Next Generation ACO Model (NGACO) Policy and Operating Procedures

This document outlines the NGACO Policy and Operating Procedures for the following processes:

A. Adding individual Next Generation Participants to an existing Tax Identification Number (TIN) during a Performance Year (PY),  
B. Adding wholly-new Preferred Providers and associated benefit enhancement (BE) indicators during a PY,  
C. Terminating BE indicators associated with currently-active Next Generation Participants and Preferred Providers during a PY, and  
D. Adding BE indicators to currently-active Next Generation Participants and Preferred Providers.

This document does not contain complete procedural instructions/details on how to correctly populate and submit Provider List Submission Tools (PLSTs) via Electronic File Transfer (EFT) to effectuate the actions described above. For this information, please refer to the following additional documents:

1. NGACO PLST Information Packet dated 4/13/17, Revision 3.03.02 (See Section 7.0). Document Name: NGACO.PLST.IP.3.03.02.pdf. Available in NGACO Connect Library here
2. EFT Next Generation ACO User Guide- Pull V1.0 20160216.pdf. This document is available here in the NGACO Connect Library.
4. EFT Next Generation ACO EIDM User Guide V1.2 20161208.pdf. Link to document Available here 
5. EFT ACO Managed File Transfer HTTPS User Guide V1.1 20160729.pdf. Available here
6. NGACO.PLST.3.03.02.xlsm. Available here

Adding Individual Next Generation Participants to an Existing TIN during a PY

Policy on Next Generation Participant Additions:

Beginning in April 2017, CMS will allow NGACOs to add Next Generation Participants to their Next Generation Participant List, to be effective on a specific date during the PY, under the following, limited circumstances:

- NGACOs are permitted to submit individual practitioners to be added to their PY Next Generation Participant List as long as the TIN of the proposed, new Next Generation Participant is an existing Next Generation Participant TIN in the NGACO. In other words, the TIN of the newly-added Next Generation Participant must be associated with at least one other active Next Generation Participant on the NGACO’s current PY Next
NGACOs may only submit individual practitioners to be added as Next Generation Participants during the PY if the individual practitioner’s individual National Provider Identifier (iNPI) could not have been included on the NGACO’s initial, originally-submitted Next Generation Participant List for the PY. NGACOs generally submit initial Next Generation Participant Lists in June of the prior PY.

- Example: A physician group practice has 10 iNPIs billing under TIN 123456789 for NGACO ABC. This physician group practice hired three new practitioners in October of 2016. These newly hired physicians were unable to be included on NGACO ABC’s initial Calendar Year (CY) 2017 Next Generation Participant List, as lists were due to CMS in June 2016. NGACO ABC may submit the three practitioners as new Next Generation Participants, effective in PY 2017, to TIN 123456789.

- ACOs may not add iNPIs to an existing TIN during the PY to resolve an error/rectify an omission made during provider list processing.

  - Example: Dr. Jones is a physician who practices in a group practice that has formed NGACO ABC. NGACO ABC failed to include Dr. Jones in the initial list submitted in June 2016 even though Dr. Jones was eligible to be included. NGACO ABC is not permitted to submit this Next Generation Participant for addition to their roster during the PY.

- ACOs may not add iNPIs to an existing TIN during the PY to add someone that had previously been on the list but was removed prior to the start of the PY.

  - Example: NGACO ABC included Dr. Smith on its initial list submitted in June 2016. NGACO ABC removed Dr. Smith from the list prior to the start of the PY (which could have been done in September or December (for 2017 starters)). NGACO ABC is not permitted to subsequently add this provider as a Next Generation Participant during the PY.

- In this context, individual practitioners are identified by a combination of either: (1) an existing TIN and a new iNPI for practitioners in solo or group practices; or (2) an existing TIN, new iNPI, organizational NPI (oNPI) and CMS Certification Number (CCN) for individual practitioners practicing in an FQHC, RHC, or a critical access hospital that elects payment under Method 2 (CAH2). Organizational NPIs are a required data element for individual practitioners at an FQHC/RHC/CAH2; it is an optional data element for individual practitioners at a group practice or solo practice. CMS does not require the CCN or oNPI to be an existing CCN/oNPI on the NGACO’s Next Generation Participant List.

- CMS will not change or re-run prospective claims-based alignment to account for additional iNPIs that are added to an existing TIN during a PY. In other words, the
addition of Next Generation Participants during the PY has no impact on the composition of an NGACO’s prospectively-aligned beneficiary population.

**Timeline for Next Generation Participant Additions:**

- The NGACO Model Program Analysis Contractor (PAC) will retrieve PLSTs containing proposed Next Generation Participants to be newly added to an NGACO during the PY six calendar days prior to the last day of the month for processing in the subsequent month. If approved, individual practitioners submitted by NGACOs in a particular month during the PY will have an effective date of the first day of the subsequent month and a termination date set to 12/31 of the PY. Please refer to Section 7.0 of the PLST IP, Rev. 3.02.02, dated 4/13/2017.
  - For example, an individual practitioner submitted by an NGACO on April 15, 2017, will have an effective date of May 1, 2017, and a termination date of 12/31/2017.
- NGACOs may not submit newly-added Next Generation Participants after the sixth day prior to the last day of July (July 25 in CY 2017). Therefore, the latest effective date a Next Generation Participant added to an NGACO during a PY may have is August 1. This cut-off date allows sufficient processing time to ensure newly-added Next Generation Participants will be captured in the final Quality Payment Program (QPP) snapshot. Newly-added Next Generation Participants will be eligible to qualify as a Qualifying APM Participant (QP). See: [https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/Quality-Payment-Program-Long-Version-Executive-Deck.pdf](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/Quality-Payment-Program-Long-Version-Executive-Deck.pdf)

**Implications of Next Generation Participant Additions on Benefit Enhancements:**

- Newly-added Next Generation Participants will be included in determining whether a beneficiary is eligible to receive targeted voluntary alignment (VA) outreach from an NGACO participating in VA activities for alignment of beneficiaries to their ACO for the subsequent PY.
- Annual Wellness Visits (AWVs) furnished by newly-added Next Generation Participants to aligned beneficiaries would qualify for the Coordinated Care Reward (CCR) for dates of services that are after (later than) the newly-added Next Generation Participant’s effective date.
- NGACOs may elect newly-added Next Generation Participants to participate in the Telehealth Expansion BE and the Post-Discharge Home Visits BE by submitting the relevant BE election indicators.
- Per Appendix H (Section II.B) and Appendix N (Section II.C) of the NGACO Model Participation Agreement (PA), newly-added Next Generation Participants may not participate in the model’s alternate payment mechanisms Population-Based Payments (PBP) or All-Inclusive Population-Based Payments (AIPBP).
• ACOs may not add payment indicators (in the form of a PBP FFS percent reduction indicator and/or an AIPBP “Y” indicator) on new iNPIs that are added to an existing TIN that is participating in PBP or AIPBP during a PY. Next Generation Participants may only participate in PBP or AIPBP with the ACO when they are included as participating in PBP or AIPBP on the Next Generation Participant List to begin the PY.

Implications for Next Generation Participant Additions on Monitoring/Compliance:

• NGACOs must certify that they have fulfilled the requirements outlined in Section III.2.D.1.(a) of the NGACO PA. In addition, NGACOs must certify that (A) proposed Next Generation Participants to be newly-added to their NGACO during the PY could not have been included on the NGACO’s initial Next Generation Participant List for the PY submitted to CMS in June of the prior PY, and (B) proposed Next Generation Participants to be newly-added to their NGACO during the PY bill for services through an existing Next Generation Participant TIN.

• NGACOs will certify compliance with these requirements by submitting a signed certification form to CMS upon submission of each PLST containing Next Generation Participants to be added to their Participant List during the PY. The certification form is available in the NGACO Connect Library here.
  - Certification form submission instructions: Send the signed and completed certification form via e-mail to NextGenerationACOModel@cms.hhs.gov on the same day a PLST containing Next Generation Participants to be added to your Participant List is submitted via EFT. There is no need to encrypt the attachment as the form does not contain any PII/PHI. Use the following subject line: “V### Participant Addition Certification Form”

• Deloitte Consulting, LLP (Deloitte), the NGACO monitoring contractor, will audit for compliance with the requirements outlined above and detailed in the certification form.

• CMS will submit newly-added Next Generation Participants to the CMS Center for Program Integrity (CPI) for screening on a quarterly basis (in August for PY 2017). CMS may remove newly-added Next Generation Participants from the NGACO’s PY Next Generation Participant List based on results of this screening in accordance with Section XIX.A.3 of the NGACO PA.

• Per Section III.D.7 (c) of the NGACO PA, NGACOs must have a written agreement in place by the date the ACO requests the addition of the individual or entity to the Participant List. Per Section III.D.6 (h) of the NGACO PA, the agreement must be for a term of at least one year, but permit early termination if CMS requires the ACO to remove the Next Generation Participant or Preferred Provider pursuant to Section XIX.A.1.
Adding Wholly-new Preferred Providers and Associated BE Indicators during a PY & Amending Existing BE indicators on behalf of currently-active Next Generation Participants & Preferred Providers during a PY

**Policy on Preferred Provider & Associated Benefit Enhancement Indicator Additions:**

- NGACOs may add new Preferred Providers and associated BE indicators, including individual practitioners and institutions/facilities such as SNFs, HHAs, FQHCs, etc. to their NGACO’s PY Preferred Provider List.
- NGACOs may elect newly-added Preferred Providers to participate in the SNF 3-day waiver BE, Telehealth Expansion BE and the Post-Discharge Home Visits BE by submitting the relevant BE election indicators.
- A newly-added Preferred Provider SNF must have an overall quality rating of three or more stars under the CMS 5-Star Quality Rating System, as reported on the Nursing Home Compare website, at the time of CMS approval of the Eligible SNF to participate in the SNF 3-day waiver.
- Annual Wellness Visits (AWVs) furnished by newly-added Preferred Providers to aligned beneficiaries would qualify for the Coordinated Care Reward (CCR) for dates of services after (later than) the newly-added Preferred Provider’s effective date.
- Per Appendix H (Section II.B) of the NGACO Model Participation Agreement PA, newly-added Preferred Providers may not participate in the model’s alternate payment mechanisms of PBP or AIPBP.
- ACOs may not add payment indicators (in the form of a PBP FFS percent reduction indicator and/or an AIPBP “Y” indicator) on new Preferred Providers that are added during a PY. Preferred Providers may only participate in PBP or AIPBP with the ACO when they are included as participating in PBP or AIPBP on the Preferred Provider List to begin the PY.

**Implications of Preferred Provider Additions on Monitoring:**

- NGACOs must certify that they have fulfilled the requirements outlined in Section III.2.D.1.(b) of the NGACO PA. NGACOs will certify compliance with these requirements by submitting a signed certification form to CMS upon submission of each PLST containing Preferred Providers to be added to their Preferred Provider List during the PY. The certification form is available [here](#).
  - Certification form submission instructions: Send the signed and completed certification form via e-mail to NextGenerationACOModel@cms.hhs.gov on the same day a PLST containing Preferred Providers to be added to your PY Preferred Provider List is submitted via EFT. There is no need to encrypt the attachment as the form does not contain any PII. Use the following subject line: “V### Preferred Provider Addition Certification Form”
- CMS will submit newly-added Preferred Providers to CPI for screening on a quarterly basis (in August for PY 2017). CMS may remove newly-added Preferred Providers from
the NGACO’s PY Preferred Provider List based on the results of this screening in accordance with Section IV.E.4 of the NGACO PA.

**Timeline for Preferred Provider (and Associated Benefit Enhancement Indicator) Additions:**

- The NGACO Model PAC will retrieve PLSTs containing proposed Preferred Providers and associated BE indicators to be newly added to an NGACO during the PY six calendar days prior to the last day of the month for processing in the subsequent month. If approved, Preferred Providers submitted by NGACOs in a particular month during the PY will have an effective date of the first day of the subsequent month and a termination date set to 12/31 of the PY. Please refer to Section 7.0 of the PLST IP, Rev. 3.02.02, dated 4/13/2017.

- NGACOs may add new Preferred Providers up to the sixth day prior to the last day of September (September 24 in CY 2017). Therefore, the latest effective date a Preferred Provider added to an NGACO during a PY may have is October 1.

**Policy & Timeline for Revising Benefit Enhancement Indicators for Currently-Active Preferred Providers and Next Generation Participants:**

- NGACOs may terminate BE indicators associated with existing, currently-active Next Generation Participants and Preferred Providers during the PY. NGACOs may also add BE indicators to existing Preferred Providers and Next Generation Participants during the PY.

  - If approved, BE indicator terminations and additions submitted by NGACOs in a particular month during the PY will have an effective date of the first day of the subsequent month. NGACOs may submit BE terminations/additions up to the sixth day prior to the last day of September (September 24 in CY 2017). The latest effective date a BE termination or addition will have is 10/1.

- ACOs may not terminate/remove a PBP/AIPBP indicator associated with currently-active Preferred Providers or Next Generation Participants during the PY.