

# ACCOUNTABLE CARE ORGANIZATION SPOTLIGHT NEWSLETTER

October 15, 2020 | ISSUE 21

## AT A GLANCE

### ISSUE HIGHLIGHTS

- **Set Up Your ACO's HARP Account for PY 2020 Quality Reporting**
- **Steps to Take When an Employee, Consultant, or Contractor Leaves Your ACO**
- **Sorting in ALR Table 1-4 in PY 2019 and 2019A Financial Reconciliation Report Packages**
- **ACO Learning System Feedback Focus Groups**

### EVENT ANNOUNCEMENTS

- **Annual Wellness Visits**  
October 20<sup>th</sup> | 2:30–4:00 p.m. ET
- **Building Trusting Relationships with Beneficiaries**  
November 17<sup>th</sup> | 2:30–4:00 p.m. ET

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## PROGRAM HIGHLIGHTS

### Set Up Your ACO's HARP Account for PY 2020 Quality Reporting

The submission period for Performance Year (PY) 2020 CMS Web Interface quality reporting will **open on January 4, 2021, and will close on March 31, 2021**.

All Shared Savings Program ACOs must completely and accurately report all CMS Web Interface quality measures to be eligible to share in savings and avoid compliance actions.

The ACO-reported CMS Web Interface data is used to calculate the Quality performance category score for the Merit-based Incentive Payment System (MIPS) eligible clinicians in an ACO under Track 1 and Levels A through Level D of the BASIC track's glide path for the performance year that began on January 1, 2020.

### Who Needs a HARP Account?

Each person associated with an ACO who needs to access the CMS Web Interface will need their own Health Care Quality Information System (HCQIS) Access Roles and Profile (HARP) account with the appropriate role to download their Beneficiary Samples and submit or view the ACO's CMS Web Interface data. This may include practice staff, abstractors, or other third-party representatives.

### New ACOs that Began January 1, 2020: Act Now

Creating a HARP account and establishing a user role is a multi-step process. If the performance year that began on January 1, 2020, is the first performance year for your ACO in the Shared Savings Program, you are encouraged to identify **at least one individual** within your ACO who can obtain a HARP account with the Security Official role **as soon as possible**. If you wish to have additional individuals submit or view CMS Web Interface data and download Beneficiary Samples, the individual may request the Security Official or Staff User role.

To create a HARP account and request a role, go to the [Quality Payment Program \(QPP\) website](#) and click "Sign In" in the upper right-hand corner. The HARP registration process will take between 5 and 15 minutes, depending on how quickly your identity can be verified.

### Existing ACOs

If your ACO reported PY 2019 quality data through the CMS Web Interface, then someone within your ACO already has HARP credentials. Check your ACO contacts

within the [ACO Management System](#) (ACO-MS) to confirm your ACO's quality contacts are up-to-date and that the individual(s) who will submit your ACO's PY 2020 CMS Web Interface data have HARP access.

Have these individuals sign in to the QPP website using their HARP credentials to confirm that their account is active, and that they have access to the appropriate organizations.

### Additional Resources

Refer to the [QPP Access User Guide zip file](#) for detailed instructions for creating a HARP account, requesting a role, managing your password, and requesting authorization to access other organizations.

Refer to the [2020 Medicare Shared Savings Program and Quality Payment Program Interactions](#) for more information on the interactions between the Shared Savings Program and the QPP.

Contact the QPP at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov) or 1-866-288-8292 if you are unsure about your ACO's current HARP access, need to determine the Security Official(s) within your ACO, or have any other account questions.

*Note:* You will need to provide the ACO's primary taxpayer identification number (TIN) and legal entity name. To receive quicker assistance, consider calling during non-peak hours: before 10:00 a.m. and after 2:00 p.m. Eastern Time (ET). Customers who are hearing impaired can dial 711 to be connected to a telecommunications relay service (TRS) communications assistant.

### Steps to Take When an Employee, Consultant, or Contractor Leaves Your ACO

CMS encourages ACO users with administrative privileges to confirm that their ACO contacts are up-to-date and have access to [ACO-MS](#). Only users with administrative privileges—ACO Executive, CMS Liaison, Authorized to Sign (primary and secondary), and the Application Contacts (primary and secondary)—can manage contact information.

For additional information on how to update contacts or how to add users to ACO-MS, refer to the tip sheet, *Overview of ACO-MS User Access and ACO Contacts*, which can be found in the Program Resources section of the Knowledge Library tab in ACO-MS.

Follow the steps below when an individual leaves your ACO to ensure continuity of communication among remaining personnel and to protect CMS data from disclosure to unauthorized parties:

- **Step 1: Remove the contact from ACO-MS.** An ACO official (ACO Executive, Authorized to Sign (primary and secondary) Contacts, or CMS Liaison) must remove and/or replace the individual on the Contacts subtab in ACO-MS. If you have questions regarding updating information in ACO-MS, please email [SharedSavingsProgram@cms.hhs.gov](mailto:SharedSavingsProgram@cms.hhs.gov), or call 1-888-734-6433 (select Option 1), or 1-888-734-6563 (TTY/TDD).
- **Step 2: Remove user access to CMS systems.** Before the individual leaves the ACO, have them contact the QPP service center at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov) or call 1-866-288-8292. If you have any questions regarding access to the CMS Web Interface, please contact the QPP service center at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov).
- If you are removing an entity with whom your ACO no longer works, you will need to remove that entity from your ACO's Data Use Agreement (DUA) tracking system.

You should maintain your ACO contacts throughout the year to keep it up to date. CMS does not maintain distribution lists for program correspondence. All email distributions are pulled directly from the ACO contacts listed in ACO-MS.

### Sorting in ALR Table 1-4 in PY 2019 and 2019A Financial Reconciliation Report Packages

CMS recently identified a sorting issue in the Assignment List Report (ALR) Table 1-4 in the *PY 2019 and 2019A Financial Reconciliation Reports* packages for all ACOs. The data in the table is correct; however, Table 1-4 has been sorted in ascending order by Medicare Beneficiary Identifier (MBI), TIN, and National Provider Identifier (NPI), not in descending order by the number of primary care services the assigned beneficiary received from a TIN-Individual NPI combination as stated in the ALR Data Dictionary. ALR Table 1-4 sorting has already been updated in all *PY 2020 Report* packages, beginning with the *PY 2020 Preliminary Prospective/Prospective Report* packages delivered in December of 2019, and Table 1-4 now includes a count of

primary care services. For the impacted reports, ACOs may also find it helpful to reference Table 1-2, which includes the count of primary care services at the TIN-level for each assigned beneficiary.

## ACO Learning System Feedback Focus Groups

The CMS ACO Learning System is interested in understanding what kind of support, events, and resources are most useful to ACOs. Your feedback will inform future learning systems to ensure that offerings are valuable and actionable.

CMS invites you to share your feedback in a focus group with other Shared Savings Program ACOs. Focus groups are voluntary, will last about 60 minutes, and will take place between mid-October and mid-November.

If you are interested in participating, please email [ACOLearningActivities@mathematica-mpr.com](mailto:ACOLearningActivities@mathematica-mpr.com) by October 23, 2020, with “Learning System Feedback” in the Subject line. Please include your ACO name, ACO ID, and the names and email addresses of participants from your ACO.

## RESOURCES NOW AVAILABLE

### Release of Shared Savings Program 2019 Benchmark Public Use Files

On October 15<sup>th</sup>, CMS released 2019 Public Use Files (PUFs) that 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. CMS released two PUFs: (1) Aggregate Expenditure and Risk Score Data on Assignable Beneficiaries by County PUF and (2) Number of ACO Assigned Beneficiaries by County. CMS also updated the *Medicare Shared Savings Program Publicly Available ACO Data and ACO Performance Data Sources Maintained by CMS* document. You can find these on the [Shared Savings Program Benchmark PUFs webpage](#).

### October CCLF Files

October Claim and Claim Line Feed (CCLF) files were made available to ACOs on October 12<sup>th</sup> for the PY 2020 assignable or prospectively assigned beneficiaries. These files will be available in the [ACO-MS](#) Data Hub and in the ACO’s Managed File Transfer (MFT) mailbox until the MFT mailboxes are retired on December 31, 2020.

The October delivery timeline for the CCLF, Exclusion, and MBI cross-reference (XREF) files are as follows:

FILE	DELIVERY	NAMING CONVENTION
<b>Monthly Exclusion Files</b>	October 8 <sup>th</sup>	P.A****.BNEX.Y**.Dyymmdd.Thhmsst
<b>MBI XREF Files</b>	October 9 <sup>th</sup>	P.A****.ACO.MBIY**.Dyymmdd.Thhmsst
<b>CCLF Files</b>	October 12 <sup>th</sup>	P.A****.ACO.ZCY**.Dyymmdd.Thhmsst

ACOs should refer to the *CCLF Information Packet (IP), Version 29 (V29)* 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 Program Resources section in the Knowledge Library tab in ACO-MS.

For technical assistance, please contact the ACO Information Center at [SharedSavingsProgram@cms.hhs.gov](mailto:SharedSavingsProgram@cms.hhs.gov), or call 1-888-734-6433 (Option 1), or 1-888-734-6563 (TTY/TDD).

## Second Snapshot of 2020 QP and MIPS APM Data: Now Available

On October 15<sup>th</sup>, CMS distributed a Second Snapshot of 2020 Qualifying Alternative Payment Model (APM) Participant (QP) and MIPS APM data based on the second snapshot of data **from January 1, 2020, through June 30, 2020**, to help clinicians determine how to participate in QPP for 2020. Clinicians may verify their statuses in the [QPP Participation Status Tool](#).

For more information on APMs, visit the [QPP APM webpage](#). For a comprehensive list of APMs and additional materials, visit the [QPP Resource Library](#). For questions, contact the QPP Help Desk at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov) or 1-866-288-8292. To receive quicker assistance, consider calling during non-peak hours: before 10:00 a.m. and after 2:00 p.m. ET. Customers who are hearing impaired can dial 711 to be connected to a TRS communications assistant.

## Reminder: APM Incentive Payment Details are Available

CMS recently updated the [QPP website](#) to include the 2020 APM Incentive Payment details. To access this information, clinicians and surrogates can now log into the QPP website using their HARP credentials. Please refer to the [QPP Access User Guide zip file](#) for additional details.

Eligible clinicians who were QPs based on their 2018 performance, will begin receiving their 2020 five percent APM Incentive Payments this month. CMS also posted a new *2020 APM Incentive Payment Fact Sheet* available in the [2020 Learning Resources for QP Status and APM Incentive Payment zip file](#) to explain incentive eligibility and calculations.

## What Do I Need to Do in Order to Receive the APM Incentive Payment?

You do not need to do anything. However, if you have not received your payment and find your name on the updated *QP Public Notice File for Payment Year 2020* Excel spreadsheet, which available in the [2020 APM Incentive Payment Notice zip file](#), you will need to verify your Medicare billing information following the instructions provided. If you do not verify your Medicare billing information **by the November 13, 2020, deadline**, then CMS will not be able to issue your APM Incentive Payment.

For assistance, contact QPP at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov) or 1-866-288-8292. To receive quicker assistance, consider calling during non-peak hours: before 10:00 a.m. and after 2:00 p.m. ET. Customers who are hearing impaired can dial 711 to be connected to a TRS communications assistant.

## EVENT ANNOUNCEMENTS

### MSSP Learning System Webinar: ACO Strategies for Annual Wellness Visits

**TUESDAY, OCTOBER 20, 2020, 2:30 P.M.–4:00 P.M. EASTERN TIME**

- [Register here](#)
- **Audience:** All ACOs
- **Description:** This webinar will feature an overview of annual wellness visits (AWVs) and approaches ACOs may consider for encouraging AWV completion. The event will cover strategies that ACOs can use to integrate AWVs into clinical, behavioral health, and care coordination workflows. ACO speakers will describe their approaches to implementing and monitoring AWV programs and share approaches to monitoring outcomes for AWV completion and quality performance.

### MSSP Learning System Webinar: Building Trusting Relationships with Beneficiaries

**TUESDAY, NOVEMBER 17, 2020, 2:30 P.M.–4:00 P.M. EASTERN TIME**

- [Register here](#)
- **Audience:** All ACOs
- **Description:** This webinar will feature approaches ACOs may consider for beneficiary engagement. A subject matter expert will highlight strategies to build trusting relationships between beneficiaries and care teams. Attendees will learn from other ACOs and discuss innovative options for engaging beneficiaries.

## Registration for Fall 2020 Virtual Learning Collaboratives

This fall, CMS will host a series of region-specific virtual learning collaboratives (VLCs) for all ACOs and End-Stage Renal Disease (ESRD) Seamless Care Organizations (ESCOs) participating in the Shared Savings Program, the Next Generation ACOs (NGACO) Model, and the Comprehensive ESRD Care (CEC) Model. Meetings for each [CMS region](#) began in July and will continue through November. Use the links in the table below to register for the VLC meeting in your region.

### Who should attend?

ACO staff who work on quality and performance improvement initiatives may be most interested in attending. VLCs will feature presentations highlighting innovative ACO strategies for improving quality while lowering costs. Attendees will also discuss key components for implementing improvement strategies, such as setting aims, using data to inform improvement, and engaging stakeholders.

### Interested in presenting?

ACO staff interested in presenting formally at a VLC meeting are encouraged to express interest using the [Summer/Fall 2020 Virtual Learning Collaborative Speaker Submissions link](#). If your proposal is selected, a member of the CMS Learning System team will contact you to discuss a potential presentation.

CMS REGION	DATE	REGISTRATION
<b>Region 2 (New York City): NJ, NY, PR, VI</b>	November 12 <sup>th</sup>	Register <a href="#">here</a> by November 5 <sup>th</sup>
<b>Region 6 (Dallas): AR, LA, OK, NM, TX</b>	October 22 <sup>nd</sup>	Register <a href="#">here</a> by October 15 <sup>th</sup>
<b>Cross-regional meeting*</b>	November 19 <sup>th</sup>	Register <a href="#">here</a> by November 12 <sup>th</sup>

\*ACOs may attend the “cross-regional meeting” if they have a scheduling conflict for their specific region or registration is full.

## CONTACT INFORMATION FOR ACOs

To help ACOs navigate questions regarding the Shared Savings Program.

### ACO Information Center

[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; 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](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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