

Model Overlap Frequently Asked Questions (FAQ)

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Q1: Can entities participate in both the Bundled Payments for Care Improvement Advanced (BPCI Advanced) Model and other models, initiatives, or programs at CMS?

A1: Rules regarding Medicare providers' participation in BPCI Advanced and other Centers for Medicare & Medicaid Services (CMS) initiatives, models, programs, or demonstrations appear below:

- Participant hospitals in the Comprehensive Care for Joint Replacement (CJR) Model can participate in BPCI Advanced, but they cannot participate in Clinical Episodes also included in CJR, i.e., Major Joint Replacement of the Lower Extremity (MJRLE). However, a Participant who selected the Orthopedic Clinical Episode Service Line Group for itself or any of its Downstream Episode Initiators may be able to trigger MJRLE Clinical Episodes at former CJR participant hospitals once they are no longer participating in CJR. This also means when the CJR Model ends at the end of 2024, CJR participant hospitals who participate in BPCI Advanced and who selected the Orthopedic Clinical Episode Service Line Group for Model Year 7 (2024) may be able to trigger MJRLE Clinical Episodes in Model Year 8 (2025).
- In Model Years 1-5, BPCI Advanced allowed overlap with the Oncology Care Model (OCM). This meant that one model did not take precedence over the other. Rather, CMS adjusted OCM performance-based payments for BPCI Advanced Net Payment Reconciliation Amount (NPRA) payments based on the proportion of the BPCI Advanced Clinical Episode that overlaps with the OCM episode.
- Like the OCM overlap approach, BPCI Advanced allows overlap with the Enhancing Oncology Model (EOM). When BPCI Advanced and EOM episodes overlap, CMS will prorate the BPCI Advanced Reconciliation amount to capture overlapping expenditures. This prorated BPCI Advanced Reconciliation amount is included in EOM payment calculations such that episode expenditures are not double counted across the two models.
- There are some instances where beneficiary overlap between a model or initiative and BPCI Advanced is not allowed; however, participant/provider overlap is allowed. This means beneficiaries who are aligned or assigned to participants in these models are not eligible to trigger BPCI Advanced Clinical Episodes. If the participant cares for other beneficiaries who are not aligned or assigned for purposes of these models, those beneficiaries would be eligible to trigger a BPCI Advanced Clinical Episode. These models and initiatives include:
 - Next Generation Accountable Care Organization (NGACO) Model (applicable to Model Years 1-4)
 - Vermont Medicare ACO Initiative Comprehensive End-Stage Renal Disease (ESRD) Care (CEC) Model's ESRD Seamless Care Organizations (ESCOs) with downside risk (applicable to Model Years 1-3)
 - Global and Professional Direct Contracting (GPDC) Model (applicable to Model Years 4-5)
 - ACO Realizing Equity, Access, and Community Health (ACO REACH) Model

- Comprehensive Kidney Care Contracting (CKCC) Options of the Kidney Care Choices (KCC) Model
- In Model Years 1&2, beneficiaries assigned to an ENHANCED track ACO in the Medicare Shared Savings Program were not eligible to trigger BPCI Advanced Clinical Episodes. If an ENHANCED track ACO participant cared for other beneficiaries outside the ACO, those beneficiaries would have been eligible to trigger a BPCI Advanced Clinical Episode. For Model Years 3-8, beneficiary and participant overlap is permitted for all tracks and levels in the Medicare Shared Savings Program. This means a beneficiary assigned to a Medicare Shared Savings Program ACO may be able to trigger BPCI Advanced Clinical Episodes.
- Hospitals participating in the Rural Community Hospital Demonstration, Pennsylvania Rural Health Model, or those located in Maryland, including those in the Maryland All-Payer Model or Maryland Total Cost of Care Model, are excluded from being Episode Initiators in BPCI Advanced. Likewise, Clinical Episodes cannot be triggered at these hospitals.
- Participants and beneficiaries in the following models can participate in BPCI Advanced:
 - Comprehensive Primary Care Plus (CPC+) Model (applicable to Model Years 1-4)
 - Primary Care First (PCF) Model
 - Kidney Care First (KCF) Option of the KCC Model
 - End-Stage Renal Disease (ESRD) Treatment Choices (ETC) Model
 - Making Care Primary (MCP) Model
 - Guiding an Improved Dementia Experience (GUIDE) Model

BPCI Advanced will run concurrently with these models. This means that one model will not take precedence over the other. Rather, CMS may adjust a BPCI Advanced Participant's NPRA or Repayment Amount to account for overlap with these models.

Q2: If a Physician Group Practice (PGP) is participating in BPCI Advanced and practices at a CJR participant hospital, who gets precedence?

A2: The CJR Model consists of only one type of episode of care—Lower Extremity Joint Replacement (LEJR). BPCI Advanced has various Clinical Episodes, one of which is Major Joint Replacement of the Lower Extremity (MJRLE). For practical purposes, LEJR and MJRLE are referring to the same type of episode composed of inpatient Medicare Severity Diagnosis Related Groups (MS-DRGs) 469, 470, 521, 522 and outpatient Healthcare Common Procedure Coding System (HCPCS) codes 27447 or 27130. If a LEJR episode is triggered, the CJR episode of care has precedence over all BPCI Advanced Clinical Episodes, including MJRLE. This means that the LEJR episode is attributed to the CJR participant hospital and not the PGP participating in BPCI Advanced.

However, if a LEJR episode is not triggered, PGPs participating in BPCI Advanced have precedence over a CJR participant hospital that is also participating in BPCI Advanced for all other Clinical Episodes, including Clinical Episodes in the orthopedic Clinical Episode Service Line Group except for MJRLE.

The BPCI Advanced Model's overall precedence rules are as follows:

- Clinical Episodes are attributed at the Episode Initiator (EI) level.
- The hierarchy for attribution of a Clinical Episode among different types of EIs is:
 - The Attending PGP
 - The Operating PGP
 - The Hospital

Q3: Can an independent orthopedics group in a CJR market participate in BPCI Advanced?

A3: Yes, an orthopedic PGP in a CJR metropolitan statistical area (MSA) can participate in BPCI Advanced even if they select to participate in the orthopedic Clinical Episode Service Line Group. However, any procedures under inpatient MS-DRGs 469, 470, 521, 522 or outpatient HCPCS 27447 and 27130 performed at a CJR participant hospital are included in the CJR model and not in BPCI Advanced. In addition, PGPs that select the orthopedic Clinical Episode Service Line Group in BPCI Advanced cannot receive Target Prices for the MJRLE Clinical Episode at any CJR participant hospital. When the CJR Model ends, the orthopedic PGP may be able to trigger the MJRLE Clinical Episode at the former CJR participant hospital starting in Model Year 8 (2025).

Q4: If a BPCI Advanced Clinical Episode, for example a Congestive Heart Failure (CHF) Clinical Episode, occurs and a CJR participant hospital subsequently admits the patient for a MJRLE/LEJR procedure during the CHF Clinical Episode period, will CMS drop the CHF Clinical Episode and retain the CJR LEJR episode of care?

A4: Yes, CMS will drop the CHF Clinical Episode in the BPCI Advanced Model because CJR takes precedence, and the Major Joint Replacement procedure triggers an episode of care in the CJR Model.

Q5: Can a CJR participant hospital, who also participates in BPCI Advanced, trigger a BPCI Advanced outpatient Total Knee Arthroplasty (TKA) or outpatient Total Hip Arthroplasty (THA) procedure?

A5: No, a CJR participant hospital, who also participates in BPCI Advanced and selected the orthopedic Clinical Episode Service Line Group, will not be able to trigger an outpatient TKA or outpatient THA procedure in BPCI Advanced until they are no longer participating in CJR or the CJR Model has ended. This is because the outpatient TKA and outpatient THA procedures are a part of the MJRLE Clinical Episode and not a standalone Clinical Episode with a separate Target Price. As stated previously, participant hospitals in the CJR Model can participate in BPCI Advanced, but they cannot participate in Clinical Episodes also included in CJR. However, a Participant who selected the orthopedic Clinical Episode Service Line Group for itself or any of its Downstream Episode Initiators may be able to trigger Major Joint Replacement of the Lower Extremity (MJRLE) Clinical Episodes at former CJR participant hospitals once they are no longer participating in CJR. This also means when the CJR Model ends at the end of 2024, CJR participant hospitals who participate in BPCI Advanced and who selected the Orthopedic Clinical Episode Service Line Group for Model Year 7 (2024) may be able to trigger MJRLE Clinical Episodes in Model Year 8 (2025).