



ACCOUNTABLE CARE ORGANIZATION SPOTLIGHT NEWSLETTER

February 5, 2020 | ISSUE 3

AT A GLANCE

UPCOMING DEADLINES

- **Public Reporting Deadline:**
February 14th
- **CMS Web Interface Quality Reporting Deadline:** March 31st,
8:00 p.m. ET

ISSUE HIGHLIGHTS

- **PY 2019 Q4 Report Packages:**
Available February 13th
- **Benchmark Calculators Available to Evaluate Financial Performance**
- **DUA Extensions Processed**

UPCOMING WEBINARS

- **CMS Web Interface Support Calls**
February 12th | 1:00–2:00 p.m. ET
February 19th | 1:00–2:00 p.m. ET
February 26th | 1:00–2:00 p.m. ET
- **CCLF Overview for 2020 Starters**
February 12th | 2:00–4:00 p.m. ET

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PROGRAM HIGHLIGHTS

PY 2019 Quarter 4 Report Packages: Available February 13th

CMS plans to provide Performance Year (PY) 2019 Quarter 4 (Q4) Report Packages on February 13, 2020. The report package will be sent as a zip file and includes: Cover Notice, *Assignment List Report (ALR)* zip file, *Assignment Summary Report (ASR)*, *Aggregate Expenditure/Utilization (EXPU) Report*, Non-Claims Based Payment Data File, and *PY 2019 Q3 Claims-Based Quality Measures Report*.

The zip file containing the program reports delivered to your ACO is accessible through your ACO's Managed File Transfer (MFT) mailbox and through the [SSP ACO Portal](#). The zip file is named per the following convention: "P.Axxxx.ACO.QEXPU." If accessing the file through your MFT mailbox, save the file and append ".zip" to the end of the file name to open the zip file and its contents. The zip file will be available in the MFT mailbox for 100 days from the delivery date and through the SSP ACO Portal indefinitely.

For additional information about the PY 2019 Q4 Report Package, refer to the accompanying Cover Notice in the zip file. Please reference the PY 2019 Report User Guides: *Assignment List Report*, *Assignment Summary Report User's Guide (Version 10)*, and *Annual and Quarterly Aggregate Expenditure/Utilization Report User's Guide (Version 8)* located in the Resources section of the [ACO Management System \(ACO-MS\)](#) Knowledge Library.

ACOs that participated in both the 6-month performance year from January 1, 2019, to June 30, 2019, and the 6-month performance year from July 1, 2019, to December 31, 2019, will receive two sets of Q4 report packages. For further information, please refer to the *ACO Spotlight Newsletter* Issue 26, released on July 2, 2019, for details on 2019 reports. In addition, note that in reports, CMS refers to the July–December 2019 performance year as "2019-A" to distinguish this performance year from the January–June and January–December performance years, which are both referred to as "2019" in reports.

The following changes to the PY 2019 Q4 Report Packages are listed below. Please note that PY 2019 Q4 ALRs use the same table format as PY 2019 Q3 ALRs, rather than the format used for PY 2020 reports.

- Beginning on January 1, 2020, CMS will only provide the Medicare Beneficiary Identifier (MBI) and will no longer provide the Health Insurance Claim Number (HICN) in any ALR CSV files or Drill Down Enhanced Reports issued in Calendar Year (CY) 2020 or in subsequent years. This includes ALRs for the performance year starting January 1, 2019, and the performance year starting July 1, 2019, that will be issued during CY 2020, such as PY 2019 Q4 and PY 2019 Financial Reconciliation Report Packages. The HICN field will remain in all tables so that the table layout will not change, but the HICN field will not contain data.
- PY 2019-A ACOs will now receive the *PY 2019 Q3 Quarterly Quality Report (QQR)* in their PY 2019 Q4 Report Package. If your ACO participated in both PY 2019 and PY 2019-A, then you will receive the same QQR in both your PY 2019 and PY 2019-A Report Packages. Your ACO's QQR will be based on your PY 2019-A participant list and assignment methodology.
 - For ACOs that participated only in PY 2019 (January–June or January–December 2019), your Q3 QQR will be based on PY 2019 Q3 assignment results.
 - For ACOs that participated only in PY 2019-A (July–December 2019), your Q3 QQR will be based on 2019-A Q3 assignment results.
 - For ACOs that participated in both PY 2019 and PY 2019-A, your Q3 QQR will be based on 2019-A Q3 assignment results.

Values in the PY 2019 Q4 reports may differ from those in PY 2019 Financial Reconciliation reports, although both will use CY 2019 as the report period. For example, different claims run-out periods are used for the quarterly reports (quarterly reports use up to 7 days, and 2019 Q4 reports use 3 days) and annual financial reconciliation (3 months), for both assignment (for ACOs receiving preliminary prospective assignment with retrospective reconciliation) and expenditure calculations. Additionally, expenditure calculations for annual financial reconciliation use updated truncation thresholds and non-claims-based payment information that are different from those used for calculating quarterly report expenditures.

Reminder: Benchmark Estimation Calculators Are Available to Evaluate Financial Performance

As a reminder, the updated benchmark estimation calculators are available in the [ACO-MS](#) Knowledge Library. There are three calculators available:

- National Update Factor Calculator (for ACOs in a first agreement period beginning in 2017 or 2018)
- Regional Update Factor Calculator (for ACOs in a second agreement period beginning in 2017, 2018, or January 1, 2019)
- Regional/National Blend Update Factor Calculator (for ACOs that started an agreement period July 1, 2019, and subsequent years)

Please use the calculator applicable for your ACO's agreement period start date.

To access the calculators in the ACO-MS Knowledge Library, search “benchmark estimation” to find the updated calculator, user information, and training information.

The limitations of the updated benchmark estimation calculators are that the calculators use: no CMS Hierarchical Condition Categories (HCC) and/or demographic risk adjustment used in financial reconciliation; partial year and/or incomplete claims run-out data; national and regional weights for Benchmark Year 3 instead of the performance year (for ACOs receiving a blended national/regional update); and have no quality performance consideration. Final financial reconciliation results may differ from those projected by these tools.

Data Use Agreement Extensions Processed

For currently participating ACOs that started before January 1, 2020, CMS has extended the Data Use Agreements (DUA) for another year, with an expiration date of January 31, 2021. For ACOs with a January 1, 2020 start date, the DUA expiration date remains January 31, 2021. 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.

RESOURCES NOW AVAILABLE

Learning System: Case Study on Atlantic's Patient Navigator Program Released

This case study describes how Atlantic Dialysis Management Services (Atlantic) developed and operates a patient navigator program to provide nonclinical support for patients with End-stage Renal Disease (ESRD). Through this program, Atlantic aims to strengthen patient adherence to dialysis treatment, enhance the patient's care experience, and reduce costs associated with preventable care. Navigators support patients to address the psychosocial challenges associated with dialysis care, assist with care coordination, and refer patients to relevant community resources. Atlantic's experience can help inform other organizations that are interested in launching a navigator program for patients with ESRD.

Many thanks to Atlantic for sharing the details of their patient navigator program in this Learning System ACO (LSACO) case study. The case study will be available on the [ACO-MS](#) Knowledge Library.

Reminder: CMS Releases Beneficiary Engagement Toolkit

CMS released the [ACO Beneficiary Engagement Toolkit](#) highlighting strategies used by ACOs and ESRD Seamless Care Organizations (ESCOs) to engage beneficiaries. Specifically, the toolkit explores how ACOs and ESCOs:

- Engage beneficiaries in ACO governance,
- Elicit beneficiary and family feedback,
- Support beneficiaries in self-care management,
- Enhance beneficiary communication in the clinical setting, and
- Communicate with beneficiaries about the ACO as a value-based care organization.

The beneficiary engagement toolkit is part of a broader series of toolkits designed to educate the public about the strategies ACOs use to provide value-based care while also providing actionable ideas to current and prospective ACOs to help them improve or begin operations. CMS released the first toolkit on care coordination in April 2019.

For more information on the toolkits and case studies, including the previously-released [care coordination toolkit](#), please visit the [ACO General Information webpage](#).

EVENT ANNOUNCEMENTS

CMS Web Interface Weekly Support Call

WEDNESDAY, FEBRUARY 12, 2020, 1:00 P.M.–2:00 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 2019. The support calls will highlight important information and updates on reporting quality data and provide ACOs and groups with an opportunity to engage in Q&A sessions with CMS SMEs. For more information on the CMS Web Interface Weekly Support Calls, view the [CMS Web Interface Support Calls for ACOs and Groups Reporting Quality Data to CMS flyer](#).
 - The topic for this call will be Frequently Asked Measure Questions covering: CARE-2, HTN-2, PREV-7, and PREV-1.

CCLF User Group Webinar: CCLF Overview for 2020 Starters

WEDNESDAY, FEBRUARY 12, 2020, 2:00 P.M.–4:00 P.M. EASTERN TIME

- [Register here](#): 1-857-232-0156; Access Code: 271840
- **Audience:** All ACOs
- **Description:** CMS will provide detailed information on the data contained in Claim and Claim Line Feed files (CCLFs) and the relationship between the data fields. You will have the opportunity to ask questions and receive answers from SMEs. This presentation is for ACOs with 2020 start dates, but all other ACOs are welcome to attend.

CMS Web Interface Weekly Support Call

WEDNESDAY, FEBRUARY 19, 2020, 1:00 P.M.–2:00 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 2019. The support calls will highlight important information and updates on reporting quality data and provide ACOs and groups with an opportunity to engage in Q&A sessions with CMS SMEs. For more information on the CMS Web Interface Weekly Support Calls, view the [CMS Web Interface Support Calls for ACOs and Groups Reporting Quality Data to CMS flyer](#).
 - The topic for this call will be Frequently Asked Measure Questions covering: PREV-7 and PREV-10.

CMS Web Interface Weekly Support Call

WEDNESDAY, FEBRUARY 26, 2020, 1:00 P.M.–2:00 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 2019. The support calls will highlight important information and updates on reporting quality data and provide ACOs and groups with an opportunity to engage in Q&A sessions with CMS SMEs. For more information on the CMS Web Interface Weekly Support Calls, view the [CMS Web Interface Support Calls for ACOs and Groups Reporting Quality Data to CMS flyer](#).
 - The topic for this call will be a Q&A Opportunity.

CONTACT INFORMATION FOR ACOs

To help ACOs navigate questions regarding the Shared Savings Program.

Medicare Shared Savings Program

SharedSavingsProgram@cms.hhs.gov

- Include your ACO ID (Axxxx) in the Subject line or text of the email
- Program operations and policy inquiries
- Technical inquiries related to MFT, CCLFs, the SSP ACO Portal, and ACO-MS
- Assistance with user access to CMS systems
- Password resets for your EIDM User ID
- 1-888-734-6433 (select Option 1) or 1-888-734-6563

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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