

ACCOUNTABLE CARE ORGANIZATION SPOTLIGHT NEWSLETTER

February 10, 2021 | ISSUE 3

AT A GLANCE

UPCOMING DEADLINES

- **CMS Web Interface Quality Reporting: March 31, 2021**

ISSUE HIGHLIGHTS

- **Maintaining ACO Governing Body Compliance**
- **Helpdesk Tickets Submission Feature Available in ACO-MS**
- **Updated Shared Savings and Losses and Assignment Methodology Specifications**
- **Medicare Enrollment and SNF Star Rating Data Updated in ACO-MS**

EVENT ANNOUNCEMENTS

- **CMS Web Interface Biweekly Support Call**
February 24th | 1:00–2:30 p.m. ET
- **CMS Web Interface Biweekly Support Call**
March 10th | 1:00–2:30 p.m. ET

Not for Public Dissemination: The ACO Spotlight Newsletter is a biweekly publication by CMS for ACOs participating in the Shared Savings Program. It is distributed by email only to ACO contacts listed in CMS' ACO-MS. This newsletter is not intended to establish CMS policy and is for informational purposes only for the sole use of the individual(s) to whom it is addressed, and individuals associated with their ACO. The newsletter is not intended for public release. The ACO Spotlight Newsletter is published, produced, and disseminated at U.S. taxpayer expense. If you have received this in error, please notify the sender immediately by emailing SharedSavingsProgram@cms.hhs.gov.

PROGRAM HIGHLIGHTS

Maintaining ACO Governing Body Compliance

ACOs must maintain an identifiable governing body in accordance with [42 CFR § 425.106](#). CMS periodically conducts reviews of ACOs' governing bodies to ensure compliance with the shared governance requirements. Additionally, if your ACO is submitting an application for a January 1, 2022 agreement period start date, CMS will review your governing body as a part of your application. CMS encourages ACOs to review their governing body regularly to ensure that the governing body is compliant with Shared Savings Program regulations, especially if you add or remove ACO participants each year.

To help your ACO maintain compliance with shared governance requirements, review the following governing body requirements:

- Ensure that your ACO lists all current ACO governing body board members' names, positions, voting power, membership types, and, when relevant, associated ACO participant legal business names (LBNs) on the public reporting webpage it is required to maintain, per [42 CFR § 425.308](#).
- Verify at least 75 percent of the voting power for all voting members is held by ACO participants from the ACO Participant List for the current performance year per § 425.106(c)(3). CMS does not require an ACO's governing body to include a representative from each ACO participant listed on its ACO Participant List for the current performance year.
- Confirm that your ACO includes a Medicare fee-for-service (FFS) beneficiary on its governing body per § 425.106(c)(2).
- If an ACO chooses to differ from these requirements, the ACO must provide CMS with an explanation of how the ACO plans to involve ACO participants in innovative ways or to achieve meaningful representation for Medicare beneficiaries in ACO governance per § 425.106(c)(5).

For additional information on how to display your ACO's governing body on your public reporting webpage, ACOs may also refer to the *PY 2021 Public Reporting Template and Instructions*, available in the Program Resources section of the Knowledge Library tab in the [ACO Management System \(ACO-MS\)](#).

Failure to meet the shared governance requirements (§ 425.106) may result in compliance actions.

Reminder: Helpdesk Tickets Submission Feature Available in ACO-MS

As a reminder, ACOs can submit and view helpdesk tickets related to the Shared Savings Program in [ACO-MS](#). This functionality is available to anyone within your ACO that has an ACO-MS account. Please note, the Shared Savings Program mailbox at SharedSavingsProgram@cms.hhs.gov remains active; however, the ACO-MS Helpdesk feature is the preferred method to send inquiries to CMS.

For detailed instructions on how to submit and view helpdesk inquiries in ACO-MS, refer to the *Submitting Helpdesk Tickets in ACO-MS* tip sheet, available in the Program Resources section of the Knowledge Library tab in ACO-MS.

Quality Payment Program (QPP) Service Center: ACOs should continue to send questions related to Merit-based Incentive Payment System (MIPS), Alternative Payment Models (APMs), Medicare Access and Children's Health Insurance Program (CHIP) Reauthorization Act of 2015 (MACRA), Consumer Assessment of Healthcare Providers and Systems (CAHPS®) for MIPS survey, quality measures, quality reporting, and CMS Web Interface to the QPP Service Center at QPP@cms.hhs.gov.

Updated Shared Savings and Losses and Assignment Methodology Specifications, Version 9

CMS plans to issue Version 9 (V9) of the *Shared Savings and Losses and Assignment Methodology Specifications* on the Shared Savings Program's [Program Guidance & Specification webpage](#). This resource provides detailed information on the Shared Savings Program's beneficiary assignment methodology and financial methodology relevant to ACOs participating in a performance year beginning on January 1, 2021, and subsequent performance years, including how to incorporate changes to Shared Saving Program policies outlined in the [CY 2021 Physician Fee Schedule Final Rule \(85 FR 84472\)](#).

Medicare Enrollment and SNF Star Rating Data Updated in ACO-MS

CMS recently updated the ACO participant and Skilled Nursing Facility (SNF) affiliate Medicare enrollment information and the SNF affiliate star ratings under the CMS 5-Star Quality Rating System in [ACO-MS](#). Refer to the *ACO Spotlight Newsletter* article, "Enhanced Medicare Enrollment and SNF Star Rating Functionality in ACO-MS," in Issue 22 on October 28, 2020, for further instructions and information on how to access and review Medicare enrollment and SNF star rating information in ACO-MS.

RESOURCES NOW AVAILABLE

PY 2020 Quarter 4 Report Package: Available February 10, 2021

Today, February 10, 2021, CMS released the Performance Year (PY) 2020 Quarter 4 (Q4) reports packages to ACOs via the Data Hub tab in [ACO-MS](#). The report package was sent as a zip file and includes the following: the cover notice, *Assignment List Report* (ALR) (zip file), *Assignment Summary Report* (ASR), *Aggregate Expenditure/Utilization Report* (EXPU), *Beneficiary Expenditure Utilization Report* (BEUR), *Non-Claims Based Payment File*, and *2020 Q3 Claims-Based Quality Measures Report*.

Beginning with the PY 2020 Q4 reports packages, CMS is including a new, static CSV report named the *Beneficiary Expenditure Utilization Report* (BEUR) that provides beneficiary-level expenditure and utilization data on your ACO's assigned population. The BEUR replaces the EXPU Drill Down Report (an enhanced report that was previously generated in the SSP ACO Portal) and will be included in quarterly and annual report packages that contain EXPU reports. Please refer to the cover notice included in the PY 2020 Q4 report package for more information about the BEUR.

Resources

For additional information about the Q4 report package, please reference the cover notice and the PY 2020 report user guides: *Assignment List Report*, *Assignment Summary Report User's Guide* (V12), and *Annual and Quarterly Aggregate Expenditure/Utilization Report User's Guide* (V10). Information about the BEUR will be included in Version 11 of the *Annual and Quarterly Aggregate Expenditure/Utilization Report User's Guide*, which is forthcoming. These user guides provide detailed information about the data elements included in the referenced program reports. These reports can be found in the Program Resources section of the Knowledge Library tab in ACO-MS by searching "Performance Year 2020 Report User's Guides."

CMS encourages ACOs to review the video walkthroughs for both the *PY 2020 Quarterly Assignment Report* and *Expenditure and Utilization Report*. These videos can be found in the Program Resources section of the Knowledge Library tab in ACO-MS by searching “2020 Quarterly Assignment and Expenditure/Utilization Report Walkthrough Videos.” Note that these videos reflect updates made as of Q1 2020 and do not reflect content added to incorporate the coronavirus disease 2019 (COVID-19) data or the BEUR.

February CCLFs and Claims Run-Out Files

February Claim and Claim Line Feed (CCLF) files will be available to ACOs on February 12th for the PY 2021 assignable or prospectively assigned beneficiaries in the Data Hub tab in [ACO-MS](#).

CMS will also provide claims run-out CCLFs during the months of February, March, and April to the ACOs continuing their participation in the Shared Savings Program from the prior year. Continuing ACOs will receive claims with service dates through the end of December 2020 as an additional set of CCLFs. The run-out CCLFs will include claims for the beneficiary population from the ACOs’ performance year that ended on December 31, 2020.

The February delivery timeline for the CCLF, Exclusion, and Medicare Beneficiary Identifier (MBI) Cross-reference (XREF) files is as follows:

| FILE | DELIVERY | NAMING CONVENTION | DATA HUB PY |
|---|---------------------------|--|-------------|
| PY 21 CCLFs | February 12 th | P.A****.ACO.ZCY21.Dyymmdd.Thhmsst | 2021 |
| PY 21 Exclusion and MBI XREF Files | February 12 th | P.A****.ACO.MBIY21.Dyymmdd.Thhmsst P.A****.BNEX.Y21.Dyymmdd.Thhmsst | 2021 |
| PY 20 Run-Out CCLFs | February 24 th | P.A****.ACO.ZCR20.Dyymmdd.Thhmsst | 2020 |
| PY 20 Run-Out Exclusion and MBI XREF Files | February 22 nd | P.A****.ACO.MBIR20.Dyymmdd.Thhmsst P.A****.BNEX.R20.Dyymmdd.Thhmsst | 2020 |

ACOs should refer to the *CCLF Information Packet (IP)*, *V31* and *ACO and ACO-OS Data Exchange User Guide (DEUG) V11* for additional information on the CCLF and Exclusion files.

The CCLF IP and the DEUG are available under the Program Resources section of the Knowledge Library tab in ACO-MS.

For technical assistance, please log into ACO-MS and click the Helpdesk icon (located within the ACO-MS banner) or contact the ACO Information Center at SharedSavingsProgram@cms.hhs.gov or 1-888-734-6433 (Option 1).

New Quality Payment Program Resource: Now Available

The following resource for Alternative Payment Models (APMs) is now available through the [QPP Resource Library](#): [2021 APM Performance Pathway Quick Start Guide](#). This guide aims to help MIPS APMs participants know the steps to take during the 2021 performance year in preparation for the 2022 submission period.

COVID-19 Vaccine Resources: What ACOs Need to Know Now

CMS has compiled a list of available resources and materials to help you share important and relevant information on the COVID-19 vaccines with the people that you serve. You can find these and more resources on the [COVID-19 Partner Resources page](#) and the Health and Human Services (HHS) [COVID-19 and Flu Public Education Campaign](#). For health care providers, you can find resources on the Centers for Disease Control and Prevention (CDC) [Resources for Health Care Providers page](#).

As a reminder, ACOs receive monthly CCLF files that include Part A, B, and D data for beneficiaries who have not declined to share their data. The CCLFs may be useful to review beneficiary-level COVID-19 vaccine information.

CMS released a set of provider toolkits, available on the [CMS.gov COVID-19 webpage](#), to ensure health care providers have the necessary tools to respond to the COVID-19 public health emergency (PHE). The toolkits included information on the following:

- [Enrollment for Administering COVID-19 Vaccine Shots](#)
- [Medicare Billing for COVID-19 Vaccine Shot Administration](#) (including roster and centralized billing)
- [Coding for COVID-19 Vaccine Shots](#)
- [Medicare COVID-19 Vaccine Shot Payment](#)
- [Monoclonal Antibody COVID-19 Infusion](#)
- [New COVID-19 Treatments Add-On Payment](#)

You can also review the set of [COVID-19 Frequently Asked Questions \(FAQs\) on Medicare Fee-for-Service \(FFS\) Billing](#), which has information specific to health care providers who bill Medicare for administering COVID-19 vaccines.

Please email questions to Partnership@cms.hhs.gov.

Issue Brief on ACO Approaches to Transitional Care Management and Chronic Care Management

This issue brief provides examples of ACOs' approaches to implementation of transitional care management (TCM) and chronic care management (CCM) activities, including approaches related to defining staffing structures, engaging providers, identifying beneficiaries, and measuring progress. To help ACO leaders and frontline staff launch and refine their TCM and CCM initiatives, this issue brief points to additional CMS resources and describes ACOs' lessons learned and best practices. CMS extends their appreciation to the ACOs who shared their strategies through previous learning system activities.

Access the issue brief in the Webinars section of the Knowledge Library tab in [ACO-MS](#) by searching "Issue Brief on ACO Approaches to Transitional Care Management and Chronic Care Management." To access additional information on ACOs' approaches with TCM and CCM, recordings and summaries from July 2018 and December 2019 webinars can be viewed in the same section by searching for "Chronic Care Management and Transitional Care Management."

Reminder: Case Studies Available on CMS' Innovation Webpage

CMS published a series of case studies last month, which ACOs can view on the [CMS Innovation ACO General Information webpage](#) at the following links:

- [Nebraska Health Network's Data Management System for Improving Quality and Reducing Costs](#)
- [Atlantic Dialysis Management Services' Patient Navigator Program](#)
- [Fresenius Kidney Care's Home Dialysis Program](#)
- [UCSF Health Care At Home Program](#)
- [OneCare Vermont ACO: Community Care Coordination Program](#)

CMS extends its appreciation to the ACOs who shared their strategies through previous learning system activities. The case studies are also available in the Webinars section of the Knowledge Library tab in [ACO-MS](#).

EVENT ANNOUNCEMENTS

CMS Web Interface Biweekly Support Call

WEDNESDAY, FEBRUARY 24, 2021, 1:00 P.M.–2:30 P.M. EASTERN TIME

- [Register here](#)
- **Audience:** All ACOs and group reporters
- **Description:** CMS is hosting a series of support calls for ACOs and groups that are reporting data for the Quality Performance Category through the CMS Web Interface for PY 2020. The support calls will highlight important information and updates on reporting quality data and provide ACOs and groups with an opportunity to engage in question and answer sessions with CMS subject matter experts.

For more information on the CMS Web Interface Biweekly Support Calls, view the [2020 Performance Period: CMS Web Interface Support Calls for ACOs and Groups Reporting Quality Data to CMS](#) informational flyer.

CMS Web Interface Biweekly Support Call

WEDNESDAY, MARCH 10, 2021, 1:00 P.M.–2:30 P.M. EASTERN TIME

- [Register here](#)
- **Audience:** All ACOs and group reporters
- **Description:** CMS is hosting a series of support calls for ACOs and groups that are reporting data for the Quality Performance Category through the CMS Web Interface for PY 2020. The support calls will highlight important information and updates on reporting quality data and provide ACOs and groups with an opportunity to engage in question and answer sessions with CMS subject matter experts. For more information on the CMS Web Interface Biweekly Support Calls, view the [2020 Performance Period: CMS Web Interface Support Calls for ACOs and Groups Reporting Quality Data to CMS](#) informational flyer.

CONTACT INFORMATION FOR ACOs

To help ACOs navigate questions regarding the Shared Savings Program.

ACO Information Center

Click the [ACO-MS](#) Helpdesk icon (located within the ACO-MS banner)

- Program operations and policy inquiries; technical inquiries related to program data and program reports; ACO-MS; and assistance with user access to CMS systems, including password resets
- 1-888-734-6433 (select Option 1) or 1-888-734-6563 (TTY/TDD)

Quality Payment Program Service Center

QPP@cms.hhs.gov

- Inquiries related to MIPS, APMs, MACRA, CAHPS® for ACOs survey, quality measures, quality reporting for 2017 and future years, and CMS Web Interface
- 1-866-288-8292

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