

What to Expect in Next Year & Developing Your ACO Action Plan

Welcome



The webinar will start at 3:00 pm ET.
It is interactive, so please make sure that you have connected via
phone with your audio pin. Call-in information is shown on your
dashboard, right side of screen.



Agenda

- 1.Introductions
- 2.Housekeeping
- 3.Presentation
- 4.Q & A
- 5.Follow-up



Housekeeping

- 1. Panelists will present for approximately 40 minutes
- 2. Q&As will take the remainder of the 1 hour
 - Submit anonymous written questions using the Q/A tab (not chat) on dashboard
- 3. Webinar is being recorded
 - Slides and recording will be available at www.NAACOS.com/webinars.

Today's Presenters



Kris Gates, Health Endeavors

Kris Gates, CEO of Health Endeavors, is the primary architect of the Health Endeavors software product suite. The primary web-based software product suite includes Conflict of Interest, Contract & Entity Manager, Non-Monetary Comp Tracker, Physician Hours Manager, Survey & Assess Tool and Training Center. In addition, Health Endeavors spearheaded the effort to develop software specifically for the Medicare Shared Savings Program (MSSP) ACOs, including an ACO Claims Data Center, GPRO Tool, NPI Ticker and Population Analytics. She earned her *juris doctor* from Creighton University School of Law with *cum laude* recognition. In addition to her software product development experience, Ms. Gates has provided legal services in private practice and served as corporate counsel to several large nonprofit healthcare systems, including Banner Health, Alegen Health and Norton Healthcare.

What to Expect in Next Year & Developing Your ACO Action Plan

Kris Gates, Health Endeavors

Every ACO Is Different

- Primary Care Only
- Primary Care + Specialists
- Primary Care + Hospital
- Primary Care + Hospital + Home Health
- Hospital Based
- Patient History & Demographics
- Geography
- Management
- Structure
- Past Experiences
- Single EMR
- Multiple EMRs



One Strategy Does NOT Fit All

Best Practices + Unique Decisions

= Your ACO Strategy



ACO ACTION PLAN

ACO ACTION TASKS

- ▶ Initial Patient Attribution List
 - Is the Patient Count Right?
 - PECOS
 - NPI
- ▶ Assign Primary TIN & Provider
 - Quality Measures Accountability
 - Financial Accountability
 - Arms Around Population



ACO ACTION TASKS

- ▶ Patient Population
 - Attributed
 - Non-Attributed
- ▶ Data Sharing Preferences – Get Claims Data
 - Office Encounters
 - Mailings
 - Medicare Telephone Encounters
 - Office Encounters & Non-Attributed



ACO ACTION TASKS

- ▶ TIN Add/Remove Management
 - Add
 - Remove
 - Termination of Contracts
 - Quality Measures Accountability
 - GPRO Reporting on Quality Measures
 - PQRS Incentive/Penalty
 - Recruitment



ACO ACTION TASKS

- ▶ Quality Measures Plan for each Facility/TIN/Practice
 - How to Educate on GPRO Measures?
 - How to Track?
 - How to Report?
 - How to achieve the goal benchmarks?



ACO ACTION TASKS

- ▶ EMR Gap Analysis
 - Monthly Gap Analysis
 - TIN Progress (Completion) Goals
 - EMR Captures vs. Manual Abstraction

- ▶ GPRO Reporting Plan
 - Year Round
 - 8 Week Reporting Period (January – March, 2015)



ACO ACTION TASKS

- ▶ Claims Data –
 - Individual Patient Data for TINS/Practices/Facilities
 - Population

- ▶ Population Management
 - Claims Reduction Program
 - Facility/TIN/Practice Notifications
 - Newly Diagnosed
 - Admits
 - Discharges
 - ER Visits
 - MRI/CT



ACO ACTION TASKS

- ▶ Financial Analytics/Benchmarks
- ▶ TIN & ACO Progress Reports
 - Quality Measures Accountability
 - Financial Accountability – Expenditures
- ▶ Training & Communications
 - Providers
 - Office Staff
 - ACO Management Team



ACO ACTION TASKS

- ▶ Provider Participation
 - Staff Engagement
 - Provider Engagement

- ▶ Compliance & Conflict of Interest
 - Compliance Plan
 - Training
 - Annual Conflict of Interest



ACO ACTION TASKS

- ▶ Patient Engagement
 - Care Plans
 - Goals
 - Disease Group Education
 - Discharge & Admission Notification
 - Follow-up Care Instructions



ACO ACTION TASKS

- ▶ CAHPS (Patient Surveys)
 - <http://acocahps.cms.gov/Content/ApprovedVendor.aspx>
- ▶ Public Reporting Guidance
 - <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/ACO-Public-Reporting-Guidance.html>



ACO ACTION TASKS

- ▶ NPI Annual Update
 - Provider/Supplier Annual Update



Get your arms around Patient Population

Who is sharing data?

Where are they?

Who are they?

Who is treating them?



Point of Care Notices August 2013

	TOTAL ACO PATIENTS	% OF POC NOTICES GIVEN	# CARE MGT PATIENTS
Internal Medicine 1	1674	93.13%	63
Neurology 1	30	20.00%	0
Internal Medicine 2	2459	95.30%	73
Cancer Care 1	58	41.38%	0
Family Practice 1	2919	92.33%	186
Internal Medicine 3	3343	94.25%	195
Gastroenterology 1	14	14.29%	0
Family Practice 2	609	89.82%	22
TOTAL	11136	92.97%	539

Get your arms around Patient Population

Get your arms around Patient Population In-Network/Out-Network Migration

Medicare Beneficiary Database**Population Analytics****GPRO****Tools****Payor Database**

Select the practice you would like to see the data for or select "ALL PRACTICES".
NOTE: Only practices that have NPI's associated with them from the NPI Management screen will be shown here.

SELECT PRACTICE

Submit

Show In-Network

Part A - Out-of-Network

Name (NPI)	Amount
	\$21,562,563.96

Part B - Out-of-Network

Name (NPI)	Amount
	\$1,318,884.87

Quality Measures (GPRO) Plan

MEDICAL CENTER

NAME _____ AGE _____
ADDRESS _____ DATE _____

R_x

33 Measures

22 GPRO

☐ LABEL
REFILL 0 1 2 3 4 5 PRN NR

SIGNATURE _____

ACO #	Measure Title	Method of Data Submission	P4P Phase-in PY1	P4P Phase-in PY2	P4P Phase-in PY3
12.	Medication Reconciliation	GPRO Web Interface	R	P	P
13.	Falls: Screening for Future Fall Risk	GPRO Web Interface	R	P	P
14.	Influenza Immunization	GPRO Web Interface	R	P	P
15.	Pneumococcal Vaccination for Patients 65 Years and Older	GPRO Web Interface	R	P	P
16.	Body Mass Index (BMI) Screening and Follow-Up	GPRO Web Interface	R	P	P

Quality Measures (GPRO) Plan

MEDICAL CENTER

NAME _____ AGE _____
ADDRESS _____ DATE _____

R

R – Report

































P - Perform

SIGNATURE

☐ LABEL
REFILL 0 1 2 3 4 5 PRN NR

ACO #	Measure Title	Method of Data Submission	P4P Phase-in PY1	P4P Phase-in PY2	P4P Phase-in PY3
17.	Tobacco Use: Screening and Cessation Intervention	GPRO Web Interface	R	P	P
18.	Screening for Clinical Depression and Follow-Up Plan	GPRO Web Interface	R	P	P
19.	Colorectal Cancer Screening	GPRO Web Interface	R	R	P
20.	Breast Cancer Screening	GPRO Web Interface	R	R	P

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Action	HICN	First	Last	DOB	Practice	CAD	DM	HTN	HF	IVD	PV5	PV6	PV7	PV8	PV9	PV10	PV11	PV12	CR1	CR2
 	111345111A	LOIS	GRIFFIN	10/11/1968	Demo Hospital															
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 	231176110A	MARGE	SIMPSON	10/01/1954	Demo Hospital															
 	873114411A	HOMER	SIMPSON	05/10/1955	Demo Hospital															
 	111111111D	JOHN	SMITH	09/05/1944	Demo Hospital															
 	385716111A	HOWARD	STERN	01/06/1954	Demo Hospital															

22 GPRO Measures – 15 Modules

1	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility (CARE-1)
2	Falls: Screening for Future Fall Risk (CARE-2)
3	Coronary Artery Disease (CAD)
4	Diabetes Mellitus (DM)

15 Modules

5	Heart Failure (HF)
6	Hypertension (HTN)
7	Ischemic Vascular Disease (IVD)
8	Preventive Care and Screening: Screening Mammography (PREV-5)

15 Modules

9	Preventive Care and Screening: Colorectal Cancer Screening (PREV-6)
10	Preventive Care and Screening: Influenza Immunization (PREV-7)
11	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older (PREV-8)
12	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (PREV-9)

15 Modules

- | | |
|-----------|--|
| | |
| 13 | Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (PREV-10) |
| | |
| 14 | Preventive Care and Screening: Screening for High Blood Pressure (PREV-11) |
| | |
| 15 | Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan (PREV-12) |

15 Modules

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22 GPRO Measures – 15 Modules

GPRO & Claims Data?

MEDICAL CENTER

NAME _____ AGE _____
ADDRESS _____ DATE _____

Rx

**Use your
Claims Data
for GPRO!**

☐ LABEL
REFILL 0 1 2 3 4 5 PRN NR

SIGNATURE _____

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Action	HICN	First	Last	DOB	Practice	CAD	DM	HTN	HF	IVD	PV5	PV6	PV7	PV8	PV9	PV10	PV11	PV12	CR1	CR2
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	111111111D	JOHN	SMITH	09/05/1944	Demo Hospital															
	385716111A	HOWARD	STERN	01/06/1954	Demo Hospital															

Use your claims data to flag CPT, ICD9 and G-Codes to (i) assist providers in completing Quality Measures; and (ii) locate the applicable medical record by NPI

EMR & Chart Gap Analysis

MEDICAL CENTER

NAME _____ AGE _____
ADDRESS _____ DATE _____

R

Not on Chart
(EMR)

Can't Report

☐ LABEL
REFILL 0 1 2 3 4 5 PRN NR

SIGNATURE _____

EMR & Chart Gap Analysis

MEDICAL CENTER

NAME _____ AGE _____
ADDRESS _____ DATE _____

Rx

**ACO
Capabilities?**

**Each TIN
Capabilities**

☐ LABEL

SIGNATURE _____

REFILL 0 1 2 3 4 5 PRN NR

Methods of QM/GPRO Reporting

GPRO in 8 Weeks (January 27-March 21)

Manual Chart Data Abstraction (Pull Charts)
Key individual Chart Data to CMS GPRO Portal

Time Consuming

CMS GPRO Portal limited to 15 users

Plan your registration for IACS/QNET Access (IRS Letter)

Additional Staff Intensive

Short Time Frame to Complete

No time to review data accuracy & completeness

Methods of QM/GPRO Reporting

GPRO in 8 Weeks (January 27-March 21)

Manual Chart Data Abstraction (Pull Charts)

Key individual Chart Data to Excel

Convert Excel to CMS XML Format

XML Import to CMS GPRO Portal

Time Consuming

Plan your registration for IACS/QNET Access (IRS Letter)

Additional Staff Intensive

Limited Technology Needed for Excel Setup/XML Conversion

Short Time Frame to Complete

No time to review data accuracy & completeness

Methods of QM/GPRO Reporting

GPRO in 8 Weeks (January 27-March 21)

Manual Chart Data Abstraction (Pull Charts)

Key individual Chart Data to Electronic Reporting Tool

Convert Electronic Reporting Tool Data to XML

XML Import to CMS GPRO Portal

Additional Staff Intensive

Locate vendor for Electronic Reporting Tool

Short Time Frame to Complete

Limited time to review data accuracy & completeness

Quality Measures Questionnaire

Please answer the following questionnaire accordingly.

Date of Service:	<input type="text" value="09/14/2013"/>
Patient Name:	CHRIS GRIFFIN
HCIN:	974621111A
Patient DOB:	04/24/1967
Gender:	M
Practice Name:	Demo Hospital
Physician Name:	<input type="text" value="N/A"/>
Patient Medical Record Status?	<input checked="" type="radio"/> Medical Record Found <input type="radio"/> Medical Record Not Found
Was Patient Qualified for Sample?	<input checked="" type="radio"/> Patient is Qualified <input type="radio"/> Not Qualified for Sample - In Hospice <input type="radio"/> Not Qualified for Sample - Moved out of Country <input type="radio"/> Not Qualified for Sample - Deceased
Date Patient was NOT Qualified:	<input type="text"/>

8 Week - Electronic Reporting Tool

- ☐ unlimited users
- ☐ central TIN data repository
- ☐ track completion progress
- ☐ daily CMS XML Data Imports to review data

1. Was patient discharged from an inpatient facility (e.g., hospital, nursing home) in the past 30 days? If yes, complete a medication reconciliation and document the medication reconciliation in the medical record. (ACO 12) (Module One/Care-1)

- ☐ No – patient not discharged from inpatient facility in past 30 days
- ☐ Yes – patient discharged from inpatient facility in past 30 days and medication reconciliation completed
- ☐ Yes – Patient discharged from inpatient facility in past 30 days but medication reconciliation NOT completed as hospital record NOT AVAILABLE
- ☐ Yes – Patient discharged from inpatient facility in past 30 days but medication reconciliation NOT completed due to NO OFFICE VISIT

2. Was the patient screened for a fall in the past 12 months? Provide a Fall Screening to patient to complete. Keep the completed Fall Screening Document in the medical record. (ACO 13) (Module Two/Care-2)

- ☐ Yes – fall screening provided and patient completed
- ☐ No – patient refused to complete the fall screening
- ☐ No – patient not ambulatory or other medical reason, e.g. patient memory
- ☐ No – patient in emergency or urgent situation (no time to complete screening)
- ☐ No – fall screening NOT provided (no medical reason or other reason)

Methods of QM/GPRO Reporting

GPRO in 8 Weeks (January 27-March 21)

EMR Data Abstraction to XML or Excel File
XML Import to CMS GPRO Portal

**Advanced Technology Needed Data Abstraction/XML
Conversion**

Short Time Frame to Complete

Very limited time to review data accuracy & completeness

**Not able to abstract all data from EMR – need staging area
for integration of EMR and manual abstraction**

Methods of QM/GPRO Reporting

GPRO Year Round

Manual Chart Data Abstraction (Pull Charts)

Key individual Chart Data to Excel

Review Excel Data Abstractions

Time Consuming

Additional Staff Intensive

Difficult to review data accuracy & completeness using Excel

Excel not a central repository without technology

Methods of QM/GPRO Reporting

GPRO Year Round

Office Encounter - key patient data to Electronic Reporting Tool
Convert Electronic Reporting Tool Data to Central Repository

Locate vendor for Electronic Reporting Tool & Central Repository
Allows time to review accuracy and completeness of data
Central Repository
Track Provider Progress

Quality Measures Questionnaire

Please answer the following questionnaire accordingly.

Date of Service:	<input type="text" value="09/14/2013"/>
Patient Name:	CHRIS GRIFFIN
HCIN:	974621111A
Patient DOB:	04/24/1967
Gender:	M
Practice Name:	Demo Hospital
Physician Name:	<input type="text" value="N/A"/>
Patient Medical Record Status?	<input checked="" type="radio"/> Medical Record Found <input type="radio"/> Medical Record Not Found
Was Patient Qualified for Sample?	<input checked="" type="radio"/> Patient is Qualified <input type="radio"/> Not Qualified for Sample - In Hospice <input type="radio"/> Not Qualified for Sample - Moved out of Country <input type="radio"/> Not Qualified for Sample - Deceased
Date Patient was NOT Qualified:	<input type="text"/>

YEAR ROUND - Electronic Reporting Tool

- ☐ unlimited users
- ☐ central TIN data repository
- ☐ track completion progress
- ☐ real time data review process

1. Was patient discharged from an inpatient facility (e.g., hospital, nursing home) in the past 30 days? If yes, complete a medication reconciliation and document the medication reconciliation in the medical record. (ACO 12) (Module One/Care-1)

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Methods of QM/GPRO Reporting

GPRO Year Round

EMR Data Abstraction to acceptable vendor file format

Import EMR Data to Electronic Reporting Tool

Convert Electronic Reporting Tool Data to
Central Repository

Locate vendor for Electronic Reporting Tool & Central Repository

Allows time to review accuracy and completeness of data

Central Repository

Track Provider Progress

Achieve Performance Year Round

Quality Measures Questionnaire

Please answer the following questionnaire accordingly.

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HCIN:	974621111A
Patient DOB:	04/24/1967
Gender:	M
Practice Name:	Demo Hospital
Physician Name:	<input type="text" value="N/A"/>
Patient Medical Record Status?	<input checked="" type="radio"/> Medical Record Found <input type="radio"/> Medical Record Not Found
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Date Patient was NOT Qualified:	<input type="text"/>

YEAR ROUND - Electronic Reporting Tool

- ☐ unlimited users
- ☐ central TIN data repository
- ☐ track completion progress
- ☐ real time data review

1. Was patient discharged from an inpatient facility (e.g., hospital, nursing home) in the past 30 days? If yes, complete a medication reconciliation and document the medication reconciliation in the medical record. (ACO 12) (Module One/Care-1)

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- ☐ No – patient in emergency or urgent situation (no time to complete screening)
- ☐ No – fall screening NOT provided (no medical reason or other reason)

YEAR ROUND - GPRO & Claims

MEDICAL CENTER

NAME _____ AGE _____
ADDRESS _____ DATE _____

Rx

**Remember -
Use your
Claims Data
for GPRO!**

☐ LABEL
REFILL 0 1 2 3 4 5 PRN NR

SIGNATURE _____

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Action	HICN	First	Last	DOB	Practice	CAD	DM	HTN	HF	IVD	PV5	PV6	PV7	PV8	PV9	PV10	PV11	PV12	CR1	CR2
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	111111111D	JOHN	SMITH	09/05/1944	Demo Hospital															
	385716111A	HOWARD	STERN	01/06/1954	Demo Hospital															

Use your claims data to flag CPT, ICD9 and G-Codes to (i) assist providers in completing Quality Measures; and (ii) locate the applicable medical record by NPI

Get Claims Data

MEDICAL CENTER

NAME _____ AGE _____
ADDRESS _____ DATE _____

Rx

**Get & Use
Claims Data**

SIGNATURE

☐ LABEL
REFILL 0 1 2 3 4 5 PRN NR

Edit Patient Data Sharing Preferences

SIMPSON, Homer

HICN: 873-11-4411A

DOB: 05/10/1955

Sex: Male

Data Sharing Preferences

Encounter Date

09/14/2013

OHCA Notice

No

HIE

No

PHI Preference

Yes - Agreed to Share

PHI Mechanism

Office

Mailing Info

Patient Mailed On

Never Mailed

Mailing Pref Recorded

N/A

Practice Visits

Practice	Visit Count	Primary	TIN
Demo Hospital	1	Yes	111111111

Save Patient Prefs

Close

Track & Submit Mailing Preferences

Track & Submit Office Encounter Preferences

How you GET IT

ACO Center » Population Analytics

Medicare Beneficiary Database

GPRO

Tools

Use the Claims Data

Create Report

Highest Claims

Claim Date Range:

To

Top 100

Select if you would like results for Attributed, Non-Attributed, or Both.

☐ Attributed ☐ Non-Attributed ☒ Both

Select a filter option below.

Filter By:

Part A

Part A Claim Type:

CPT/HCPCS/ICD9

Code:

DRG Watch (Part A Only) (Press CTRL while clicking to select multiple DRG codes)

- 1 - (HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W MCC)
- 2 - (HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W/O MCC)
- 3 - (ECMO OR TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.)
- 4 - (TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.)

Enter an NPI Number. (will only return claims with that NPI)

NPI Number:

Search

Reset Search

Excel Export

Action	HICN	First	Last	Sex	DOB	Total Claims	Total of Claims
--------	------	-------	------	-----	-----	--------------	-----------------

Get your arms around Patient Population

Who is sharing data?

Where are they?

Who are they?

Who is treating them?



Beneficiary Preferences –

Determine initial method to collect patient preferences to submit via MFT Portal in XML Format:

- ▶ Mail Encounters
 - How will you electronically process print documents? (initial and changes)
- ▶ Office Encounters
 - How will you electronically process office encounters? (initial and changes)
- ▶ Medicare Encounters
 - How will you electronically process the information communicated by the patient to Medicare? (initial and changes)



SIMPSON, Homer

HICN:
873-11-4411A

DOB:
05/10/1955

Sex:
Male

Data Sharing Preferences

Encounter Date
09/14/2013

OHCA Notice
No

HIE
No

PHI Preference
Yes - Agreed to Share

PHI Mechanism
Office

Mailing Info

Patient Mailed On
Never Mailed

Mailing Pref Recorded
N/A

Practice Visits

Practice	Visit Count	Primary	TIN
Demo Hospital	1	Yes	111111111

Save Patient Prefs

Close

Track & Submit Mailing Preferences

Track & Submit Office Encounter Preferences

CMS Data Sharing Users Guide

Covers the following topics:

- ☐ Overview
- ☐ Required **Testing** of the MFT XML Transfer Process
- ☐ Accountable Care Organization (ACO) to ACO-Operating Store (ACO-OS) **Beneficiary Data Sharing Request File**
- ☐ ACO to ACO-OS **Beneficiary Data Sharing Preferences File**
- ☐ ACO-OS to ACO **Monthly Beneficiary Data Sharing Status File**
- ☐ ACO-OS to ACO **Error File**

Collect Patient Sharing Preferences

Declining to Share Personal Health Information (Y/N and Mechanism of obtaining Preference)

▶ (Y/N)

- Y – Beneficiary notified and has not declined sharing claims data
- N – Beneficiary notified and does not agree to sharing claims data **(Signed form to decline)**

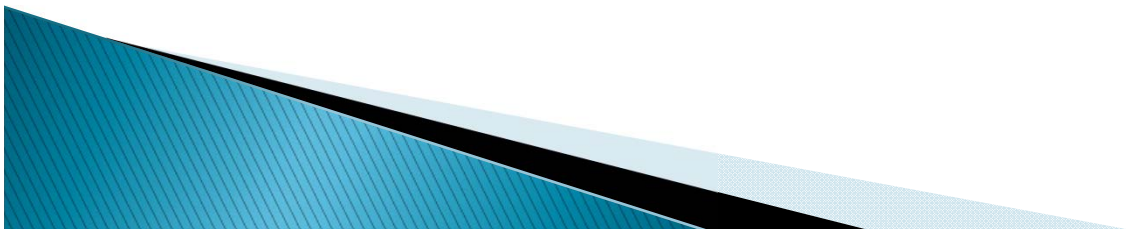
▶ Mechanism

- R = Response to 30 day letter
- N = No response to 30 day letter
- O = Decision via Office Visit



Process to Upload/Download in MFT Portal

- Data Sharing Preferences File 1st upload (text file option)
- Check for Errors in MFT Portal – download the CMS response file (5 minutes or less) (text file option)
- Data Sharing Request File 2nd upload (text file option)
- Check for Errors in MFT Portal – download the CMS response file (5 minutes or less) (text file option)



Appendix A

Response Codes and Explanations

In your download look for Response Code:
Must be 00 to be success.

00	Success
5	System Exception
10	Record level ICD validation failed
11	Record count does not match trailer
12	Header record missing/invalid
13	Trailer record missing/invalid



Data Sharing User Guide

Use the templates provided by CMS and create an XML file to populate with the required patient information and data sharing preferences noted above.



Data Sharing User Guide – Preference File Data

- ▶ Header
- ▶ Month, Year
- ▶ File Creation Date
- ▶ ACO Program
- ▶ HICAN (validate all patient data against attribution list)
- ▶ First Name
- ▶ Middle Name (leave blank if unknown)
- ▶ Last Name
- ▶ DOB
- ▶ Gender
- ▶ ACO ID
- ▶ Encounter Date
- ▶ Data Sharing Preference (Y/N)
- ▶ Substance Abuse Preference (Y/N)
- ▶ Beneficiary Data Sharing Mechanism (R/N/O)
- ▶ Substance Abuse Sharing Mechanism (R/N/O)
- ▶ Trailer
- ▶ Month/Year
- ▶ File Creation Date
- ▶ Record Count (needs to match the number of patients you submitted or rejected)

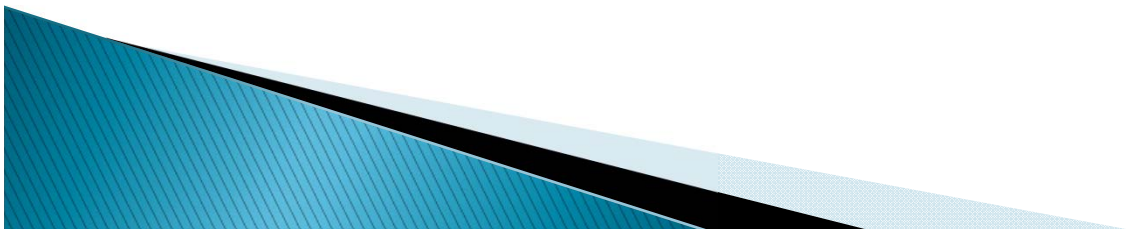


Data Sharing User Guide – Data Sharing Request File Data

- ▶ Header
- ▶ Month, Year
- ▶ File Creation Date
- ▶ ACO Program
- ▶ HICAN (validate all patient data against attribution list)
- ▶ First Name
- ▶ Middle Name (leave blank if unknown)
- ▶ Last Name
- ▶ DOB
- ▶ Gender
- ▶ ACO ID
- ▶ Encounter Date
- ▶ Data Sharing Request (Y/N)
- ▶ Trailer
- ▶ Month/Year
- ▶ File Creation Date
- ▶ Record Count (needs to match the number of patients you submitted or rejected)



Even if ACO mails –
the ACO must still conduct the
office encounters



Open Discussion?

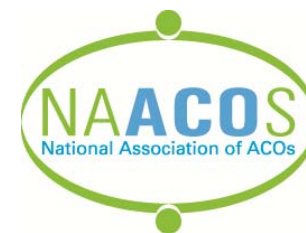
Kristine Gates
gates@healthendeavors.com

1-888-862-0366 (ext. 200)



Questions?.....

- Submit anonymous written questions using the Q/A tab (not chat) on dashboard
- If you did not have a chance to ask a question today or have new questions, please send to info@naacos.com.



Speaker Email



Kris Gates

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Upcoming



- Next webinar in series for new 2014 ACOs on February 4:
“Getting Your Arms around the Attributed Population”
 - Speaker: Kris Gates
- 2014 Spring Conference: April 23-25 in Baltimore
 - Register now!
- Slides and recording of today’s webinar will be posted on our website, www.NAACOS.com/webinar, by tomorrow.
- Check back to our website for future webinar series and conference information



Thank You!.....

Thank you for attending today's webinar!

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