

AT A GLANCE

UPCOMING DEADLINES

- **Public Reporting Deadline: September 24, 2021**
- **Beneficiary Selection of a Primary Clinician for PY 2022 Voluntary Prospective Assignment: September 30, 2021**
- **PY 2019 APM Incentive Payment: Verify Medicare Billing Information by November 1, 2021**
- **Targeted Reviews of MIPS Payment Adjustment Factor(s): Extended (TBD)**

EVENT ANNOUNCEMENTS

- **APM Performance Pathway Webinar**
September 27th | 1:30–3:00 p.m. ET | [Register](#)
- **Advancing Health Equity Through Value-based Care Webinar**
September 29th | 1:00–2:00 p.m. ET | [Register](#)
- **APM Incentive Payment Webinar**
September 30th | 2:00–3:00 p.m. ET | [Register](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

- [PY 2021 Q2 Opioid Utilization Report Delivered: September 10, 2021](#)
- [September CCLF Files](#)
- [Release of Shared Savings Program 2020 Benchmark Public Use Files](#)
- [Details to Receive APM Incentive Payment](#)
- [Case Study on WellSpan Health ACO's Telehealth Expansion Strategy: Now Available](#)
- [Reminder: Case Study on OneCare Vermont's Comprehensive Payment Reform Program for Independent Primary Care Practices Available](#)
- [Seeking ACO Panelists for Fall Webinar on Telehealth and Beneficiary Access to Care](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

PY 2021 Q2 Opioid Utilization Report Delivered: September 10, 2021

CMS released the informational-only *Performance Year (PY) 2021 Quarter 2 (Q2) Opioid Utilization Report* package on September 10, 2021.

This report reflects that in PY 2021 Q2, the number of ACO-assigned beneficiaries with Part D coverage who met at least one of the measure criteria decreased by 21.25 percent in comparison to PY 2020 Q2. This is consistent with the overall decline in opioid usage over time.

As a reminder, in PY 2021, the Use of Opioids at High Dosage and from Multiple Providers (OHDMP) measure was retired. The informational [Medicare Shared Savings Program and Next Generation ACO Model: Opioid Utilization Report Overview](#) is available to help review the contents of the quarterly *Opioid Utilization Report* and details of the four opioid utilization measures.

The report package was delivered to your ACO as a zip file that includes a cover notice and the opioid report. The report is accessible through the Data Hub tab in the [ACO Management System \(ACO-MS\)](#). The download is titled *Quarterly Claims-Based Quality Measure Report*. The zip file is named with the following convention: "P.Axxxx.ACO.QQR." This file is available through the ACO-MS Data Hub indefinitely.

September CCLF Files

September Claim and Claim Line Feed (CCLF) files for the PY 2021 assignable or prospectively assigned beneficiaries were provided to ACOs on September 20th in the Data Hub tab in [ACO-MS](#).

The September 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
PY21 Beneficiary Exclusion and MBI XREF files	September 10 th	P.A****.ACO.MBIY21.Dyymmdd.Thhmsst P.A****.BNEX.Y21.Dyymmdd.Thhmsst	2021	Excluded Beneficiary MBI XREF File delivered in September 2021 (txt) Beneficiary Data Sharing Exclusion File delivered in September 2021 (xml)
PY21 CCLFs	September 20 th	P.A****.ACO.ZCY21.Dyymmdd.Thhmsst	2021	CCLF delivered in September 2021 (zip)

ACOs should refer to the [CCLF Information Packet \(IP\)](#), Version 31 (V31) and the [ACO and ACO-OS Data Exchange User Guide](#) (DEUG), Version (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 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).

Release of Shared Savings Program 2020 Benchmark Public Use Files

On September 17th, CMS released the *2020 Number of ACO Assigned Beneficiaries by County Public Use File (PUF)*. This PUF includes county and state identifiers, aggregate data consisting of total assigned beneficiaries by ACO for each county where at least one of their assigned beneficiaries resides, and total person-years by Medicare enrollment type. This standard analytical file can be used to inform those interested in the Shared Savings Program's use of factors based on regional fee-for-service (FFS) expenditures in establishing, adjusting, updating, and resetting historical benchmarks for ACOs (as applicable based on the ACO's agreement period start date). The *2020 Number of ACO Assigned Beneficiaries by County PUF* is available on the Data.CMS.gov [Number of Accountable Care Organization Assigned Beneficiaries by County webpage](#).

Details to Receive APM Incentive Payment

Eligible clinicians who were Qualifying Alternative Payment Model (APM) Participants (QPs) based on their 2019 performance should have received their 2021 five percent APM Incentive Payments earlier this summer. You can now log in to the [Quality Payment Program \(QPP\) website](#) to see the amount and the organization paid for both the 10-digit National Provider Identifier (NPI) and the organization.

If you were a QP in the PY 2019, and **you have not received your payment, check for your name** in the *QP Public Notice File for Payment Year 2021*, available in the [2021 QP Notice for APM Incentive Payment](#) zip file, which indicates that CMS needs your updated Medicare billing information.

You must verify your Medicare billing information **by November 1, 2021**, to receive your APM Incentive Payment for PY 2019.

Case Study on WellSpan Health ACO's Telehealth Expansion Strategy: Now Available

This case study from the Value Based Care (VBC) Learning System describes WellSpan Health ACO's telehealth expansion strategy in response to the coronavirus disease 2019 (COVID-19) pandemic. The health system quickly scaled operations by incorporating telehealth into existing workflows, using a technology platform that integrated with its Electronic Health Record (EHR) system, and relying on devices readily available to its practices. In addition, the WellSpan

Health ACO used innovative approaches to quickly engage its physicians and advanced practice providers in telehealth transformation. WellSpan's experience may be informative for health care organizations implementing or expanding their telehealth operations.

The [September 2021 – WellSpan Health ACO Telehealth Expansion Case Study](#) can be found in the Webinars section of the Knowledge Library tab in [ACO-MS](#).

Reminder: Case Study on OneCare Vermont's Comprehensive Payment Reform Program for Independent Primary Care Practices Available

This case study from the VBC Learning System describes OneCare Vermont's Comprehensive Payment Reform program, an initiative to redesign how independent primary care practices are paid in order to grant greater flexibility to treat patients' holistic health care needs. Practices that participate in this voluntary program receive monthly fixed payments instead of FFS payments to cover the cost of primary care services. OneCare Vermont's experience may be useful for health care organizations implementing fixed payment programs for primary care providers.

The [August 2021 – OneCare Vermont Comprehensive Payment Reform Program Case Study](#) can be found in the Webinars section of the Knowledge Library tab in [ACO-MS](#).

Seeking ACO Panelists for Fall Webinar on Telehealth and Beneficiary Access to Care

CMS will host a webinar this fall highlighting ACOs' strategies for using telehealth and is seeking a few ACOs to serve as panelists in a facilitated discussion. Discussion topics may include—but are not limited to—expanding and sustaining ACO telehealth initiatives since 2020, overcoming obstacles to beneficiary use of telehealth technology, and leveraging telehealth to increase health equity and access to care.

Does your ACO have a telehealth story to share? Please express interest in participating as a panelist by emailing VBCLearningSystem@mathematica-mpr.com with the subject line "Fall Telehealth Webinar" and a brief description of your ACO's telehealth initiative and background by Friday, October 8th.

EVENT ANNOUNCEMENTS

APM Performance Pathway (APP) Webinar

MONDAY, SEPTEMBER 27, 2021, 1:30 P.M.–3:00 P.M. EASTERN TIME

- [Register here](#)
- **Audience:** Clinicians and support staff who would like details on the APP, including all Shared Savings Program ACOs who are required to report using the APP beginning with PY 2021.
- **Description:** This webinar will provide an overview of APP-related policies for the QPP. During the webinar, CMS subject matter experts will review:
 - QPP basics
 - APP reporting information
 - APP requirements for Shared Savings Program ACOs
 - APP reporting scenarios

Following the presentation, CMS will answer questions from attendees as time permits.

Advancing Health Equity Through Value-based Care

WEDNESDAY, SEPTEMBER 29, 2021, 1:00 P.M.–2:00 P.M. EASTERN TIME

- [Register here](#)
- **Audience:** All ACOs

- **Description:** CMS welcomes Shared Savings Program ACOs, Direct Contracting Entities (DCEs), Kidney Care Entities, and Kidney Care First practices to join CMS for a cross-model webinar to explore how addressing health disparities can help organizations work towards CMS' goals of increasing quality of care, improving beneficiary experience, and lowering the overall cost of care. Speakers from L&M Policy Research will discuss how addressing health disparities can improve population health and financial performance. A speaker from Vively Health will highlight how the DCE is designing new workflows to identify and address health disparities among their beneficiaries. Attendees will have an opportunity to ask questions during the webinar.

APM Incentive Payment Webinar

THURSDAY, SEPTEMBER 30, 2021, 2:00 P.M.–3:00 P.M. EASTERN TIME

- [Register here](#)
- **Audience:** All ACOs
- **Description:** CMS is hosting a QPP webinar to provide an overview of the 2021 APM Incentive Payment for QPs or APM Entities associated with QPs. During the webinar, CMS subject matter experts will discuss:
 - How the APM Incentive Payment was paid
 - Scenarios to receive the APM Incentive Payment
 - How to access payment information on the [QPP website](#)

Following the presentation, CMS will answer questions from attendees as time permits.

Please note: You will receive an email with login information from GoToWebinar upon registration. If you do not receive an email in a few days' time, please contact CMSQualityTeam@ketchum.com.

CONTACT INFORMATION FOR ACOs

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

Hours: Monday–Friday, 7:00 a.m.–7:00 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 ACOs survey, quality measures, quality reporting for 2017 and future years, and CMS Web Interface
- 1-866-288-8292

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