

**Project Name: CMS Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)
Cooperative Agreement Technical Assistance (CATA)**

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02/29/2024 – CMS RMADA 3 IDIQ SSN

CMS Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreements (MACRA CATA) & 75FCMC19F0001		
PoP & TCV	Contracting Office POC	Contract PM
8/09/19 - 8/08/21 \$2,096,727.00	Janis Grady, 410-786-7217, janis.grady@cms.hhs.gov	Sherly Binu, 434-249-2323 sherly.binu@Religroupinc.com
Description of Relevant Services		
<p>Team FedPath provided policy, analytic, clinical, and informatics-driven technical assistance (TA) to seven specialty societies funded by MACRA Section 102. Our TA provided education and outreach best practices in measure analysis and testing to assess the feasibility of measures being developed. Our analytic education and TA efforts encompassed areas such as developing an analytic and measure test plan; understanding analytic and testing requirements; conducting alpha and beta testing cycles; and compiling measure analyses and testing results into reports and national quality forum artifacts for measure endorsement.</p>		

10/05/2023 – NQF - PRO-PM

Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreement Technical Assistance (CATA) at CMS – RELI Prime		
Contract No.: 75FCMC19F0001/75FCMC18D0037	\$ Value: \$2,096,727.00	PoP: 08/09/19 - 08/08/21
<p>Contract Description: Under the CMS Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreement Technical Assistance (CATA) contract, RELI provided clinical quality measure development and measurement science-focused technical assistance to seven specialty societies developing digital measures (n=25) intended for the CMS Quality Payment Program. This effort included measures focused on population health, social determinants of health, mental health, and substance abuse and extended to quality and patient experience, health outcome, and PRO-PM eQMs.</p>		
<p>Relevance to Emphasis on PRO-PM: Expertise provided included PRO-PM, eQCM, QCDR measure development/testing across complex clinical topic areas and measure types. RELI supported CMS through 1) assisting CMS in its oversight role by monitoring the work of the recipients, communicating with both the recipients and CMS, and reporting progress, challenges, and gaps; and 2) making recommendations and providing training and TA to recipients in targeted areas of development and implementation. Measurement science expertise extended to all gates of the lifecycle, including tech. specification development and testing, and the use of eQCM tools (e.g., MAT VSAC, Bonnie) and associated HL7 standards (CQL, FHIR, HQMF, QDM). Support included peer review of measure development artifacts, and targeted consultation, education, and training. Our work drove best practices across the measure development lifecycle for each recipient and informed data-driven measure selection, associated business case development, alpha and beta testing approaches, and feasibility, scientific acceptability, usability testing. We collaborated, coordinated, and communicated with specialty societies, associations and health systems participating in the project, CMS, and other contractors including but not limited to the MDS Measures Management System (MMS) contractor and the Practice Improvement and Measures Management Support (PIMMS) contractor. We facilitated additional, targeted ad hoc knowledge-sharing sessions with individual recipients, and helped coordinate recipients' measure development activities and work products in a way that aligns with CMS MMS requirements. We collaborated and guided recipients through preparation for eventual submission for CBE consideration. We conducted</p>		

Over the last year, RELI developed 17 ad hoc deliverables of which many of those were used by the CMS COR and the Project Officers to support and/or guide their discussion with CMS leadership for critical decision-making on various aspects of the recipients' performance that were very well received by CMS.
~ CMS Contracting Officer

surveys of the recipients on how we can better support their needs, to drive continuous process and improvement and facilitated routine conferences or calls and webinars.

08/18/2023 – CMS CCW DA

Agency & Contract Name	Agency: CMS; Contract Name: Medicare Access and CHIP Reauthorization Act (MACRA) Alternate Payment Model (APM) Validation Study
Contract # and Prime Contractor	HHSM500201600051C; RELI Group Inc.
Period of Performance & TCV	08/25/16 - 06/24/18; \$3,693,870.74
Contracting Officer	Gina Romano, 410-786-8372, gina.romano1@cms.hhs.gov
Description of Services & Requirement Areas:	
<p>RELI conducted independent validation analyses to fulfill Congress' mandate to examine fraud, waste, and abuse (FWA) in the Medicare program and identify vulnerabilities specific to each of the four APMs: Medicare Shared Savings Program; Comprehensive ESRD Care; Independence at Home, and Comprehensive Primary Care Plus.</p> <p>Healthcare Data: RELI research, policy, and analytic experts used tools such as SAS, SQL, SPSS, STATA, and R to extract and analyze APM data within large CMS repositories (e.g., IDR, CCW) to prepare the required data including beneficiary risk scores, beneficiary enrollment, Master Data Management-sourced data, and FFS claims records. We also used Medicare-enrollment providers, Provider Enrollment Chain, and Ownership System (PECOS) warehouse to correlate APM participate provider reference data to the claims data.</p> <p>Data Development and Maintenance: We created an efficient sampling and data validation methodology to extract, scrub, process and analyze over 5B claims for ~10M Medicare patients around the country—ensuring data integrity and privacy requirements.</p> <p>Research, Data Analysis, and Reporting: We computed measures and derived samples relevant to each of the four APMs, and subsequently characterized and assessed expenditures and patterns of care among attributed beneficiaries, provider participants and suppliers associated with each APM to detect anomalies and potential indicators of FWA. We compared the risk scores and Medicare Parts A and B expenditures for beneficiaries participating in different APM programs to FFS beneficiaries. We developed advanced algorithms, sampling and statistical approaches, including multilevel hierarchical regression modeling to develop solutions. Based on our analyses, we developed recommendations and presented an options paper to CMS to inform Congress' efforts to address fraud, waste, and abuse under MACRA—resulting in multiple recommendations being included in a 2019 Congressional Report.</p>	

Technical Assistance and Project Management: This project encompassed four distinct APMs, displaying our ability to manage concurrent deliverables efficiently. We maintained open channels of communication, collaborating with CMS, CMS contractors and external stakeholders to deliver on time or ahead of schedule, with outstanding quality.

06/15/2023 – CMS - Health Equity Accelerator (HEA)

Centers for Medicare and Medicaid Services	75FCM C19F00 01 MACRA CATA	Under the CMS Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreement Technical Assistance (CATA) contract, RELI provided clinical quality measure development and measurement science-focused technical assistance to seven specialty societies developing digital measures (n=25) intended for the CMS Quality Payment Program. This effort included measures focused on population health, social determinants of health, mental health, and substance abuse and extended to quality and patient experience, health outcome, and PRO-PMs.	<p>Y – Relevant Scope: measure development; social determinants of health; mental health.</p> <p>The support we provided cut across Electronic Clinical Quality Measures (eQMs), Qualified Clinical Data Registry (QCDR) and other data sources across complex clinical topic areas and measure types. RELI supports CMS through 1) assisting CMS in its oversight role by monitoring the work of the recipients and communicating with both the recipients and CMS, as well as reporting to CMS on the work's progress, challenges, and gaps; and 2) making recommendations and providing training and expert assistance to recipients in measurement development and implementation. We also manage our subcontractor HSAG on this contract (Task 1). RELI provided measurement science support across all gates of the development lifecycle, including technical specification development and testing, and the use of eQCM tools (e.g., MAT VSAC, Bonnie) and associated HL7 standards (CQL, FHIR, HQMF, QDM) (Task 2).</p> <p>Our support includes peer review of critical measure development and eQCM artifacts, and targeted consultation, education, and training. RELI's work drives best practices across the measure development lifecycle for each recipient and informs data-driven measure selection, associated business case development, alpha and beta testing approaches, and the feasibility, scientific acceptability, and usability of the measures in development by cooperative agreement recipients.</p> <p>We collaborated, coordinated, and communicated with specialty societies, associations and health systems participating in the project, CMS, and other contractors including but not limited to the MIDS Measurement Management System (MMS) contractor and the Practice Improvement and Measures Management Support (PIMMS) contractor. We facilitated additional, targeted ad hoc knowledge-sharing sessions with individual recipients, and helped coordinate recipients' measure development activities and work products in a way that aligns with CMS MMS requirements. We collaborated and guided recipients through preparation for eventual submission for consensus-based endorsement consideration. We conducted surveys of the recipients on how we can better support their needs, to drive continuous process and improvement and facilitated routine conferences or calls and webinars (Task 4).</p>
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05/24/2023 – CMS SNF VBP SSN

8. The Validation Contractor should be able to demonstrate the capability of sharing all improvement information and ideas with CMS and other entities as requested by CMS to continually improve the services provided to the QIOs and other affiliated entities. The validation contractor shall demonstrate their capability to maintain a record of method improvements that can be documented as having savings and/or intrinsic value. Experience outside of CMS which is of similar size and scope is acceptable.

Contract Number	Role	Customer Name	Customer POC	Total Contract Value	Period of Performance
75FCMC19F0001 Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreements Technical Assistance (CATA)	Prime	CMS	Janis Grady 410-786-7217, janis.grady@cms.hhs.gov	\$2,096,727	08/09/19 - 08/08/21
Description of Relevant Services: RELI provided technical assistance (TA) to seven specialty societies and associations, funded by CMS, to develop and test complex clinical quality measures intended for inclusion in the CMS Quality Payment Program—including measures specific to non-patient facing clinical specialties such as pathology and radiology, and vulnerable patient populations such as those with mental health disorders, cancer, and those under palliative care. Based on survey feedback received from the cooperative agreement recipients, RELI recently implemented many procedural and operational improvements. These improvements have reduced the burden on recipients, improved customer satisfaction, promoted better collaboration, and strengthened our approach to providing targeted TA for quality measure development. We implemented a series of procedural and TA improvements based on feedback received on a survey of the cooperative agreement recipients. These improvements reduce the burden on the recipients and further strengthen our approach to providing value-add TA to help recipients navigate complex regulatory frameworks.					

01/26/2023 – AHRQ QSRS QI SSN

Exhibit 1: Centers for Medicare & Medicaid Services (CMS) - Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreements Technical Assistance (CATA)

Contract Name		Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreements Technical Assistance (CATA)	
•	Customer Name	Centers for Medicare & Medicaid Services (CMS)	
•	POC Information	Janis Grady, COR 410-786-7217 janis.grady@cms.hhs.gov	
•	Total Contract Value	\$2,096,727	
•	Period of Performance	08/09/19 - 08/08/21	
		Description of Services Provided	

Under the MACRA Cooperative Agreement Technical Assistance (CATA) MIDS prime contract, Fedpath member RELI provided extensive quality indicator and measurement science support and technical assistance to seven external specialty societies and associations funded under cooperative agreements to develop measures for the CMS Quality Payment Program (QPP). This was the first-ever attempt by CMS to fund technical assistance and measure development support to external measure developers—and included complex measurement areas to improve patient safety and clinical outcomes such as non-patient facing clinical specialties such as pathology and radiology, patient-reported outcome performance measure (PRO-PMs), risk adjusted electronic clinical quality measure (eCQM) development and re-specifying registry-based measures to eCQMs. Technical assistance support included review of test plans, technical specifications, and targeted support specific to establishing feasibility, reliability, and validity of the measure. We developed customized project support plans for each recipient based on a needs assessment. RELI's work included the development of customized project support plans focused on targeted measurement science guidance to help the grantees align their measure development and testing process with HL7 and CMS standards-based requirements, as well as with the requirements of the National Quality Forum measure endorsement criteria. Our support extended to individualized and targeted technical assistance during monthly webinars with each individual cooperative agreement recipient, as well as jointly attended annual webinars with all cooperative agreement recipients.

01/19/2023 – AHRQ QSRS Data Analysis – Response to SSN

Contract Name	
Customer Name	Centers for Medicare & Medicaid Services (CMS)
POC Information	Janis Grady, COR 410-786-7217 janis.grady@cms.hhs.gov
Total Contract Value	\$ 2,096,727
Period of Performance	08/09/19 - 08/08/21
Description of Services Provided	
Under the MACRA Cooperative Agreement Technical Assistance (CATA) MIDS prime contract, RELI provided extensive quality measurement and measurement science support and technical assistance to seven external specialty societies and associations funded under cooperative agreements to develop measures for the CMS Quality Payment Program (QPP) that were utilized by several components within CMS, as well as other federal agencies (Task 1.7). This was the first-ever attempt by CMS to fund technical assistance and measure development support to external measure developers—and included complex measurement areas to improve patient safety and clinical outcomes such as non-patient facing clinical specialties such as pathology and radiology, patient-reported outcome performance measure (PRO-PMs), risk adjusted electronic clinical quality measure (eCQM) development and re-specifying registry-based measures to eCQMs (Task 1.4). Development of eCQM included establishing feasibility, reliability, and validity of the measure (Task 1.10). We developed customized project support plans for each recipient based on a needs assessment. RELI's work included the development of	

customized project support plans focused on targeted measurement science guidance to help the grantees align their measure development and testing process with HL7 and CMS standards-based requirements, as well as with the requirements of the National Quality Forum measure endorsement criteria. Our support extended to individualized and targeted technical assistance during monthly webinars with each individual cooperative agreement recipient, as well as jointly attended annual webinars with all cooperative agreement recipients.

12/17/2022 - CDC Formative, Process, and Outcome Evaluation

Exhibit 1: Centers for Medicare & Medicaid Services (CMS) - Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreements Technical Assistance (CATA)

Contract Name	Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Cooperative Agreements Technical Assistance (CATA)
Customer Name	Centers for Medicare & Medicaid Services (CMS)
POC Information	Janis Grady, COR 410-786-7217 janis.grady@cms.hhs.gov
Total Contract Value	\$2,096,727
Period of Performance	08/09/19 - 08/08/21
Description of Services Provided	
<p>Under the MACRA Cooperative Agreement Technical Assistance (CATA) MIDS prime contract, Fedpath member RELI provided extensive quality indicator and measurement science support and technical assistance to seven external specialty societies and associations funded under cooperative agreements to develop measures for the CMS Quality Payment Program (QPP). This was the first-ever attempt by CMS to fund technical assistance and measure development support to external measure developers—and included complex measurement areas to improve patient safety and clinical outcomes such as non-patient facing clinical specialties such as pathology and radiology, patient-reported outcome performance measure (PRO-PMs), risk adjusted electronic clinical quality measure (eCQM) development and re-specifying registry-based measures to eQMs. Technical assistance support included review of test plans, technical specifications, and targeted support specific to establishing feasibility, reliability, and validity of the measure. We developed customized project support plans for each recipient based on a needs assessment. RELI’s work included the development of customized project support plans focused on targeted measurement science guidance to help the grantees align their measure development and testing process with HL7 and CMS standards-based requirements, as well as with the requirements of the National Quality Forum measure endorsement criteria. Our support extended to individualized and targeted technical assistance during monthly webinars with each individual cooperative agreement recipient, as well as jointly attended annual webinars with all cooperative agreement recipients.</p>	

12/05/2022 - Centers for Medicare & Medicaid Services (CMS) Center for Medicare (CM) Part B Drug Technical Support Contract

Capability 3

Team RELI has developed a national reputation over 45 years of providing high-quality services that exceed the expectations of our federal and state Medicaid agency clients. Through our work in assisting government clients with modifications to reimbursement methodologies, we often assume the role of meeting with stakeholders to explain and prepare for reimbursement policy changes. We often provide clients with a help desk service to support provider inquiries relating to drug reimbursement policies and the rates for specific drug products.

On our MACRA CATA Prime contract, Team RELI provided policy, analytic, clinical, and informatics-driven technical assistance (TA) to seven specialty organizations and health systems funded by MACRA Section 102 to develop clinical quality measure (CQM) for inclusion in the CMS QPP. To meet this legislative mandate, CMS entered into a cooperative agreement with recipients to develop digital measures (e.g., electronic CQMs), patient-reported outcome measures, and claims-based measures, across complex clinical topic areas, and priority specialty and sub-specialty gaps in the CMS measure portfolio. RELI promoted best practices across the measure development lifecycle and informs data-driven measure selection, business case development, alpha and beta testing approaches, and the feasibility, scientific acceptability, and usability of the measures being developed.