



# ACCOUNTABLE CARE ORGANIZATION SPOTLIGHT NEWSLETTER

May 1, 2020 | ISSUE 9

## AT A GLANCE

### ISSUE HIGHLIGHTS

- Policy and Regulatory Revisions in Response to the COVID-19 PHE
- Updated COVID-19 FAQs Related to Shared Savings Program Quality Reporting
- Revised Schedule for Change Request Cycle

### EVENT ANNOUNCEMENTS

- Spring 2020 IPLCs Canceled

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## PROGRAM HIGHLIGHTS

### Interim Final Rule with Comment Released Announcing Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency

CMS is making changes to the Shared Savings Program to give the 517 ACOs serving more than 11 million beneficiaries greater financial stability and predictability during the 2019 Novel Coronavirus (COVID-19) pandemic.

Because the impact of the pandemic varies across the country, CMS is making adjustments to the financial methodology to account for COVID-19 costs so that ACOs will be treated equitably regardless of the extent to which their patient populations are affected by the pandemic. CMS is also forgoing the annual application cycle for 2021 and giving ACOs whose participation is set to end this year the option to extend for another year. ACOs that are required to increase their financial risk over the course of their current agreement period in the program will have the option to maintain their current risk level for next year, instead of being advanced automatically to the next risk level.

ACOs and their participating health care providers are using telehealth visits to continue to coordinate and deliver high quality care to their assigned beneficiaries. Consequently, for Performance Year (PY) 2020 and any subsequent performance year that starts during the public health emergency (PHE), CMS is including additional codes within the definition of primary care services used in determining beneficiary assignment under the Shared Savings Program so CMS can appropriately assign beneficiaries to ACOs based on remotely provided primary care services.

The Health and Human Services Secretary's declaration of the COVID-19 pandemic PHE in January 2020 triggered the Shared Savings Program's Extreme and Uncontrollable Circumstances Policy. The extreme and uncontrollable circumstance of the COVID-19 pandemic began in January 2020, and will apply for the duration of the PHE. Shared losses will be mitigated for all ACOs participating in a performance-based risk track, including: Track 2, the ENHANCED track, the BASIC track, levels C through E, and the Track 1+ Model, based on the length of the PHE. As an example, at this time, the PHE has already covered 4 months (January through April 2020), meaning any shared losses an ACO incurs for PY 2020 will be reduced by at least one-third.

If the PHE covers the full year (January through December 2020), any shared losses an ACO incurs for PY 2020 would be reduced completely, and the ACO would not owe any shared losses.

In an interim final rule with comment period (IFC) issued on March 31, 2020, CMS modified the Shared Savings Program's Extreme and Uncontrollable Circumstances Policy as it relates to disasters that occur during the quality reporting period to indicate that it applies when the quality reporting period is extended. Since all ACOs and their beneficiaries are impacted by the PHE, under the Shared Savings Program's Extreme and Uncontrollable Circumstances Policy, ACOs that do not complete quality reporting will receive the ACO quality performance mean. ACOs that do complete quality reporting will receive the higher of their own quality performance score or the ACO mean quality performance score. CMS will continue to monitor the impact on PY 2020 quality reporting.

To learn more, refer to:

- Fact Sheet: [Medicare Shared Savings Program: CMS Flexibilities to Fight COVID-19](#)
- IFC April 30, 2020: [Medicare and Medicaid Programs, Basic Health Program, and Exchanges; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency and Delay of Certain Reporting Requirements for the Skilled Nursing Facility Quality Reporting Program](#)
- Press Release: [Trump Administration Issues Second Round of Sweeping Changes to Support U.S. Healthcare System During COVID-19 Pandemic](#)

For additional background information on the waivers and rule changes, visit the [CMS COVID-19 Waivers & Flexibilities webpage](#).

## Updated COVID-19 FAQs Related to Shared Savings Program Quality Reporting

CMS recently updated the [COVID-19 FAQs on Medicare Fee-for-Service Billing](#) document for ACOs, see pages 32-33. The following question and answer was added:

**Question:** Merit-based Incentive Payment System (MIPS) eligible clinicians (ECs) who have not submitted any MIPS data by April 30, 2020, will qualify for the automatic Extreme and Uncontrollable Circumstances Policy and will receive a neutral payment adjustment for the 2021 MIPS payment year, but for MIPS ECs who participate in the Shared Savings Program ACOs, what happens if some but not all MIPS ECs or groups participating in the ACO report data for the Promoting Interoperability (PI) performance category?

**Answer:** If the ACO completely reports data for the Quality performance category and/or any ACO participant taxpayer identification number (TIN) or MIPS EC in the ACO reports data for the PI performance category, then all MIPS ECs that bill through the TIN of an ACO participant in the ACO would receive a MIPS score. Under the Alternative Payment Models (APMs) scoring standard, that score would be based on ACO quality data and/or available PI data, added to full credit for the Improvement Activities performance category, while the Cost performance category would continue to be weighted at zero percent. If some PI data is reported and quality data is not reported, the Quality performance category would be re-weighted to zero percent when calculating the score. The resulting MIPS payment adjustment could be upward, downward, or neutral.

With regard to the PI performance category, it is important to note that an ACO's PI score is the average of the scores for the MIPS ECs in the ACO. If a MIPS EC qualifies for a significant hardship, or other type of exception for the PI performance category (as all MIPS ECs, including those who participate in APMs, do for PY 2019 as a result of the current PHE), but chooses to submit data for the category as an individual or group, their data will be scored and will contribute to the ACO's PI score. If a MIPS EC does not report PI, they will be excluded from the calculation and will not negatively impact the ACO's overall PI performance category score.

## Revised Schedule for Change Request Cycle for Performance Year Beginning on January 1, 2021: Now Available

The change request cycle for performance year beginning on January 1, 2021, is now available for currently participating ACOs in the Program Operational Schedules section of the [ACO Management System](#) (ACO-MS) Knowledge Library. It outlines the change request review cycle for the performance year beginning on January 1, 2021, including the change request actions an

ACO can take during each round, the deadline for submission of change requests, and the ACO response periods. Beginning June 18, 2021, ACOs may take the following actions during this change request cycle:

- Voluntary election to extend agreement period for an optional fourth performance year for ACOs whose Shared Savings Program participation agreements are scheduled to end December 31, 2020;
- Voluntary election to maintain your current level under the BASIC track for PY 2021 or transition to a higher level within the BASIC track's glide path;
- Apply for a Skilled Nursing Facility (SNF) 3-Day Rule Waiver and/or to operate a Beneficiary Incentive Program (BIP); and
- Change selection of beneficiary assignment methodology.

**The anticipated final date to make these elections is September 22, 2020.**

The review cycle includes two rounds (the first Request for Information (RFI-1) and RFI-2) for ACOs to submit change requests for CMS review, feedback, and disposition.

Visit the [Program Guidance & Specifications webpage](#) to access guidance documents. Log into the ACO-MS Knowledge Library to access the change request cycle for performance year beginning on January 1, 2021 schedule and *Overview of Participation Options in ACO-MS* tip sheet (in the Program Resources section) for further information.

**Change Request Review Cycle Dates\***

ACTION	ACO RESPONSE PERIOD
Initial Change Request Submission	6/18/20–7/20/20 at 12:00 p.m. (noon) Eastern Time (ET)
RFI-1 Response Period	8/11/20–8/24/20 at 12:00 p.m. (noon) ET
RFI-2 Response Period	9/16/20–9/22/20 at 12:00 p.m. (noon) ET
Final Disposition	10/20/20 at 12:00 p.m. (noon) ET
Annual Certification	10/27/20–11/9/20 at 12:00 p.m. (noon) ET

\*Dates are subject to change.

**RESOURCES NOW AVAILABLE**

**SSP ACO Portal Enhanced Report – Drill Down Data for PY 2020 Historical Benchmark Expenditure Utilization Report: Now Available**

ACOs now have access to drill down data for the *PY 2020 Historical Benchmark Aggregate Expenditure Utilization (EXPU)* report. This release adds drill down data associated with the ACO's three historical benchmark years for the PY 2020 EXPU report. This data can be accessed through the Enhanced Reports section of the [SSP ACO Portal](#), through the *Expenditure Utilization Report, Trends, Graphs, and Drill Down for Table 1* enhanced report. This report allows drill down to beneficiary level person years, total expenditures, and health service utilization aggregate measures included in the EXPU report.

**Reminder: Materials from Cross-Model Primary Care Webinar on ACO-MS Knowledge Library**

Thank you for joining the Cross-Model Primary Care Webinar on March 25<sup>th</sup> spotlighting [Southcentral Foundations'](#) approach to primary care, led by Dr. Douglas Eby. The webinar slide deck, recording, and transcript are now available on the [ACO-MS Knowledge Library](#). The webinar summary will be posted within the next couple of weeks.

## EVENT ANNOUNCEMENTS

### Spring 2020 IPLCs Canceled

As a reminder, CMS decided to cancel the virtual and in-person learning collaboratives (IPLCs) planned for April, May, and June to allow ACOs to focus more fully on the health of their beneficiary populations. Thank you for your flexibility in these uncertain times and for the work you do daily to care for beneficiaries. CMS looks forward to possibly reconvening at a later date.

CMS encourages you to continue to access Learning System resources, including presentations and summaries from past IPLCs, on the [ACO-MS Knowledge Library](#).

## CONTACT INFORMATION FOR ACOs

To help ACOs navigate questions regarding the Shared Savings Program.

### Medicare Shared Savings Program

[SharedSavingsProgram@cms.hhs.gov](mailto: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](mailto: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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