

## AT A GLANCE

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### UPCOMING DEADLINES

- **Phase 1 RFI-1 Closes:**  
12:00 p.m. ET on August 4, 2022
- **Indicate Interest in Remaining in BASIC Track Levels A or B:**  
12:00 p.m. ET on September 9, 2022

### EVENT ANNOUNCEMENTS

- **Advancing Health Equity in Palliative and Hospice Care**  
July 19<sup>th</sup> | 3:00–4:00 p.m. ET | [Register](#)
- **CMS QPP/APM Incentive Payment Listening Session**  
July 21<sup>st</sup> | 2:00–3:00 p.m. ET | [Register](#)
- **2023 Proposed Rule for the QPP Public Webinar**  
July 26<sup>th</sup> | 1:30–3:00 p.m. ET | [Register](#)
- **Strategies for eCQM/CQM Reporting**  
August 3<sup>rd</sup> | 3:00–4:00 p.m. ET | [Register](#)
- **Leveraging Patient Registries for Complex Patient Management**  
August 16<sup>th</sup> | 3:00–4:00 p.m. ET | [Register](#)

### PROGRAM ANNOUNCEMENTS AND RESOURCES

- [PY 2023 Change Request Cycle: Preparing for Phase 1 RFI-1](#)
- [How to Review Participation Options Information Applicable to PY 2023 in ACO-MS](#)
- [Notice of Proposed Rulemaking and Ability to Remain in Level A or Level B of the BASIC Track](#)
- [July CCLF Files](#)
- [First Snapshot of 2022 Qualifying APM Participant Status and APM Participation Data Now Available in QPP Participation Status Tool](#)

## PROGRAM ANNOUNCEMENTS AND RESOURCES

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### PY 2023 Change Request Cycle: Preparing for Phase 1 RFI-1

Currently, CMS is reviewing Phase 1 application submission elements. Please note that during the CMS review period, you will not be able to modify Performance Year (PY) 2023 application and/or change request submissions.

The first Phase 1 request for information (RFI-1) will be **open July 22<sup>nd</sup> through August 4<sup>th</sup> at 12:00 p.m. (noon) Eastern Time (ET)**. RFIs will be assigned in the [ACO Management System \(ACO-MS\)](#) and provide ACOs opportunities to update and correct application information. There are certain actions ACOs can take in response to each RFI.

During Phase 1 RFI-1 you will have the final opportunity to:

- Add ACO participant and/or Skilled Nursing Facility (SNF) affiliate taxpayer identification numbers (TINs) and CMS Certification Numbers (CCNs).
- Elect to apply for a SNF 3-Day Rule Waiver.

ACOs will also be able to submit a SNF 3-Day Rule Waiver narrative (if applicable) and review the *Participation Options Report* in ACO-MS.

The [Requests for Information in ACO-MS tip sheet](#) provides information on how to respond to RFIs in ACO-MS. Even if your ACO did not receive any RFIs on previously submitted tasks, you should take this time to review Phase 1 data elements and modify them as needed.

### Application Resources

- [Application Types & Timeline webpage](#)
- [Application Toolkit webpage](#)

- [Submitting Change Requests in ACO-MS tip sheet](#)
- [Change Request Cycle for Performance Year Beginning on January 1, 2023](#)
- [Key Application Actions and Deadlines](#)

If you have any questions about ACO-MS or require technical assistance, click the ACO-MS Helpdesk icon (located within the ACO-MS banner) or call 1-888-734-6433 and select Option 1 (TTY/TDD 1-888-734-6563).

## How to Review Participation Options Information Applicable to PY 2023 in ACO-MS

With the release of RFI-1 in [ACO-MS](#), CMS will provide all ACOs with a *Participation Options Report* that is applicable for PY 2023. ACOs should review this report for any changes to their participation eligibility, including changes to their revenue determination, which may impact their participation in the program. This report is also designed to help ACOs evaluate future participation options.

For more information about the report, download the *PY 2023 Participation Options Report Data Dictionary*, which can be found in both the Application Cycle subtab (via the information bubble) and the Program Resources section of the Knowledge Library tab in ACO-MS with the release of RFI-1.

The *Participation Options Report* Excel file has four tabs:

- 50% ACO Composition (TIN level)
- 40% Risk Check (TIN level)
- Estimate of High or Low Revenue (TIN level)
- ACO Summary (ACO-level summary of the first three tabs, plus track eligibility and assignment counts)

### Accessing the Participation Options Report

Option 1: Application Cycle Subtab (note that only information from the ACO Summary tab of the *Participation Options Report* is available through this method)

- Navigate to the My ACOs tab on the left-side menu and select your ACO.
- Select the Application Cycle subtab.
- Select 2023 in the program year drop-down menu to access participation options information.

Option 2: *Participation Options Report* (the full *Participation Options Report* with all four tabs is available through this method)

- Navigate to the Reporting tab on the left-side menu.
- Select your ACO from the drop-down menu.
- Select 2023 in the program year drop-down menu to access information for PY 2023. Select .xlsx format (the report is not available in .csv format).
- Select the *Participation Options Report* to download the report.

The *Participation Options Report* will also be available in future RFIs.

## Notice of Proposed Rulemaking and Ability to Remain in Level A or Level B of the BASIC Track

CMS is proposing in the [CY 2023 Medicare Physician Fee Schedule Notice of Proposed Rulemaking](#) that ACOs currently participating in the BASIC track at Level A or Level B for PY 2022 have the option to elect to remain in their current level of the BASIC track glide path for PY 2023 and continue at this level for the remainder of the ACO's current agreement period. The annual Application and Change Request Cycle for PY 2023 began June 8, 2022.

Accordingly, eligible ACOs in Level A or Level B of the BASIC track's glide path will have the opportunity to indicate interest in continuing participation at their current level during the current change request cycle. **If the proposed policy is finalized**, the election will not require CMS adjudication, and your ACO will remain at its current participation (Level A or Level B) for the remainder of the ACO's current agreement period unless the ACO elects to transition to a higher level of risk and potential reward within the BASIC track's glide path.

Starting July 22, 2022, eligible ACOs that want to indicate interest in the proposed policy to remain in their current Level A or Level B participation of the BASIC track’s glide path must do so via [ACO-MS](#).

- Navigate to the My ACOs tab of ACO-MS.
- Click on the applicable ACO.
- During both Phase 1 RFI response periods, eligible ACOs will see a banner describing the voluntary election.
- Click on the banner to remain in current Level A or Level B of the BASIC track.
- Confirm the selection when prompted.
- Once confirmed, **and if the proposed policy is finalized**, the change will automatically take effect in ACO-MS, as this election does not require CMS adjudication. The banner will then become a read-only message confirming the ACO’s election.

The last opportunity to indicate interest in remaining in Level A or Level B of the BASIC track’s glide path in ACO-MS is **September 9, 2022, at 12:00 p.m. (noon) ET**. If this proposed policy is not finalized and your ACO is required to advance from Level A or Level B to a two-sided risk model for PY 2023, your ACO will have a limited opportunity to submit a repayment mechanism, resolve any deficiencies, and have it approved in time for the start of the performance year.

If you have any questions about ACO-MS or require technical assistance, click the ACO-MS Helpdesk icon (located within the ACO-MS banner) or call 1-888-734-6433 (select Option 1) or TTY/TDD 1-888-734-6563.

## July CCLF Files

July Claim and Claim Line Feed (CCLF) files for the PY 2022 assignable or prospectively assigned beneficiaries will be made available to ACOs in the Data Hub tab of [ACO-MS](#). The July delivery timeline for the CCLF, Exclusion, and Medicare Beneficiary Identifier (MBI) Cross-reference (XREF) files are as follows:

FILE	DELIVERY	FILE NAMING CONVENTION	DATA HUB PY	USER FRIENDLY FILE NAMING CONVENTION
PY 2022 Beneficiary Exclusion and MBI XREF files	Week of July 11 <sup>th</sup>	P.A****.ACO.MBIY22.Dyymmdd.Thhmsst P.A****.BNEX.Y22.Dyymmdd.Thhmsst	2022	Excluded Beneficiary MBI XREF File delivered in July 2022 (txt)  Beneficiary Data Sharing Exclusion File delivered in July 2022 (xml)
PY 2022 CCLFs	Week of July 18 <sup>th</sup>	P.A****.ACO.ZCY22.Dyymmdd.Thhmsst	2022	CCLF delivered in July 2022 (zip)

ACOs should refer to the [CCLF Information Packet \(IP\)](#), Version 35 (V35) and the [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 in the Program Resources section of the Knowledge Library tab in ACO-MS. For technical assistance, please contact the ACO Information Center using the ACO-MS Helpdesk icon (located within the ACO-MS banner) or call 1-888-734-6433 (Option 1).

## First Snapshot of 2022 Qualifying APM Participant Status and APM Participation Data Now Available in QPP Participation Status Tool

On July 8<sup>th</sup>, CMS updated its [Quality Payment Program \(QPP\) Participation Status](#) tool based on the first snapshot of Alternative Payment Model (APM) data. The first snapshot includes data from Medicare Part B claims with **dates of service between January 1, 2022, and March 31, 2022**.

The tool includes 2022 Qualifying APM Participant (QP) status and Merit-based Incentive Payment System (MIPS) APM participation status.

To learn more about how CMS determines QP and the APM participation status for each snapshot, please visit the [QPP website](#).

### What Does QP Status Mean?

If you qualify as a QP, this means you are:

- Eligible for the 5% [APM](#) incentive bonus;
- Eligible for APM-specific rewards; and
- Exempt from participating in [MIPS](#).

### How Do I Check My QP or APM Participation Status?

To view your QP or APM participation status:

- Visit the [QPP Participation Status](#) tool.
- Enter your 10-digit National Provider Identifier (NPI).

### Learn More

For more information on APMs, visit the [QPP APM webpages](#). For a [comprehensive list of APMs](#) (PDF), and additional materials, visit the [QPP Resource Library](#).

## EVENT ANNOUNCEMENTS

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### VBC Cross-model Webinar: Advancing Health Equity in Palliative and Hospice Care

**TUESDAY, JULY 19, 2022, 3:00 P.M.–4:00 P.M. EASTERN TIME**

- [Register Here](#)
- **Audience:** Shared Savings Program ACOs
- **Description:** The Value Based Care (VBC) Learning System is hosting a cross-model webinar exploring ways health systems can address disparities in access to high-quality palliative and hospice care by engaging beneficiaries, improving care coordination, and expanding partnerships with community-based hospice organizations. Studies have shown that underserved communities are less likely to have access to palliative care professionals and, as a result, access and care disparities exist across diverse patient populations. This webinar will feature expert speakers who will describe promising practices for evaluating data on disparities in palliative and hospice care access and effective strategies for engaging interdisciplinary teams in improving the quality of care to meet beneficiaries' unique and diverse needs.

**Delaware Valley ACO** will provide an ACO perspective on meeting the challenge of equity and inclusiveness in palliative care, including the use of innovative strategies to identify and understand disparities. **Vitas Healthcare**, a hospice provider, will provide insight into their strategies and approaches for engaging beneficiaries and clinicians, and building community partnerships to reduce disparities in access to hospice care. Attendees will have an opportunity to engage speakers and ask questions about their approaches to advance health equity during a Q&A session.

### CMS QPP/APM Incentive Payment Listening Session

**THURSDAY, JULY 21, 2022, 2:00 P.M.–3:00 P.M. EASTERN TIME**

- [Register Here](#)
- **Audience:** Shared Savings Program ACOs
- **Description:** The CMS Innovation Center invites you to join a listening session on the transition of the APM incentives in Performance Year 2023 (Payment Year 2025). This is an opportunity for CMS to hear from providers and participants in APMs on their perspectives on the forthcoming end of the lump sum APM Incentive Payment.

**Important Note:** Attendees may submit written comments or questions before the session via email to [QualityPaymentProgramAPMHelpdesk@cms.hhs.gov](mailto:QualityPaymentProgramAPMHelpdesk@cms.hhs.gov) using the subject line “QUALITY PAYMENT PROGRAM LISTENING SESSION” or during the session using the Q&A window. Please indicate if you would prefer not to have your comments read or wish to remain anonymous.

## 2023 Proposed Rule for the Quality Payment Program Public Webinar

**TUESDAY, JULY 26, 2022, 1:30 P.M.–3:00 P.M. EASTERN TIME**

- [Register Here](#)
- **Audience:** Public
- **Description:** CMS will provide an overview of proposed policies for the 2023 performance year of the QPP. During the webinar, CMS subject matter experts will cover the following:
  - Overview and future direction of the QPP;
  - [2023 proposed policy changes](#) for traditional MIPS, MIPS Value Pathways (MVPs), the [Medicare Shared Savings Program](#), and Advanced APMs; and
  - Key differences between 2022 performance year and proposed 2023 performance year requirementsFollowing the presentation, CMS will answer questions from attendees, as time permits.

## SSP ACO Learning System Webinar: Strategies for eCQM/CQM Reporting

**WEDNESDAY, AUGUST 3, 2022, 3:00 P.M.–4:00 P.M. EASTERN TIME**

- [Register Here](#)
- **Audience:** This event is open to all Shared Savings Program ACO staff members, though team members supporting quality reporting may be most interested in attending.
- **Description:** The SSP ACO Learning System is hosting a webinar exploring ACO strategies for reporting clinical quality measures (CQMs) and electronic clinical quality measures (eCQMs). Presenters from ACOs will discuss their experience in reporting CQM/eCQMs for the Calendar Year (CY) 2021 reporting period. This includes describing their efforts to transform their data systems and engage participating providers in quality reporting and improvement efforts, and CMS resources and tools they used to support eCQM/CQM implementation. Attendees will have an opportunity to ask questions to learn more about how ACOs overcame challenges they encountered as eCQM/CQM implementation progressed.

## SSP ACO Learning System Webinar: Leveraging Patient Registries for Complex Care Management

**TUESDAY, AUGUST 16, 2022, 3:00 P.M.–4:00 P.M. EASTERN TIME**

- [Register Here](#)
- **Audience:** This event is open to all Shared Savings Program ACO staff members, though team members supporting care coordination or data management may be most interested in attending.  
**Description:** The SSP ACO Learning System is hosting a webinar highlighting ACOs’ strategies for applying patient registry data to complex care-management goals. Presenters from ACOs will discuss their experiences building infrastructure and designing workflows to support care coordination for beneficiaries with complex needs, such as chronic conditions. Presenters will also review approaches to analyzing registry data to assess overall population health and identify beneficiaries with complex needs. Attendees will have an opportunity to ask questions during the webinar.

## CONTACT INFORMATION FOR ACOs

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### ACO Coordinator

To help ACOs navigate questions regarding the Shared Savings Program, **please contact your ACO Coordinator as your first line of contact.** These additional resources are also available:

### ACO Information Center

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

Hours: Monday–Friday, 8:30 a.m.–7:30 p.m. ET

- 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/TTD)

### Quality Payment Program Service Center

[QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov)

Hours: Monday–Friday, 8:00 a.m.–8:00 p.m. ET; non-peak hours: before 10:00 a.m. and after 2:00 p.m. ET.

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

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