

BlueDistinction[®]

Specialty Care

Program Selection Criteria: Transplants

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About This Document

The Program Selection Criteria outlines the Quality, Business, and Cost Selection Criteria and evaluation process used to determine eligibility for the Blue Distinction Centers for Transplants (the Program).

This document is organized into six sections:

1. Overview of the Blue Distinction Specialty Care Program
2. Executive Summary
3. Evaluation process and data sources
4. Quality Selection Criteria (per transplant type)
5. Business Selection Criteria
6. Cost of Care Selection Criteria

About the Blue Distinction Specialty Care Program

Blue Distinction Specialty Care is a national designation program recognizing healthcare providers that demonstrate expertise in delivering quality specialty care — safely, effectively, and cost efficiently. The goal of the program is to help consumers find both quality and value for their specialty care needs, while encouraging healthcare professionals to improve the overall quality and delivery of healthcare nationwide, and providing a credible foundation for local Blue Cross and/or Blue Shield Plans (Blue Plans) to design benefits tailored to meet employers’ quality and cost objectives¹. The Blue Distinction Specialty Care Program includes two levels of designation:

- **Blue Distinction Centers (BDC):** Healthcare providers recognized for their expertise in delivering specialty care.
- **Blue Distinction Centers+ (BDC+):** Healthcare providers recognized for their expertise and cost-efficiency in delivering specialty care.

Quality is key: only those providers that first meet nationally established, objective quality measures for BDC will be considered for designation as a BDC+.

¹ Benefit design is determined independently by the local Blue Plan and is not a feature of any Blue Distinction program.

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Executive Summary

In late 2016, local Blue Plans invited 394 facilities across the country to be considered for one or more of the Transplant designation(s) under this Program; 205 facilities applied and were evaluated on objective, transparent selection criteria with Quality, Business, and Cost of Care components. The Program consists of nine transplant types:

- Adult Heart
- Adult Lung
- Adult Deceased Donor Liver
- Adult Living Donor Liver
- Adult Pancreas
- Pediatric Heart
- Pediatric Liver
- Adult Autologous/Allogeneic Bone Marrow/Stem Cell
- Pediatric Autologous/Allogeneic Bone Marrow/Stem Cell

The Program uses information provided by a facility in the Provider Survey and public data available from the Scientific Registry of Transplant Recipients (SRTR), Organ Procurement and Transplantation Network (OPTN), and the Transplant Center-Specific Survival Report publicly reported by the National Marrow Donor Program (NMDP), as part the Quality Evaluation. Table 1 below is a high level summary of the Program highlights.

Table 1: Transplant Program Highlights

PROGRAM HIGHLIGHTS	
Designation Levels	<ul style="list-style-type: none"> • BDC • BDC+ (<i>select transplants</i>)
Accreditations Considered	<ul style="list-style-type: none"> • National Accreditation • Transplant Program Guidelines, Accreditation, and Certification (<i>where applicable</i>)
Transplant Program Types	<ul style="list-style-type: none"> • Adult Heart • Adult Lung • Adult Deceased Donor Liver • Adult Living Donor Liver • Adult Pancreas • Pediatric Heart • Pediatric Liver • Adult Autologous/Allogeneic Bone Marrow/Stem Cell • Pediatric Autologous/Allogeneic Bone Marrow/Stem Cell
Quality Data Sources	<ul style="list-style-type: none"> • Provider Survey • SRTR December 2016 Release • Transplant Center-Specific Survival Report December 2016 Release • OPTN with cases occurring between January 1, 2014 – December 31, 2016, publicly released March 2017
Business Data Sources	<ul style="list-style-type: none"> • Plan Survey • Blue Brands Evaluation • Local Blue Plan Criteria (<i>where applicable</i>)

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PROGRAM HIGHLIGHTS	
Cost of Care Data Sources	<ul style="list-style-type: none"> Blue Plans’ Healthcare Claims data, with cases occurring between January 1, 2013 and December 31, 2015 Global Contract Terms

Note: The complete Selection Criteria and evaluation processes are described fully throughout the remainder of this document.

Understanding the Evaluation Process

Selection Process

The selection process balances quality, cost, and access considerations to offer consumers meaningful differentiation in quality and value for specialty care facilities that are designated as BDC and BDC+. Guiding principles for the selection process 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 and objective approach for selecting BDC+ was used to address market and consumer demand for cost savings and affordable healthcare.

Access

- Blue members’ access to Blue Distinction Centers was considered to achieve the program’s overall goal of providing differentiated performance on quality and, for the BDC+ designation, cost of care.

Evaluation Components: Data Sources

Objective data from detailed Provider Survey, transplant registries, Plan Survey, Blue Brands evaluation and Blue Plans’ Healthcare claims data information were used to evaluate and identify facilities that meet the Program’s Selection Criteria. A facility must meet the Program’s specific selection criteria, defined by the following evaluation components (Table 2), to be eligible for the BDC or BDC+ designation:

Table 2: Evaluation Components

EVALUATION COMPONENT	DATA SOURCE	BLUE DISTINCTION CENTERS (BDC)	BLUE DISTINCTION CENTERS+ (BDC+)
Quality	Information obtained from a facility in the Provider Survey and Registry Data.	✓	✓
Business	Information obtained from the local Blue Plan in the Plan Survey	✓	✓

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EVALUATION COMPONENT	DATA SOURCE	BLUE DISTINCTION CENTERS (BDC)	BLUE DISTINCTION CENTERS+ (BDC+)
	and Blue Brands evaluation.		
Cost of Care	Blue Plans' Healthcare Claims Data and Global Contract Terms.		✓

Measurement Framework

Blue Distinction Specialty Care programs establish a nationally consistent approach to evaluating Quality, Business, and Cost of Care components. Selection Criteria continues to evolve through each evaluation cycle, consistent with medical advances and measurement in this specialty area. The measurement framework for this and other Blue Distinction value-based initiatives were developed using the following guiding principles:

- Align with credible, transparent, nationally established measures with an emphasis on proven outcomes, where appropriate and feasible.
- Utilize nationally consistent measurement approaches, which recognize the value added by local market initiatives.
- Apply a fair and equitable evaluation approach that consistently identifies providers with meaningfully differentiated quality and (where relevant) cost.

Transplant Quality Selection Criteria

This Program evaluates facility performance in nine transplant types, outlined above in the “About This Document” section. The Program is designed with input from the medical community and quality measurement experts; review of medical literature, together with national quality and safety initiatives; and a thorough analysis of meaningful quality measures. The Quality evaluation was based on facility responses to the Provider Survey and national third party registry data specific to each of the nine transplant types.

Solid Organ Transplant

Solid organ transplant program quality evaluation includes volume data publicly reported by the Organ Procurement and Transplantation Network (OPTN). OPTN center data can be found at the [OPTN Website](#). Facilities were evaluated on their transplant program’s(s’) volume (rounded to the nearest whole number) for the current calendar year (1/1/2016 – 12/31/2016) and three year average (1/1/2014 – 12/31/2016).

Facilities were also evaluated on their solid organ transplant program(s) graft and patient survival outcomes. Graft and patient survival outcomes are publicly reported by the Scientific Registry for Transplant Recipients (SRTR). SRTR center data can found at the [SRTR Website](#). Each facility’s transplant program(s) was evaluated using the January 2017 SRTR release that includes six survival outcome metrics: 1 month, 1 year and 3 year graft and patient survivals. Survival outcomes’ Hazard Ratios’ Lower Confidence Limit (LCL) was converted to a Z-Score, which standardizes the measure against the center

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distribution of all scores. This approximates the number of standard deviations by which a facility falls away from the center distribution and allows for a uniform comparison of a given facility to all other facilities. A National Threshold is set for each transplant type, which the Z-Score cannot exceed. Performance on each of the six survival outcome metrics was compared to the National Thresholds.

Bone Marrow/Stem Cell Transplant

Facilities that applied for the **adult and/or pediatric bone marrow/stem cell transplant** program(s) were evaluated using the 2016 Transplant Center-Specific Survival Report’s 1 year allogeneic bone marrow/stem cell survival outcome data reported from the Stem Cell Transplant Outcome Database (SCTOD), and publicly displayed on the National Donor Marrow Program (NMDP) website. Facilities applying for bone marrow/stem cell transplant designation must be accredited by the Foundation for the Accreditation for Cellular Therapy (FACT) for both autologous and allogeneic bone marrow/stem cell transplants. For further information on FACT accreditation, refer to the [FACT Website](#); and for SCTOD center survival data, refer to the [NMDP Website](#).

Solid Organ Transplant Selection Criteria

The Quality Selection Criteria for the adult and pediatric solid organ transplant programs include general facility structure metrics, certifications (where applicable), guideline requirements, and transplant volume, as well as graft and patient survival outcome metrics that are specific to each transplant type.

Solid Organ Selection Criteria are outlined in Table 3, Table 3a (Adult Transplant Programs), and Table 3b (Pediatric Transplant Programs); and identifies all domains used in the quality evaluation.

- **Adult Solid Organ Transplant** designation: the facility must meet **all** requirements in Tables 3 and 3a to meet the Quality evaluation portion of the eligibility decision.
- **Pediatric Solid Organ Transplant** designation: the facility must meet **all** requirements in Tables 3 and 3b to meet the Quality evaluation portion of the eligibility decision.

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Table 3: Solid Organ Transplant Facility Quality Selection Criteria

DOMAIN	SOURCE	QUALITY SELECTION CRITERIA
National Accreditation*	Provider Survey	<p>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 Hospital Accredited Program. • Healthcare Facilities Accreditation Program (HFAP) of the Accreditation Association for Hospital and Health Systems (AAHHS) as an acute care hospital. • DNV GL Healthcare in the National Integrated Accreditation for Healthcare Organizations (NIAHO®) Hospital Accreditation Program. • Center for Improvement in Healthcare Quality (CIHQ) in the Hospital Accreditation Program. <p><i>*NOTE: 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.</i></p>
CMS Certification (Adult Programs Only)	Provider Survey	Facility's adult solid organ transplant program(s) is certified by the Centers for Medicare and Medicaid Services (CMS) and is currently in good standing.
United Network for Organ Sharing (UNOS)	Provider Survey	Facility's solid organ transplant program(s) meets UNOS guidelines (as outlined in UNOS policy and by-laws) and is currently in good standing (has unrestricted membership privileges as a UNOS transplant hospital member; and is not on "Probation" or a "Member Not in Good Standing").

Table 3a: Adult Solid Organ Transplant Program Quality Selection Criteria

DOMAIN	SOURCE	QUALITY SELECTION CRITERIA		
Transplant Volume	OPTN	The minimum volume performed in the most recent calendar year (1/1/2016 – 12/31/2016) must be greater than or equal to the following, per transplant type:	The average number of transplants performed over the last 3 years (1/1/2014 – 12/31/2016) must be greater than or equal to the following, per transplant type:	
		• Adult Heart	8	10
		• Adult Lung	8	10
		• Adult Deceased Donor Liver*	8	10
		• Adult Living Donor Liver*	1	3
		• Adult Pancreas**	4	7

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DOMAIN	SOURCE	QUALITY SELECTION CRITERIA
Transplant Graft Survival***	SRTR	Program’s 1 month graft survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 1.75.
		Program’s 1 year graft survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 1.75.
		Program’s 3 year graft survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 1.75.
Transplant Patient Survival	SRTR	Program’s 1 month patient survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 1.75.
		Program’s 1 year patient survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 1.75.
		Program’s 3 year patient survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 1.75.
Adult Deceased Donor Liver Transplant BDC Eligibility <i>(Applicable only to Living Donor Liver Transplant Programs)</i>	N/A	Facility meets all Quality, and Business Criteria (and, for BDC+ designation, Cost Selection Criteria) for eligibility under the Adult Deceased Donor Liver Transplant program designation. note: Facility must be designated as a BDC/BDC+ deceased donor liver transplant program to be designated as a BDC/BDC+ living donor liver transplant program.

* Adult liver transplant volume includes combined deceased and living donor transplants.
 ** Adult pancreas transplant volume includes combined pancreas after kidney (PAK), pancreas transplant alone (PTA), and simultaneous pancreas kidney (SPK) transplants.
 *** SRTR does not publicly report pancreas 1 month, 1 year and 3 year graft survivals currently.

Table 3b: Pediatric Solid Organ Transplant Program Quality Selection Criteria

DOMAIN	SOURCE	QUALITY SELECTION CRITERIA		
Transplant Volume	OPTN	The minimum volume performed in the most recent calendar year must be greater than or equal to the following, per transplant type:	The average number of transplants performed over the last 3 years must be greater than or equal to the following per, transplant type:	
		• Pediatric Heart	1	3
		• Pediatric Liver	5	4
Transplant Graft Survival	SRTR	Program’s 1 month graft survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 2.00.		
		Program’s 1 year graft survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 2.00.		

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DOMAIN	SOURCE	QUALITY SELECTION CRITERIA
		Program’s 3 year graft survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 2.00.
Transplant Patient Survival	SRTR	Program’s 1 month patient survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 2.00.
		Program’s 1 year patient survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 2.00.
		Program’s 3 year patient survival Hazard Ratios’ Z-Score of the Lower Confidence Limit (LCL) is less than or equal to 2.00.

Bone Marrow/Stem Cell Transplant Selection Criteria

The Quality Selection Criteria for the adult and pediatric bone marrow/stem cell transplant programs include general facility structure metrics, program accreditation, transplant volume, as well as patient survival outcome metric.

Bone marrow/stem cell selection criteria are outlined in Table 4 (includes both adult and pediatric transplant programs); and identifies all domains used in the Quality evaluation. The bone marrow/stem cell transplant designation is inclusive of both autologous and allogeneic bone marrow/stem cell transplants. The facility must meet **all** requirements in Table 4 to meet the Quality evaluation portion of the eligibility decision for Adult and/or Pediatric Bone Marrow/Stem Cell Transplant designation.

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Table 4: Bone Marrow/Stem Cell Transplant (Adult & Pediatric) Program Quality Selection Criteria

DOMAIN	SOURCE	QUALITY SELECTION CRITERIA
National Accreditation*	Provider Survey	<p>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 Hospital Accredited Program. Healthcare Facilities Accreditation Program (HFAP) of the Accreditation Association for Hospital and Health Systems (AAHHS) as an acute care hospital. DNV GL Healthcare in the National Integrated Accreditation for Healthcare Organizations (NIAHO®) Hospital Accreditation Program. Center for Improvement in Healthcare Quality (CIHQ) in the Hospital Accreditation Program. <p><i>*NOTE: 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.</i></p>
Foundation for the Accreditation of Cellular Therapy (FACT)	Provider Survey	Facility is accredited by the FACT Accreditation for both Autologous and Allogeneic Bone Marrow/Stem Cell Transplants.
Allogeneic Transplant Volume	Provider Survey	Adult Allogeneic Bone Marrow/Stem Cell Case Volume is greater than or equal to 24 in the most recent 12 months.
		Pediatric Allogeneic Bone Marrow/Stem Cell Case Volume is greater than or equal to 8 in the most recent 12 months.
Allogeneic Transplant 1 Year Patient Survival	SCTOD*	Program's 1-Year Allogeneic Transplant Patient Survival as reported by the Stem Cell Transplant Outcomes Database* (SCTOD) is "Similar To" or "Above" the expected rate.

*2016 Transplant Center Specific Survival Report is released by the Center for International Blood & Marrow Transplant Research (CIBMTR) and center results are publicly displayed on the National Marrow Donor Program (NMDP) website.

Transplant Business Selection Criteria

The Business Selection Criteria (Table 5) consists of four components:

- Facility Participation;
- Physician and Surgeon Participation;
- Blue Brands Criteria; and
- Local Blue Plan Criteria (if applicable)

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A facility must meet **all** components listed in Table 5 to meet the Business evaluation for the Blue Distinction Centers for Transplants designation.

Table 5: Business Selection Criteria

BUSINESS SELECTION CRITERIA	
Facility Participation	Facility is required to participate in the local Blue Plan’s BlueCard Preferred Provider Organization (PPO) Network.
Physician and Surgeon Participation	All physicians and surgeons (identified in the Provider Survey as those who manage and perform transplant procedures at that facility) are required to participate in the local Blue Plan’s BlueCard PPO Network.
Blue Brands Criteria	Facility meets BCBSA criteria for avoiding conflicts with BCBSA logos and trademarks.
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.

Transplant Cost of Care Selection Criteria

Cost of care measures were designed to address market and consumer demand for cost savings and affordable healthcare. The cost of care selection criteria were used to provide a consistent and objective approach to identify BDC+ facilities.

Quality is key: Only those facilities that first meet nationally established, objective quality measures for BDC will be considered for designation as a BDC+.

Adult Heart, Adult Lung, Adult Liver, Adult Bone Marrow/Stem Cell, and Pediatric Bone Marrow/Stem Cell transplant programs were included in the evaluation. Cost of Care was not evaluated for Adult Pancreas, Pediatric Heart, and Pediatric Liver transplant programs, due to insufficient availability of data nationally; accordingly, only BDC (and not BDC+) will be offered for these three transplant types. A single Quality evaluation, with separate Cost of Care evaluations, was completed for facilities located in multiple Blue Plans’ overlapping service areas.

Evaluations were based on Blue Plans’ Healthcare Claims data and facility contracts. Evaluations included professional and in-network facility costs for actively enrolled Blue Cross Blue Shield members. National thresholds were established, based on the distribution of data across all facilities for each transplant type.

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Due to the proprietary nature of contracting terms, evaluation metrics and national thresholds are not released publically. Applicant facilities may contact the local Blue Plan to discuss their transplant Cost of Care evaluation results. 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.

Questions

Contact your local Blue Plan with any questions.

Blue Distinction Centers (BDC) met overall quality measures for patient safety and outcomes, developed with input from the medical community. A Local Blue Plan may require additional criteria for providers located in its own service area; for details, contact your Local Blue Plan. Blue Distinction Centers+ (BDC+) also met cost measures that address consumers' need for affordable healthcare. Each provider's cost of care is evaluated using data from its Local Blue Plan. Providers 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. National criteria for BDC and BDC+ are displayed on www.bcbs.com. Individual outcomes may vary. For details on a provider's in-network status or your own policy's coverage, contact your Local Blue Plan and ask your provider before making an appointment. Neither Blue Cross and Blue Shield Association nor any Blue Plans are responsible for non-covered charges or other losses or damages resulting from Blue Distinction or other provider finder information or care received from Blue Distinction or other providers.