CMS Alternative Payment Model Overlap

Alternative Payment Model (APM) overlap is complex and is a concern for many ACOs that have patients and providers participating in multiple models. The Centers for Medicare & Medicaid Services (CMS) has not developed a consistent overlap policy that applies across APMs. There are a number of challenges associated with overlap, such as duplication of resources, patient and provider confusion and challenges financially reconciling patients who are assigned to an ACO and trigger a bundled payment episode. The easiest and most effective solution, advocated for by NAACOS, is to adopt a standard policy to exclude ACO patients from other initiatives while allowing ACO providers to participate in multiple models. While CMS has taken this approach with the Next Generation ACO Model, they have generally chosen alternate approaches for the Medicare Shared Savings Program.

ACOs are responsible for all of patients' spending for a given year. They are in the driver's seat in coordinating their patients' care and should therefore be financially responsible for the cost and quality of care provided to their patients. NAACOS opposes overlap policies that disadvantage value-based entities focused on total-cost-of-care, penalizing ACOs who have proven to slow Medicare spending by tens of billions of dollars over the last several years, more than any other federal value-based model. The chart below, reviews CMS's current overlap policies. Please note that this information is current at the time of publication (November 2019).

	Medicare Shared Savings Program (MSSP)		Nest Generation ACO Model (NextGen)	
	Providers	Beneficiaries	Providers	Beneficiaries
BPCI-A Bundled Payments for Care Initiative- Advanced	Providers may participate in both MSSP and BPCI-A .	(for Model Year 3, beginning 1/1/2020) MSSP beneficiaries can particpate in BPCI-A regardless of MSSP track (beneficiaries can trigger an episode.	Providers may participate in both NextGen and BPCI-A .	NextGen beneficiaries cannot participage in BPCI-A (beneficiaries cannot trigger and episode).
CJR Comprehensive Joint Replacement	MSSP participants may be either CJR collaborators of collaborator agents.	MSSP track 3 beneficiaries are excluded from CJR (beneficiaries cannot trigger an episode); All other MSSP beneficiaries are included in CJR (beneficiaries can trigger and episode).	NextGen participants may be either CJR collaborators or collaborator agents.	NextGen beneficiaries cannot participate in CJR (beneficiaries cannot trigger and episode).
OCM Oncology Care Model	Providers may participate in both MSSP and OCM .	OCM Beneficiaries are not excluded from participation in MSSP .	Providers may participate in both NextGen and OCM .	OCM beneficiaries are not excluded from participation in NextGen.
CEC Comprehensive ESRD Care Model	Providers (full TIN) cannot participate in both CEC and MSSP .	CEC beneficiaries are excluded from participa- tion in MSSP .	NextGen Professionals cannot participate in both CEC and NextGen. NextGen Participants who are not primary care specialists and NextGen Preferred Providers may participate in both CEC and NextGen.	CEC beneficiaries are excluded from participation in NextGen .
CPC+ Comprehensive Primary Care +	Providers can participate in both CPC+ and MSSP .	MSSP beneficiaries may participate in CPC+ regardless of MSSP track.	Providers cannot participate in both NextGen and CPC+ .	NextGen beneficiaries may not participate in CPC+. (NextGen has alignment preference over CPC+).
PCF Primary Care First	Providers can participate in both PCF and MSSP (any track).	MSSP beneficiaries may participate in PCF regardless of MSSP track.	Providers cannot participate in both NextGen and PCF .	NextGen beneficiaries may not participate in PCF. (NextGen has alignment preference over PCF).