Aetna Institutes of Quality® Bariatric Surgery Facilities
Program Requirements

A facility that meets certain measures of clinical quality, cost efficiency and access for bariatric services may be selected to participate in the Aetna Institutes of Quality Bariatric Surgery Network.

To be considered for the network, a facility must first complete the pre-screening survey in Aetna's Request for Information (RFI). If a facility meets all mandatory program requirements listed in the survey, it completes the remainder of the RFI and submits the full survey response to Aetna via email. We then evaluate the answers provided and consider both Aetna internal data and other publicly available data.

Once selected for the network, the facility is listed in DocFind®, our online public directory of Aetna providers. Designation of inpatient facilities and ambulatory surgery centers is valid for two years, contingent on ongoing compliance with Institutes of Quality Bariatric Surgery program requirements. All facilities will re-submit data periodically; the failure of designated facilities to respond to a request for information in a timely manner may result in removal from the network. Designation of newly-established ambulatory surgery centers operating for less than 12 months is valid for one year.

I. Mandatory program requirements

For a facility to be eligible for consideration, it must meet all program requirements listed below. If the facility does not meet these requirements, it will not be considered for potential designation.

A. Participating status of facility and bariatric surgeons:
   1. Facility must be credentialed by Aetna and participate in Aetna's provider network.
   2. All surgeons performing bariatric surgery at the facility participate in Aetna's provider network for all products.
   3. All of the anesthesiologists that practice at the facility must participate in Aetna's provider network for all products.

B. Inpatient Facility – Volume Requirements:
   1. Facility must have performed at least 125 bariatric surgical cases in the most recent 12 calendar months. Aetna's case volume requirement aligns with the requirements that the Centers for Medicare & Medicaid Services, The Leapfrog Group, and the American Society of Metabolic and Bariatric Surgery have established for their designation programs.[1]

C. Ambulatory Surgery Center (ASC) – Accreditation, Volume and Other Requirements:
   1. The facility must be licensed as an Ambulatory Surgical Center (ASC) by the state in which it operates, or in the absence of state licensure requirements, provide evidence of Medicare eligibility or certification as an ASC under 42 CFR 416.
   2. Facility must be accredited by one of the following organizations as an ASC that meets or exceeds Medicare guidelines under 42 CFR 416: Accreditation Association for Ambulatory Healthcare (AAAHC), American Association for Accreditation of

[1]For case volume requirement, see: CMS Press Release, February 21, 2006; NCD for Bariatric Surgery for Treatment of Morbid Obesity (100.1); The Leapfrog Hospital Survey, What's New in the 2008 Survey (Version 5.0); ASMBS Bariatric Surgery Center of Excellence Requirements.

Ambulatory Surgery Facilities (AAAASF), American Osteopathic Associations' Healthcare Facilities Accreditation Program (HFAP) or Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

3. Outpatient procedures are limited to those which do not involve stapling or division of the gastrointestinal tract.
4. Patients at the facility must be less than 60 years old with a BMI of less than 55, weight under 425 pounds, and an American Society of Anesthesiologists classification of less than 4, with no prior history of deep venous thrombosis or pulmonary embolism.
5. The ASC must have performed at least 75 weight-loss procedures in the most recent 12 calendar months.
6. A newly established ASC which has been operating for less than 12 months may apply for designation if it has performed at least 50 weight-loss procedures, and meets all other mandatory program requirements. If the facility is designated, the IOQ designation is valid for one year only.
7. The facility must have at least one bariatric surgeon who has performed at least 100 weight-loss operations in the previous 24 months; the procedures may have been performed in multiple facilities.
8. The facility must have a written plan and a transfer agreement for transferring a patient with complications to an Aetna participating inpatient facility within a reasonable distance.

C. All Facilities - Clinical outcomes**:**
   1. In the most recent 12 calendar months, the facility's mortality rate within 30 days of bariatric surgery must be less than or equal to 1.0%.
   2. In the most recent 12 calendar months, the facility's re-operation rate within 30 days of surgery for gastric banding is less than or equal to 2.5%.
   3. In the most recent 12 calendar months, the facility's re-operation rate within 30 days of surgery for all other open bariatric procedures (open and lap) is less than or equal to 5.0%.

II. Additional evaluation criteria for all facilities

If a facility meets all mandatory program requirements and submits a completed RFI, Aetna evaluates the facility's responses on its RFI survey submission. The evaluation criteria are listed below. In addition, Aetna internal data may be evaluated and may affect the decision to designate a facility.

Category	Additional Evaluation Criteria
Program duration	At a minimum, the program has been performing bariatric surgery continuously for the most recent 12 calendar months.
Industry accreditation	Facility has Full Approval as: ▪ American College of Surgeons (ACS) Bariatric Surgery Center Network (BSCN): Level 1 or Level Outpatient, and/or ▪ American Society for Metabolic and Bariatric Surgery (ASMBS) Bariatric Surgery Center of Excellence® (BSCOE).
Medical services	If the inpatient facility is not accredited by ACS or ASMBS, it must have all of the following medical services present: ▪ Anesthesiology ▪ Cardiology

Category	Additional Evaluation Criteria
	▪ Pulmonology ▪ Radiology ▪ Infectious disease ▪ Psychology/Behavior modification ▪ Intensive care unit ▪ Specialized equipment ▪ Nutrition/Counseling/Education
Quality improvement program	Facility has a bariatric surgery quality improvement program that includes a data collection system and/or personnel to collect, analyze and maintain program-related data. The data are regularly collected, analyzed and utilized for quality performance improvement and program management.
Reporting of outcomes data	Facility reports to one of the following registries: ▪ ACS National Surgical Quality Improvement Program (NSQIP) ▪ ACS Bariatric Surgery Center Network (BSCN) ▪ ASMBS Bariatric Outcomes Longitudinal Database™ (BOLD™)
Leapfrog	In-Patient facility submits The Leapfrog Hospital Survey.
Bariatric surgeon	Surgeon is an Aetna participating provider.
Bariatric surgeon	Surgeon is certified by American Board of Surgery or American Osteopathic Board of Surgery.
Bariatric surgeon	Surgeon is certified by American Society for Metabolic and Bariatric Surgery (ASMBS).
Bariatric surgeon	The number of bariatric surgery procedures personally performed at the applicant facility, as well as the total number of bariatric surgery procedures personally performed within the most recent calendar year.
Procedure-specific data	Data by procedure type: • Number of cases • Average length of stay • Readmission rates at 30 days • Mortality rate at 30 days
Readmission rate within 30 days	In the most recent 12 calendar months, all-cause admission rate within 30 days of initial bariatric surgery is less than 10%,
Re-operation rate within 30 days	In the most recent 12 calendar months, the facility's re-operation rate within 30 days of surgery is less than or equal to: Thresholds: 2.5% lap gastric banding 5.0% open bariatric procedures (open and lap)
Complications data	Data by type of complication:

Category	Additional Evaluation Criteria
	• Number of patients • Number of patients requiring a return to surgery • Number of patients resulting in readmission • Mortality number
Patient follow-up	At least 75% of surgical cases are followed one year post-operatively.
Patient management plan	Program provides an organized program of aftercare and follow-up for patients for at least 12 months.
Patient safety	In-Patient Facility: Rating for the Leapfrog Safe Practices Score (SPS). The Leapfrog SPS summarizes a hospital's adherence to 13 safety practices endorsed by the National Quality Forum, such as maintaining a culture of safety, hand hygiene, nursing workforce and prevention of infections.
Patient safety	In-Patient Facility: Rating for implementation of Leapfrog's medication error prevention (CPOE) standard. CPOE systems are electronic prescribing systems that intercept errors when they most commonly occur — at the time medications are ordered.
Access and Cost Effectiveness	
Overall network access	Evaluation of Aetna members' current utilization, cardiac care needs and geographic access as measured by average travel distance to emergency and non-emergency health care services in Aetna's participating network Facilities that are more geographically accessible to and are utilized more by Aetna members are given additional consideration
Cost effectiveness	Evaluation of cost per risk-adjusted case based upon Aetna data – this data uses the last 24 months of Aetna cost data and is adjusted to take into consideration relevant risks, such as age, sex and other conditions of the patient using a product known as **Symmetry Episode Risk Groups®** If one facility is more cost-effective than other comparable facilities, the more cost-effective facility will be selected -- depending on network access, capacity and other competitive needs, Aetna may designate other facilities that have met the other evaluation criteria

Data from the facility's RFI submission is not displayed or made available to the public. Facilities may have information that is currently displayed in our transparency tools and hospital comparison tools on Aetna's secure sites for members. The display of that information is not changed by Institutes of Quality designation.

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