



ACCOUNTABLE CARE ORGANIZATION SPOTLIGHT NEWSLETTER

September 30, 2020 | ISSUE 20

AT A GLANCE

UPCOMING DEADLINES

- **Submit Comments on the CY 2021 Proposed Rule: October 5th at 5:00 p.m. ET**
- **Submit Targeted Review Request: October 5th at 8:00 p.m. ET**
- **Update Public Reporting Webpage: October 14th**

ISSUE HIGHLIGHTS

- **MSSP Termination Notification for Participation in Direct Contracting Model: FAQ**
- **Benchmark Estimation Tool and PY 2020 Q2 Report Data**
- **Managing BCDA Credentials**
- **ACO-MS Data Hub Go-Live**

EVENT ANNOUNCEMENTS

- **Annual Wellness Visits**
October 20th | 2:30–4:00 p.m. ET

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PROGRAM HIGHLIGHTS

Targeted Review Request Deadline: Monday, October 5th

As a reminder, if you participated in the Merit-based Incentive Payment System (MIPS) in 2019, your performance feedback, including your MIPS final score and payment adjustment factor(s), is available for review on the [Quality Payment Program \(QPP\) website](#).

This final score determines the payment adjustment you will receive in 2021, with a positive, negative, or neutral payment adjustment being applied to the Medicare paid amount for covered professional services furnished by a MIPS-eligible clinician in 2021.

Alternative Payment Model (APM) participants may request that CMS review the calculation of their 2020 MIPS payment adjustment factor(s) through a process called targeted review. The deadline to submit your request is **October 5, 2020, at 8:00 p.m. Eastern Time (ET)**.

For more information about how to request a targeted review, please refer to the [2019 Targeted Review User Guide](#).

For assistance, contact QPP at 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 telecommunications relay service (TRS) communications assistant.

MSSP Termination Notification for Participation in Direct Contracting Model: FAQ

Question: If my ACO is joining the Direct Contracting model, can we notify CMS 30 days prior to our Direct Contracting model performance year start date?

Answer: While you do have 30 days to notify CMS of your decision to terminate from the Medicare Shared Savings Program (MSSP), the Direct Contracting model will run alignment in advance of the performance year start date. In order to ensure CMS is complying with the Medicare Shared Savings Program exclusivity requirement and ACO participants and their beneficiaries are not overlapping with multiple shared savings initiatives, CMS strongly encourages you to notify the Medicare Shared Savings Program no later than October 20th that your ACO is terminating for Performance Year (PY) 2021 to avoid any participant overlap between the Shared Savings Program ACO and the Direct Contracting model ACO. The failure to do so will

result in your Direct Contracting Participant Providers being flagged for overlap issues making them ineligible for the model. Notification of termination after October 20th will prevent your ACO from participating in the Direct Contracting model in PY 2021.

Benchmark Estimation Tool and PY 2020 Q2 Report Data

ACOs should exercise caution when interpreting results generated by the updated benchmark estimation tools available in the [ACO Management System](#) (ACO-MS) when used in conjunction with the PY 2020 Quarter 2 (Q2) data. Caution is particularly warranted for ACOs under prospective assignment. The quarterly national and/or regional assignable fee-for-service (FFS) per capita expenditures used by the tool to compute the estimated updated benchmark are based on the rolling 12-month report period, whereas ACO quarterly expenditures are based on the year-to-date period for ACOs under prospective assignment. This “mismatch” appears to overstate the estimated updated benchmark relative to the ACO’s quarterly expenditures.

Employing the methodology used by the estimation tools for all ACOs, CMS found that the share of ACOs with calculator outputs of “Expenditures below updated benchmark” and “Percentage is positive and above minimum savings rate (MSR)” more than doubled between PY 2020 Q1 and PY 2020 Q2 for ACOs under prospective assignment, but remained relatively stable among ACOs under preliminary prospective assignment for which data time periods used in the tool aligned. The impacts of this discrepancy based on ACOs that elected the prospective assignment methodology will likely diminish in PY 2020 Q3 as the year-to-date report period lengthens, and may disappear by PY 2020 Q4, when all data is based on 12 months for all ACOs.

Note: ACOs choosing to use the available updated benchmark estimation tool for PY 2020 Q2 or future quarters affected by the coronavirus disease 2019 (COVID-19) public health emergency (PHE) should use ACO and national assignable FFS per capita expenditure values from Table 1A, rather than Table 1, of the quarterly *Aggregate Expenditure/Utilization Report* (EXPU), and should use regional assignable FFS per capita expenditures and/or national and regional weights from Table 2A rather than Table 2 of the quarterly EXPU. The values in Tables 1A and 2A reflect the adjustment to exclude months associated with COVID-19 episodes of care.

Managing BCDA Credentials in ACO-MS

The Beneficiary Claims Data Application Programming Interface (API) (BCDA) enables ACOs participating in the Shared Savings Program to retrieve Medicare Part A, Part B, and Part D claims data for their assigned or assignable beneficiaries.

The BCDA Team is excited to announce that as of Monday, October 5th, all Shared Savings Program ACOs will be able to generate BCDA credentials via [ACO-MS](#). Instructions on how to generate API credentials can be found in the Program Resources section of the Knowledge Library tab in ACO-MS. Visit the [BCDA website](#) for more information on the API, and visit the [BCDA Google Group](#) if you have any questions.

BCDA is going through a number of major and exciting updates in the next few months. The BCDA Team appreciates your continued cooperation and curiosity in the process.

ACO-MS Data Hub Go-Live

On Monday, September 28, 2020, CMS launched a new file delivery mechanism called the [ACO-MS](#) Data Hub. The Data Hub is a repository for the monthly Claim and Claim Line Feed (CCLF) files, Exclusion files, and static reports that CMS delivers to ACOs.

This new delivery mechanism allows ACOs to access, download, and archive data files and reports for the current and/or past program year(s). Additionally, the Data Hub offers a user-friendly experience and better file organization through folders, archival and search mechanisms, tooltips, and intuitive file display names.

All active ACO-MS users can access the Data Hub via ACO-MS by using their current Enterprise Identity Management (EIDM) login credentials, then navigating through the Data Hub workspace to retrieve their data files and/or static reports. Users with administrative privileges (ACO Executive, Authorized to Sign (primary and secondary), CMS Liaison, and Application Contacts (primary and secondary)) must still extend invitations to new users within their organization who need access to ACO-MS.

The existing Managed File Transfer (MFT) mailbox and [SSP ACO Portal](#) will be retired on December 31, 2020. CMS is utilizing a phased-in approach to deliver new reports and data files to the Data Hub, SSP ACO Portal, and the MFT mailbox:

- **Phase 1** (September 2020): Monthly Exclusion and New Excluded Medicare Beneficiary Identifier (MBI) Cross-reference (XREF) test files will be available in the ACO-MS Data Hub only (*Note: There will not be any CCLF test files*). CMS recommends ACOs review and download the files to update their systems. **The data in these files is dummy data for review and testing purposes.** File naming conventions are as follows:
 - Monthly Exclusions: “P.AXXXX.BNEX.Y20.DYYMMDD.Thhmsst”
 - New excluded MBI XREF: “P.AXXXX.ACO.MBIY20.DYYMMDD.Thhmsst”
- **Phase 2** (October, November, and December 2020): Monthly CCLFs and Exclusion files will be delivered in the Data Hub, SSP ACO Portal, and MFT mailbox.
- **Phase 3** (November and December 2020): Static reports will be delivered in the Data Hub, SSP ACO Portal, and MFT mailbox.

Historical CCLFs, Exclusion files, and static reports that were delivered prior to October 2020 will be available in the Data Hub in December 2020. **With the retirement of the SSP ACO Portal on December 31, 2020, the enhanced reports will no longer be accessible.**

Access for Terminated ACOs:

- An ACO that voluntarily terminates its participation in the Shared Savings Program at the end of a performance year will be able to access its existing data files and reports until September of the next performance year.
- An ACO that voluntarily terminates its participation mid-year and intends to report quality data will also be able to access its existing data files and reports until September of the next performance year.
- An ACO that voluntarily terminates its participation mid-year and does not intend to report quality data will maintain access to its data files and reports for 30 days following termination.

Data Hub Resources

For additional information, refer to the following resources:

- September 3, 2020, “CCLF User Group Webinar: New Delivery Mechanism for CCLFs and Reports” presentation/recording available in the Webinars section of the Knowledge Library tab in ACO-MS;
- *ACO-MS Data Hub* tip sheet and the *Data Hub FAQs* available in the Program Resources section of the Knowledge Library tab in ACO-MS;
- *CCLF Information Packet (IP)* and the *ACO and ACO-OS Data Exchange User Guide (DEUG)* available in the Program Resources section of the Knowledge Library tab in ACO-MS.

For technical assistance, please contact the ACO Information Center at SharedSavingsProgram@cms.hhs.gov or 1-888-734-6433 (Option 1).

RESOURCES NOW AVAILABLE

Release of Complete PY 2019 and PY 2019A Shared Savings Public Use Files

CMS recently issued the updated PY 2019 and PY 2019A Shared Savings Program ACO Public Use Files (PUFs), which are publicly available sources of annual program performance data. You can find the PUFs on the [CMS.gov Shared Savings Program Accountable Care Organizations \(ACO\) Public Use Files webpage](#). These files include ACO-specific metrics, as well as summarized beneficiary and provider information. To learn more about the data, visit the [In the News webpage](#).

CCLF Related Files: New MBI XREF File and Exclusion File Updates

Beginning in October 2020, CMS will start delivering a new Excluded MBI XREF file to ACOs. The file will contain the history of MBIs for beneficiaries who are present in the Exclusion file for that month. The new Excluded MBI XREF file will be delivered **only** to the [ACO-MS](#) Data Hub. The new Excluded MBI XREF file is in addition to the Beneficiary XREF (CCLF9) file.

The Excluded MBI XREF file will **not** be generated and delivered if any of the following conditions are met:

- Beneficiaries in the monthly/run-out Exclusion file have no MBI changes; and/or
- Beneficiaries assigned to the ACO do not have any exclusions.

ACOs should refer to the DEUG, Version 11 (V11) for details on the new Excluded MBI XREF file.

Beginning October 2020, the existing Exclusion file will include a new code (“Beneficiary Removed (BR)”) for any voluntarily aligned and prospectively assigned beneficiary dropped from the ACO’s most recent assignment list. The historical beneficiary drops (prior to Q4 2020) will not be included in the Exclusion file. ACOs should refer to the DEUG, V11 for more information on the updated Exclusion file.

APM Incentive Payment Details: Now 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 Health Care Quality Information System (HCQIS) Access Roles and Profile (HARP) credentials. Please refer to the [QPP Access User Guide zip file](#) for additional details.

Eligible clinicians who were Qualifying APM Participants (QPs), based on their 2018 performance, will begin receiving their 2020 5% APM Incentive Payments this month. CMS also posted a new [2020 APM Incentive Payment Fact Sheet](#) 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 available in the [2020 APM Incentive 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 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.

SSP ACO Portal Enhanced Report: Expect Refreshed Data for PY 2019 and 2019A EXPU and ASR Reports

During the week of October 5, 2020, ACOs will gain access within the [SSP ACO Portal](#) Enhanced Reports to their PY 2019 and 2019A summary data from the *EXPU* report and *Assignment Summary Report* (ASR) provided with the Unembargoed Financial Reconciliation package. This release adds the annual 2019 and 2019A data to three enhanced reports in the SSP ACO Portal: *Assignment Summary Report, Trends for Tables 2-4 and 2-5; Expenditure/Utilization Report, All ACO Distributions Graphs; Expenditure/Utilization Report, Trends, Graphs, and Drill Down for Table 1.*

- **Assignment Summary Report, Trends for Tables 2-4 and 2-5** provides tables that summarize the demographic and eligibility characteristics of your ACO’s assigned beneficiaries and provides counts and percentages of beneficiaries by classification for a selected reporting period (Table 2-4). It also provides the county distribution of the ACO’s beneficiary population (Table 2-5). You can compare data directly from several reporting periods in the same table.

- **Expenditure/Utilization Report, All ACO Distributions Graphs** displays a set of bar charts showing the distribution of values for selected measures across all ACOs with the same assignment methodology for a specified performance period. The bar representing your ACO is the only solid bar, so you can see how your ACO ranks for each measure among similar ACOs.
- **Expenditure/Utilization Report, Trends, Graphs, and Drill Down for Table 1** is based on information in the static *Aggregate Expenditure/Utilization Report* and compares your ACO's expenditures and utilization against the all-ACO median and the national FFS population. It reveals trends by allowing direct comparisons for selected annual or quarterly periods. Through this report, you can also generate optional line graphs for measures that you select.

Additionally, during the week of October 12, 2020, ACOs can expect to gain access to the EXPU drill down data associated with the PY 2019 and 2019A annual EXPU report. This data can be accessed through the Enhanced Report 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 seen on the EXPU report.

As a reminder, 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 see two new entries in the enhanced report prompts. The prompts will list "2019" for the 2019 performance year data and "2019A" (with no dash) for the 2019A performance year data.

EVENT ANNOUNCEMENTS

MSSP Learning System Shared Learning Webinar: 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.

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 their 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, email ACOLearningActivities@mathematica-mpr.com by October 9th with "Learning System Feedback" in the Subject line. Include your ACO name and the names and email addresses of participants from your ACO.

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 ACO (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
Region 1 (Boston): CT, MA, ME, NH, RI, VT	October 8 th	Register here by October 1 st
Region 2 (New York City): NJ, NY, PR, VI	November 12 th	Register here by November 5 th
Region 6 (Dallas): AR, LA, OK, NM, TX	October 22 nd	Register here by October 15 th
Regions 9 (San Francisco) & 10 (Seattle): AK, AZ, CA, HI, ID, NV, OR, WA	October 1 st	Registration CLOSED*
Cross-regional meeting*	November 19 th	Register here by November 12 th

*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

- 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

- 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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