

ACCOUNTABLE CARE ORGANIZATION **SPOTLIGHT** NEWSLETTER

AT A GLANCE

UPCOMING DEADLINES

- **Recertify Updated 2018 ACO Provider/Supplier Lists by February 2, 2018 12:00 p.m. ET**
- **PY 2017 CMS Web Interface Quality Submission Period: January 22, 2018 – March 16, 2018**
- **Track 1+ ACO Learning System Survey due February 20, 2018**
- **Public Reporting due February 28, 2018**

ISSUE HIGHLIGHTS

- **Denominator Eligibility Criteria**
- **Exclusion of CEC Model Beneficiaries in Quality Reporting**

UPCOMING WEBINARS

- **CCLF User Group – CCLF Expansions to Include Medicare Beneficiary Identifier**
February 7 | 1:30 – 3:00 p.m. ET
- **Quality Measurement Kickoff for 2018 Starters**
February 15 | 2:00 – 3:00 p.m. ET

Not for Public Dissemination: The ACO Spotlight newsletter is a weekly publication by CMS for ACOs participating in the Shared Savings Program. It is distributed by email only to ACO contacts listed in CMS' Health Plan Management System. This newsletter contains information intended for the use of the individual(s) to whom it is addressed, and individuals associated with their ACO. The newsletter is not intended for public release. If you have received this in error, please notify the sender immediately by emailing ACO@cms.hhs.gov.

January 26, 2018 | ISSUE 4

PROGRAM HIGHLIGHTS



ACTION REQUIRED: Recertify Your ACO Provider/Supplier List by February 2, 2018

In December 2017, CMS identified that the Performance Year (PY) 2018 ACO Provider/Supplier List provided to ACOs for review and updating did not include all physician assistant (PA) employment arrangements. CMS issued an email to all ACOs in the Shared Savings Program alerting them of this issue on December 7, 2017. CMS has corrected the issue and has uploaded a revised ACO Provider/Supplier List, which includes the missing PA data, to the [Health Plan Management System](#) (HPMS).

Next Steps Due by February 2, 2018, at 12:00 p.m. (noon) Eastern Time:

In [HPMS](#), carefully review the individual National Provider Identifiers (NPIs) for any providers with the specialty code of "97" to confirm that this update accurately identified all PAs associated with your PY 2018 ACO participants. If the revised ACO Provider/Supplier List is missing any PAs or incorrectly attributes PAs to an ACO participant, then the ACO must provide corrections by using the ACO Provider/Supplier List Corrections Template available in [HPMS](#).

Complete instructions on how to upload changes to the ACO Provider/Supplier List in the HPMS Electronic Signature Management (ESM) module are located in Section 5.2 and Section 5.3 of Annual Certification: The HPMS ESM Module User Guide, which is available in HPMS. The path is: HPMS Home Page >> ACO Management >> SSP ACO Electronic Signature Management >> PY 2018 >> ESM User Manuals.

Please remember that the appropriate ESM designee contacts (e.g., the ACO Executive, primary Authorized to Sign, or secondary Authorized to Sign) from your ACO will need to review and re-certify your 2018 ACO Provider/Supplier List in [HPMS](#) by February 2, 2018, at 12:00 p.m. (noon) Eastern Time.



Performance Year 2017 CMS Web Interface Quality Submission Period Opened Monday, January 22

The PY 2017 CMS Web Interface quality submission period opened on January 22, 2018, and will close on March 16, 2018, at 8:00 p.m. Eastern Daylight Time.

During the submission period, continue to refer to the 2017 Quality Reporting Checklist and Resource Map for useful information regarding quality reporting. These documents are located in the Resources section of the [SSP ACO Portal](#) under the Resource titled

2017 Quality Measurement and Reporting Guides. CMS Web Interface instructional videos are also available in the [Quality Payment Portal resource library](#). Refer to the announcement in the Resources Now Available section of Spotlight Issue 3 (January 18, 2018) for additional details.

Please contact the Quality Payment Program Service Center at gpp@cms.hhs.gov or 1-866-288-8292 for support.



PREV-13 (ACO-42) Denominator Eligibility Criteria

Each beneficiary sampled into a given measure must be confirmed as eligible for that measure based on denominator criteria (for example, age and diagnosis). The PREV-13 (ACO-42) Statin Therapy for the Prevention and Treatment of Cardiovascular Disease measure includes three risk categories and three separate sets of denominator eligibility criteria. CMS has received several questions regarding how to confirm denominator eligibility for this measure using the CMS Web Interface Excel template.

Because there are three risk categories for this measure, there are three areas where the abstractor may select the exclusion option within the Excel template. All three of these options are separate questions in the CMS Web Interface and are separate columns within the Excel template (for PREV-13 the columns are CP, CR, and CT).

Abstractors should answer these questions in the order outlined below when entering information for each of the sampled beneficiaries.

1. Beneficiary doesn't have a diagnosis of ASCVD and therefore the abstractor selects "No – Diagnosis".
2. Beneficiary doesn't meet criteria for Risk Category 2 and therefore the abstractor selects "No – Diagnosis".
3. Beneficiary doesn't meet age criteria (40-75 years old) OR beneficiary doesn't have diagnosis of Diabetes and therefore the abstractor selects "No – Diagnosis or not aged 40-75 years".

If you have any further questions about the denominator eligibility criteria, please contact the Quality Payment Program Service Center at gpp@cms.hhs.gov.



Exclusion of CEC Model Beneficiaries in Quality Reporting

As noted in Spotlight Issue 45 (December 22, 2017), following delivery of the 2017 Q3 report packages for Track 1 and 2 ACOs, we identified an issue whereby beneficiaries participating in the Comprehensive ESRD Care (CEC) Model were not excluded from Shared Savings Program preliminary prospective assignment. This issue also affected the patients who were sampled into the CMS Web Interface for reporting.

On January 8, 2018, we delivered a Beneficiary Sample to all ACOs that included a column (titled CEC), which indicated whether the beneficiary should have been excluded from Shared Savings Program assignment due to their participation in the CEC Model. ACOs may request to use an "Other CMS Approved Reason" to exclude these beneficiaries from the measure(s) in which they appear.

To do so, the appropriate ESM designee contacts should send an email to the Quality Payment Program Service Center (gpp@cms.hhs.gov), provide the measure and rank number for each beneficiary who was erroneously included, and note that, per Shared Savings Program guidance, these beneficiaries should be excluded. Please do not send the beneficiaries' Health Insurance Claim Numbers (HICNs) to the Quality Payment Program Service Center.

Attention: Data Use Agreement Expiration and Data Use Agreement Extension Notifications

For renewing and currently participating ACOs with an initial agreement start date prior to January 1, 2018, your ACO may receive an email stating its Data Use Agreement (DUA) will expire in 60 days. We will extend your ACO's DUA for another year. There is no further action for your ACO to take at this time. If you have any questions or concerns about the status of your DUA, please contact the Shared Savings Program mailbox at SharedSavingsProgram@cms.hhs.gov.

Post Your ACO's 2018 Public Reporting Template by February 28, 2018

All ACOs are required to publicly report organizational information and performance results (if available) on a designated webpage by February 28, 2018. To help ACOs meet this requirement, the Shared Savings Program sent each ACO instructions and a pre-populated public reporting template that streamlines the reporting process on January 24, 2018. ACOs that are new to the program received their first template while all other ACOs received an updated one that is based on [HPMS](#) data as of January 8, 2018.

ACOs with a 2018 initial start date did not complete PY 2017 and, therefore, are not required to complete the Shared Savings and Losses section. CMS will pre-populate quality performance results with "NA" as these results are not applicable to new ACOs. All currently participating ACOs that completed the 2017 performance year must populate the highlighted fields in the Shared Savings Distribution section. CMS will pre-populate quality performance results for ACOs that completed PY 2017.

Please review the instructions and contact your CMS Coordinator or program mailbox with any questions. Please be sure to complete your public reporting requirement by February 28, 2018.

Track 1+ ACO Learning System Assessment Survey – Due February 20

The Track 1+ ACO Learning System Assessment Survey is now live. We strongly encourage all Track 1+ ACOs to complete the survey by February 20, 2018. Track 1+ ACOs received the initial email from ACOLearningActivities@mathematica-mpr.com with a link to the survey on January 17, 2018.

The survey should be completed by Track 1+ ACO organizational leadership and should take approximately 30–45 minutes to finish. You do not need to complete the survey all at once; you may save your responses and continue at a later time. We understand that some Track 1+ ACOs will be busy with 2017 quality reporting. However, we would very much appreciate if all Track 1+ ACOs can complete the survey in order to help us to create learning activities that best address your ACO's needs. Completion of the survey will not influence your ACO's compliance, monitoring, or performance.

The goals of this survey are to: (1) provide insight into ACOs' implementation progress and interest in key activities, (2) inform the development of learning activities to address ACOs' current challenges and highlight recent successes, and (3) facilitate continuous improvement in the value of learning systems activities.

If you have questions about the survey, please send an email to ACOLearningActivities@mathematica-mpr.com with "Track 1+ Assessment Survey" in the subject line.

RESOURCES NOW AVAILABLE



Web Interface Support Call Recordings

The Center for Clinical Standards and Quality (CCSQ) will make Web Interface Support Call materials (e.g., recordings, transcripts, and presentation slides) available on the [Quality Payment Program webpage](#) shortly. These materials will be accessible via the event registration link when available.

2018 Shared Savings Program Report Schedule

The 2018 Shared Savings Program Report Schedule will be posted to the Resources section of [SSP ACO Portal](#) by the end of the week. The schedule may be located by searching for the key words "Report Schedule". The 2018 Shared Savings and Losses and Assignment Methodology Specifications (Version 6) and the 2018 Report Templates will also be released soon. Please continue to monitor the Spotlight for additional information.

Webinar Indices

CMS maintains indices on the [SSP ACO Portal](#) listing all Shared Savings Program and Learning Systems webinars to make it easy for ACOs to access resources from previous events. There is also an additional index for materials related to the In-Person Learning Collaboratives. These indices are updated on a bi-weekly basis and can be found under the “Announcements” tab on the [SSP ACO Portal](#). Newly updated versions of these indices will be available by the end of the week.

Webinar Slides & Recordings

Links to the presentation slides and audio recordings for the following webinars are now available on the [SSP ACO Portal](#) Events Calendar, search by date.

- SNF 3-Day Waiver: January 18, 2018

EVENT ANNOUNCEMENTS



2018 Web Interface Weekly Support Calls

CMS will host weekly support calls during the CMS Web Interface submission period. Please refer to the following chart for registration information. A complete list of calls is also available in the [Web Interface Support Webinar flyer](#).

Date	Time	Title	Logistics
1/31/2018	1:00 – 2:00 p.m. ET	Weekly Support Webinar	Register here
2/7/2018	1:00 – 2:00 p.m. ET	Weekly Support Webinar	Register here
2/14/2018	1:00 – 2:00 p.m. ET	Weekly Support Webinar	Register here
2/21/2018	1:00 – 2:00 p.m. ET	Weekly Support Webinar	Register here
2/28/2018	1:00 – 2:00 p.m. ET	Weekly Support Webinar	Register here
3/7/2018	1:00 – 2:00 p.m. ET	Weekly Support Webinar	Register here
3/14/2018	1:00 – 2:00 p.m. ET	Weekly Support Webinar	Register here

CCLF User Group – CCLF Expansions to Include Medicare Beneficiary Identifier

WEDNESDAY, FEBRUARY 7, 2018, 1:30 P.M. – 3:00 P.M. EASTERN TIME

- [Register here](#); 1-857-232-0156; 271840
- **Audience:** All ACOs
- **Description:** The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015, requires CMS to remove Social Security Numbers (SSNs) from all Medicare cards by April 2019. A new Medicare Beneficiary Identifier (MBI) will replace the SSN-based Health Insurance Claim Number (HICN) for Medicare transactions. The New Medicare Card Project will result in expansions to the beneficiary exclusion file and each of the CCLFs. CMS will provide detailed information on the impacts to ACOs and you will have the opportunity to ask questions and receive answers from subject matter experts. All ACOs are strongly encouraged to attend this event in order to prepare for the technical changes taking effect with the April 2018 CCLFs. ACOs should review version 22 of the CCLF Information Packet (IP) and Data Exchange User Guide version 4, available in the Resources section of the [SSP ACO Portal](#), in advance of the webinar.

Quality Measurement Kickoff for 2018 Starters

THURSDAY, FEBRUARY 15, 2018, 2:00 P.M. – 3:00 P.M. EASTERN TIME

- [Join here](#); 1-415-527-5035; 907 497 406
- **Audience:** ACOs starting in Performance Year 2018
- **Description:** CMS will host a webinar to kick off quality measurement and reporting for 2018 starters who are under pay-for-reporting for the 2018 reporting year. We will review 2018 quality reporting requirements and resources.

CONTACT INFORMATION FOR ACOS

To help ACOs navigate questions regarding the Shared Savings Program.

Program and Policy

SharedSavingsProgram@cms.hhs.gov

- For current Shared Savings Program ACOs.
- Be sure to specify your ACO ID (Axxxx) in the Subject line or text of the email.
- Assistance with user access to CMS systems.

ACO@cms.hhs.gov

- For external parties (i.e., non-ACOs).

Health Plan Management System (HPMS)

HPMS@cms.hhs.gov

- Technical inquiries that do not involve password resets.

ACO Information Center

APOSD@cms.hhs.gov

- Technical inquiries related to MFT, CCLFs and the SSP ACO Portal.
- 1-888-734-6433 (select Option 2)

QNet Help Desk

qnetsupport@hcqis.org

- Inquiries related to quality reporting for the 2016 reporting year.
- 1-866-288-8912

CAHPS HelpDesk

ACOCAHPS@hcqis.org

- Inquiries related to technical assistance, comments or questions on the CAHPS survey for ACOs.
- 1-855-472-4746

CMS IT Help Desk

CMS_IT_Service_Desk@cms.hhs.gov

- Inquiries related to password resets for your 4 character CMS User ID.
- 1-800-562-1963

Quality Payment Program Service Center

QPP@cms.hhs.gov

- Inquiries related to MIPS, APMs, MACRA, quality measures and quality reporting for 2017 and future years, CMS Web Interface, and EIDM.
- 1-866-288-8292

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