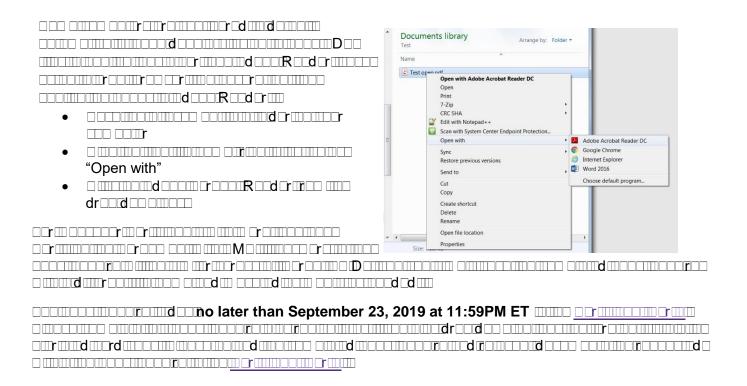
# Bundled Payments for Care Improvement (BPCI) Advanced Annual Check-in Questionnaire

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Purpose:
Participants' activities and barriers related to designing and implementing the BPCI Advanced Model
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#### **General Information**

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to this question is 'no', please provide written notice of changes to CMS via email ( <u>BPCIAdvanced@cms.hhs.gov</u> ). Instruction and additional information are located Article 3 of the <u>Participation Agreement</u> ].□	il

## **Participant Profile**

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	participating APM Entity group, or each hospital if hospitals are the APM Entities, to use CEHRT to document and communicate clinical care.

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	all applicable laws and regulations, processes to adhere to generally accepted accounting principles,
	compliance plan, and others outlined within the Participation Agreement.
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Additional information is located under Article 13 of the Participation Agreement.	
Other Issues Not Previously Listed	