nationally established, objective quality measures will be considered for designation as a Blue Distinction Center+.

Data Sources

The Cost of Care evaluation was based on a nationally consistent claims analysis of Blue Plan claims data. The scope of this analysis included:

- Claims were evaluated, using adjusted allowed amounts derived from Blue Plan claims data.
- Adjusted allowed amounts for professional and in-network facility claims were included, using specific bariatric episodes of care for actively enrolled Blue members.
- Medicare and secondary claims were excluded.
- Separate cost of care evaluations, were completed for facilities located in multiple Blue Plans' overlapping Service Areas.
- The data evaluated included procedures that occurred between Jan. 1, 2010 – Sept. 1, 2012.

Applicant facilities may contact their local Blue Plan to discuss their bariatric surgery cost of care evaluation results further. Remember, to be eligible for designation as a Blue Distinction Center+, a facility must ultimately satisfy the quality, business, and cost of care Selection Criteria.

Quality Selection Criteria – Table 1

Gastric Stapling Selection Criteria

	PROVIDER SURVEY QUESTION #	METRIC DESCRIPTION
ALL METRICS MUST BE MET FOR ELIGIBILITY CONSIDERATION		
National Accreditation	5	<p>The facility is fully accredited by at least one of the following national accreditation organizations *:</p> <ul style="list-style-type: none"> • The Joint Commission (TJC) (without provision or condition) in the Hospital Accreditation Program. • Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Information Association (AOIA) as an acute care hospital. • National Integrated Accreditation Program (NIAHOSM)—Acute Care of DNV GL Healthcare. • Center for Improvement in Healthcare Quality (CIHQ) in the Hospital Accreditation Program.
National Accreditation for Ambulatory Surgical Center (ASC)	5	<p>The facility is fully accredited by at least one of the following national accreditation organizations *:</p> <ul style="list-style-type: none"> - The Joint Commission (TJC) in the Ambulatory Care Accredited Program - Healthcare Facilities Accreditation Program (HFAP) as an Ambulatory Surgical Center - American Association for Accreditation of Ambulatory Surgery Facilities--Surgical (AAAASF). - Accreditation Association for Ambulatory Health Care (AAAH) as an Ambulatory Surgery Center

	PROVIDER SURVEY QUESTION #	METRIC DESCRIPTION
Bariatric Surgery Program Accreditation	6	<p>The facility's bariatric surgery program has full approval of one of the appropriate level of the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) designation**:</p> <ul style="list-style-type: none"> • MBSAQIP Comprehensive Center; or • MBSAQIP Comprehensive Center with Adolescent Qualifications. <p><i>The following accreditations are accepted during the transition to MBSAQIP designation levels:</i></p> <ul style="list-style-type: none"> • American College of Surgeons (ACS) Bariatric Surgery Center Network (BSCN) Level 1. • American Society for Metabolic and Bariatric Surgery (ASMBS) Bariatric Surgery Center of Excellence (BSCOE) – Inpatient.
Primary Gastric Stapling Volume for Outcome Analysis	8	The facility reports outcome data on a minimum volume of 100 Primary Gastric Stapling patients that meet the "Patient Population for Analysis" criteria, defined in the Provider Survey.
Primary Gastric Stapling Reoperation Rate	9	The facility's calculated lower confidence limit for reoperation within 30 days, excluding any planned procedures and/or interventions (limited to endoscopy only) is at or below 2.2%.
Primary Gastric Stapling Major Complication Rate	10	The facility's calculated lower confidence limit for major complications within 30 days is at or below 2.9%.
Primary Gastric Stapling Unplanned All-Cause Readmissions Rate	11	The facility's calculated lower confidence limit for unplanned all-cause readmissions within 30 days after discharge, excluding planned readmissions, is at or below 4.8%.
Primary Gastric Stapling Mortality Rate	12	The facility's lower confidence limit for mortality within 30 days is at or below 0.1%.
Continuity of Care: Gastric Banding BDC Designation Eligibility	N/A	For facilities that perform both Gastric Stapling and Gastric Banding procedures, the facility must also meet the BDC Bariatric Surgery program designation Selection Criteria for Gastric Banding.

*To enhance quality while improving Blue Members' access to qualified providers, alternate local Accreditations that are at least as stringent as any National Accreditations, above, may be offered under the local Blue Plan Criteria; for details, contact the facility's local Blue Plan.

**To enhance quality while improving Blue Members access to qualified providers, alternate local bariatric program specific Accreditations that are at least as stringent as Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP), above, may be offered under the local Blue Plan Criteria; for details, contact the facility's local Blue Plan.

Gastric Banding Selection Criteria

	PROVIDER SURVEY QUESTION #	METRIC DESCRIPTION
ALL METRICS MUST BE MET FOR ELIGIBILITY CONSIDERATION		
National Accreditation	14	<p>The facility is fully accredited by at least one of the following national accreditation organizations, as appropriate for facility type*:</p> <ul style="list-style-type: none"> • The Joint Commission (TJC) (without provision or condition) in the Hospital Accreditation Program. • Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Information Association (AOIA) as an acute care hospital. • National Integrated Accreditation Program (NIAHOSM)—Acute Care of DNV GL Healthcare. • Center for Improvement in Healthcare Quality (CIHQ) in the Hospital Accreditation Program. • The Joint Commission (TJC) (without provision or condition) in the Ambulatory Care Accredited Program. • Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Information Association (AOIA) as an Ambulatory Surgical Center. • American Association for Accreditation of Ambulatory Surgery Facilities--Surgical (AAAASF). • Accreditation Association for Ambulatory Health Care (AAAHC) as an Ambulatory Surgery Center.

	PROVIDER SURVEY QUESTION #	METRIC DESCRIPTION
Bariatric Surgery Program Accreditation	15	<p>The facility's bariatric surgery program has full approval of one of the appropriate level of the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) designation**:</p> <ul style="list-style-type: none"> • Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) Comprehensive Center. • MBSAQIP Comprehensive Center with Adolescent Qualifications. • MBSAQIP Band Center. <p><i>The following accreditations are accepted during the transition to MBSAQIP designation levels:</i></p> <ul style="list-style-type: none"> • American College of Surgeons (ACS) Bariatric Surgery Center Network (BSCN) Level 1. • ACS Outpatient or Outpatient New. • American Society for Metabolic and Bariatric Surgery (ASMBS) Bariatric Surgery Center of Excellence (BSCOE) – Inpatient. • ASMBS Freestanding.
Primary Gastric Banding Volume for Outcome Analysis	17	<p>The facility reports outcome data on a minimum volume of 100 Primary Gastric Banding patients that meets the "Patient Population for Analysis" criteria defined in the Provider Survey</p> <p style="text-align: center;">OR</p> <p>The facility reports outcome data on a volume of less than 100 Primary Gastric Banding that meets the "Patient Population for Analysis" criteria (defined in the Provider Survey) but meets all Selection Criteria for eligibility under the BDC Gastric Stapling Designation</p>
Primary Gastric Banding Reoperation Rate	18	The facility's calculated lower confidence limit for reoperation within 30 days, excluding any planned procedures and/or interventions (limited to endoscopy only), is at or below 0.6%
Primary Gastric Banding Major Complication Rate	19	The facility's calculated lower confidence limit for major complications within 30 days is at or below 0.9%.
Primary Gastric Banding Unplanned All-Cause Readmissions Rate	20	The facility's calculated lower confidence limit for unplanned all-cause readmissions within 30 days after discharge, excluding planned readmissions is at or below 1.4%.
Primary Gastric Banding Mortality Rate	21	The facility's lower confidence limit for mortality within 30 days is at or below 0.1%.
Continuity of Care: Gastric Stapling BDC Designation Eligibility	N/A	For facilities that perform both Gastric Stapling and Gastric Banding procedures, the facility must also meet the BDC Bariatric Surgery program designation Selection Criteria for Gastric Stapling.

*To enhance quality while improving Blue Members' access to qualified providers, alternate local Accreditations that are at least as stringent as any National Accreditations, above, may be offered under the local Blue Plan Criteria; for details, contact the facility's local Blue Plan.

**To enhance quality while improving Blue Members access to qualified providers, alternate local bariatric program specific Accreditations that are at least as stringent as Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP), above, may be offered under the local Blue Plan Criteria; for details, contact the facility's local Blue Plan.

Blue Distinction® Centers (BDC) met overall quality measures for patient safety and outcomes, developed with input from the medical community. Blue Distinction® Centers+ (BDC+) also met cost measures that address consumers' need for affordable healthcare. Individual outcomes may vary. National criteria is displayed on www.bcbs.com. A Local Blue Plan may require additional criteria for facilities located in its own service area. For details on Local Blue Plan Criteria, a provider's in-network status, or your own policy's coverage, contact your Local Blue Plan. Each facility's cost of care is evaluated using data from its Local Blue Plan. Facilities in CA, ID, NY, PA, and WA may lie in two Local Blue Plans' areas, resulting in two evaluations for cost of care; and their own Local Blue Plans decide whether one or both cost of care evaluation(s) must meet BDC+ national criteria. Neither Blue Cross and Blue Shield Association nor any Blue Plans are responsible for damages or non-covered charges resulting from Blue Distinction or other provider finder information or care received from Blue Distinction or other providers.