

AT A GLANCE

UPCOMING DEADLINES

- **Application Submissions to Shared Savings Program for a January 1, 2024 Start Date**
Due: May 18–June 15, 2023
- **Early Renewal Applications**
Due: May 18–June 15, 2023
- **Phase 1 RFI-1**
Due: August 1, 2023 12 p.m. (noon)

EVENT ANNOUNCEMENTS

- **SSP Learning System Shared Learning Webinar: Caring for Patients with Alzheimer's and Alzheimer's Disease Related Dementias**
May 25th | 3:00–4:00 p.m. ET | [Register](#)
- **SSP Learning System Shared Learning Webinar: Strategies for Reporting MIPS CQM**
June 8th | 3:00–4:00 p.m. ET | [Register](#)
- **ACO REACH Shared Learning Webinar: Building Relationships with Community-Based Organizations**
June 15th | 2:00–3:00 p.m. ET | [Register](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

- [Specifications of the Accountable Care Prospective Trend and Three-Way Blended Benchmark Update Factor: Now Available](#)
- [Applications Open: May 18–June 15, 2023](#)
- [PY 2024 Change Request Cycle Opens: May 18–August 1, 2023](#)
- [BPCI Advanced Model Year 7 Request for Applications](#)
- [Shared Savings Program and the Expiration of the COVID-19 PHE](#)
- [30 Days' Advance Notice Required for Voluntary Termination](#)
- [Seeking ACO Speakers for Summer Virtual Learning Collaboratives](#)
- [May CCLF Files](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

Specifications of the Accountable Care Prospective Trend and Three-Way Blended Benchmark Update Factor: Now Available

CMS has posted the [Specifications of the Accountable Care Prospective Trend \(ACPT\) and Three-Way Blended Benchmark Update Factor](#) (PDF) on the [Program Guidance & Specifications webpage](#). This resource describes specifications for certain Shared Savings Program benchmarking calculations applicable to ACOs entering agreement periods beginning on January 1, 2024, and in subsequent years as specified in [42 CFR § 425.652](#) through [42 CFR § 425.660](#). This document focuses on describing the calculation of a prospective, external factor, the Accountable Care Prospective Trend, as a component of a three-way blended update factor to an ACO's historical benchmark.

Applications Open: May 18–June 15, 2023

Applications for the Performance Year (PY) beginning on January 1, 2024, opens today, May 18, 2023. ACOs must submit their application via [ACO Management System \(ACO-MS\)](#) by June 15, 2023, at 12:00 p.m. (noon) Eastern Time (ET).

There will no longer be a separate Notice of Intent to Apply (NOIA) period for the Shared Savings Program application cycle. ACOs must register in ACO-MS in order to start their Shared Savings Program application during the application submission period. Refer to the [How to Complete ACO-MS Registration](#) tip sheet for more information.

An ACO should only apply as an Early Renewal Applicant if it is electing to voluntarily terminate its ACO participation agreement with an effective date of termination of December 31st of the current performance year and is applying to participate in a new agreement period starting on January 1st of the upcoming calendar year without a break in participation.

Refer to the [Application Toolkit](#) for updated resources to assist with the completion of your application.

PY 2024 Change Request Cycle Open: May 18–August 1, 2023

Currently participating ACOs may take the actions described in the [Change Request Cycle for Performance Year Beginning on January 1, 2024](#) schedule, which can be found in the Knowledge Library tab in [ACO-MS](#).

- ACOs may modify their ACO Participant and/or Skilled Nursing Facility (SNF) Affiliate Lists during the Change Request Cycle for PY 2024.
- New ACO-MS functionality now provides immediate beneficiary assignment estimates for each ACO Participant taxpayer identification number (TIN) at submission. Refer to the [Beneficiary Assignment Estimates in ACO-MS](#) tip sheet for more information.

Note: The final opportunity for ACOs to submit new change requests to add ACO participants and/or SNF affiliates is during the first Phase 1 request for information (RFI-1) submission period, which ends on August 1, 2023, at 12:00 p.m. (noon) ET.

Participation Options

ACOs may submit a Participation Options change request to:

- Change the ACO's selected beneficiary assignment methodology.
- Voluntarily elect a higher level within the BASIC track's glide path. ACO-MS will create a task for the ACO to submit draft repayment mechanism documentation after submitting.
- Select the minimum savings rate (MSR)/minimum loss rate (MLR) for the remainder of the ACO's agreement period (if advancing to a performance-based risk model).

ACOs automatically advancing from one-sided to two-sided risk model level (Level C, D or E) on the BASIC track's glide path will have a Participation Options change request automatically generated on their dashboard. ACO-MS will create a task for the ACO to submit draft repayment mechanism documentation after submitting the change request.

ACOs that are at Level A or B of the BASIC track and started their agreement period on January 1, 2023, have the option to elect to maintain participation in Level A or Level B of the BASIC track for the remainder of their agreement period. This option is available until Phase 2 RFI-2 closes on September 5, 2023, at 12:00 p.m. (noon) ET. Eligible ACOs will see a banner on their dashboard with this option.

For more information, refer to the [Overview of Participation Options in ACO-MS](#) tip sheet available in the Program Resources section in the Knowledge Library tab in [ACO-MS](#).

Repayment Mechanism

- An ACO that needs to establish a repayment mechanism can download a repayment mechanism documentation template or sample that will automatically populate some of the ACOs' information from within the repayment mechanism task in ACO-MS.
- ACOs establishing a repayment mechanism should submit draft repayment mechanism documentation during the initial submission period of the change request cycle deadline on June 15, 2023.

For more information, refer to the [Repayment Mechanism Arrangements Guidance](#).

SNF 3-Day Rule Waiver

- Eligible currently participating ACOs may apply for a SNF 3-Day Rule Waiver without renewing their participation in the Shared Savings Program.

- To apply, ACOs must elect to apply for a SNF 3-Day Rule Waiver application and add SNF affiliates by the Phase 1 RFI-1 deadline on August 1, 2023, at 12:00 p.m. (noon) ET.

For more information, refer to the [Skilled Nursing Facility 3-Day Rule Waiver Guidance](#).

Beneficiary Incentive Program (BIP)

- Eligible currently participating ACOs may apply to establish and operate a BIP. ACOs have the opportunity to submit a BIP application during Phase 2 of the application process.

For more information, refer to the [Beneficiary Incentive Program Guidance](#).

BPCI Advanced Model Year 7 Request for Applications

The Bundled Payments for Care Improvement Advanced (BPCI Advanced) Model started on October 1, 2018 and was originally planned to last 6 years. It has been extended for 2 additional years and will now end on December 31, 2025. CMS has released the BPCI Advanced Model Year (MY) 7 Request for Applications. Interested participants may apply through May 31, 2023, at 5:00 p.m. ET. Shared Savings Program ACOs are able to apply as a Model participant; submitting an application does not obligate applicants to participate in BPCI Advanced.

CMS will host a BPCI Advanced MY7 Application Process Office Hours informational session on Thursday, May 25th from 2:00-3:00 p.m. ET. Participants will gain insight on BPCI Advanced and the application process, as well as have an opportunity to ask questions. [Register here](#).

For more information on the BPCI Advanced Model, ACOs may visit the [BPCI Advanced: Applicant Resources webpage](#), review the [Model Overview Fact Sheet - Model Year 6 \(2023\)](#) (PDF), watch a short [Model Overview video](#), and subscribe to the [BPCI Advanced Listserv](#). For questions, please contact the BPCI Advanced Model Team at BPCIAdvanced@cms.hhs.gov.

Shared Savings Program and the Expiration of the COVID-19 PHE

The public health emergency (PHE) for coronavirus disease 2019 (COVID-19) was in effect starting in January 2020 and expired on May 11, 2023. In light of the expiration of the PHE declaration, CMS is highlighting policy changes relevant to the Shared Savings Program.

Application of the Medicare Shared Savings Program Extreme and Uncontrollable Circumstances (EUC) Policy to Shared Losses During the PHE

The PHE for COVID-19 was in effect from January 2020 through May 11, 2023, and shared losses for ACOs participating in performance-based risk tracks were fully mitigated under the Shared Savings Program EUC policy during this time. Since the PHE for COVID-19 was in effect for 5 months of 2023 (January through May), for ACOs in a performance-based risk track (the BASIC track levels C through E, or the ENHANCED track), any shared losses an ACO incurs for PY 2023 would be reduced by five-twelfths (or more if an ACO has assigned beneficiaries residing in counties affected by other EUCs in the last 7 months of the year). As a reminder of CMS' standing policy, an ACO in a performance-based risk track that voluntarily terminates its participation agreement with an effective date of termination on or before June 30, 2023, will not be liable for shared losses or eligible for shared savings for PY 2023. Please refer to the "30 Days' Advance Notice Required for Voluntary Termination" article below.

Program Calculations Adjusted to Exclude Payment Amounts for Episodes of Care for Treatment of COVID-19

CMS excludes from Shared Savings Program financial calculations all Parts A and B fee-for-service (FFS) payment amounts for an episode of care triggered by an inpatient service for treatment of COVID-19. CMS will identify an episode of care based on either: (1) discharges for inpatient services eligible for the 20 percent Diagnosis Related Group (DRG) adjustment, or (2) discharges for acute care inpatient services for treatment of COVID-19 from facilities that are not paid under the inpatient prospective payment system, such as Critical Access Hospitals (CAHs), when the date of discharge occurs within the PHE. CMS will define the episode of care as starting in the month in which the inpatient stay begins (as

identified by the admission date), including all months during the inpatient stay, and ending the month following the end of the inpatient stay (as indicated by the discharge date).

Because the PHE for COVID-19 expired on May 11, 2023, episodes of care for treatment of COVID-19 will be defined based on a discharge from eligible inpatient services on or before May 11, 2023. Any episodes of care for treatment of COVID-19, based on a discharge from eligible inpatient services that occurred on or before May 11, 2023, will be excluded from the relevant performance year and benchmark year calculations. Any episodes of care for treatment of COVID-19, based on a discharge from inpatient services that occurred after May 11, 2023, will be included in the relevant performance year or benchmark year calculations. Episodes of care for the treatment of COVID-19 will, accordingly, be included or excluded from the calculations of county expenditures for factors based on regional expenditures used in establishing, adjusting, and updating an ACO's historical benchmark based on discharge date. For additional information on how CMS adjusts Shared Savings Program calculations to exclude all Parts A and B FFS payment amounts for a beneficiary's episode of care for treatment of COVID-19, please refer to the [Specifications of Policies to Address the Public Health Emergency for COVID-19](#).

Quality Reporting

All Shared Savings Program ACOs were deemed affected by the PHE for COVID-19 under the program's EUC policy for quality for PYs 2022 and 2023 as defined under [42 CFR § 425.512\(c\)](#). For both years, ACOs will receive a minimum quality performance score equal to the equivalent of the 30th percentile Merit-based Incentive Payment System (MIPS) Quality Performance category score across all MIPS Quality Performance category scores, excluding entities/providers eligible for facility-based scoring. ACOs that are able to successfully report quality data will receive the higher of their own MIPS Quality Performance category score (adjusted for health equity for PY 2023, if applicable) or the applicable 30th percentile score. As such, all ACOs that qualify for shared savings for PYs 2022 and 2023 will be eligible to receive the maximum sharing rate for their track (or performance level within a track) and, for PY 2022, any shared losses determined to be owed to CMS using either a fixed (BASIC Track) or scaled loss rate (ENHANCED Track) will be fully offset by the EUC policy and any shared losses determined for PY 2023 will be reduced by a least five-twelfths.

For PY 2023, CMS will continue to use the MIPS EUC application to allow clinicians, groups, and virtual groups to request reweighting of one or more MIPS performance categories due to the COVID-19 PHE. The MIPS EUC Exception application for PY 2023 is now available and will close at 8:00 p.m. ET on January 2, 2024. For more information, please visit the [QPP Exception Applications webpage](#).

SNF 3-Day Rule Waiver

The Shared Savings Program has used the authority under Section 1899(f) of the Social Security Act (the Act) to waive Section 1861(i) of the Act to allow coverage of certain SNF services that are not preceded by a qualifying 3-day inpatient hospital stay. ACOs approved for a SNF 3-Day Rule Waiver continue to have the ability to use the waiver if all requirements are met. Additional information about the Shared Savings Program SNF 3-Day Rule Waiver can be found in the [Skilled Nursing Facility 3-Day Rule Waiver Guidance](#). Note that the Shared Savings Program SNF 3-Day Rule Waiver is separate and distinct from the waiver under Section 1812(f) of the Act, which was authorized as a result of the COVID-19 PHE, and which has been terminated with the expiration of the PHE.

Beneficiary Information Notification Requirement

Under the PHE for COVID-19, CMS exercised its enforcement discretion to adopt a temporary policy of relaxed enforcement in connection with the deadline for furnishing the standardized written beneficiary notifications required under [42 CFR § 425.312\(a\)](#) as long as the standardized written beneficiary notification is completed by the end of the current performance year. The relaxed enforcement of this requirement remained in effect for the duration of the PHE. The PHE expired on May 11, 2023.

More information on this requirement can be found in the new [Beneficiary Notification and Education Guidance](#) (PDF) now available in the [Marketing and Beneficiary Education Toolkit](#) (formally known as the Marketing Toolkit) in the Knowledge Library tab in [ACO-MS](#).

30 Days' Advance Notice Required for Voluntary Termination

As a reminder, an ACO must provide at least 30 days' advance written notice to CMS and to its ACO participants of its decision to terminate its Shared Savings Program agreement, along with the effective date of its termination.

ACOs must submit a termination request on or before June 1st to choose a termination effective date on or before June 30th, and December 1st to choose a termination effective date on or before December 30th. ACOs that choose a termination effective date on or before December 30th are not financially reconciled for purposes of determining shared savings. However, ACOs in a two-sided track/level that choose a termination effective date after June 30th are financially reconciled and may be liable for a prorated share of any determined shared losses. ACOs in a one-sided or two-sided track/level that choose a termination effective date of December 31st are financially reconciled and may qualify to receive shared savings or be liable for shared losses if applicable.

In order to notify CMS of the intent to voluntarily terminate the ACO, the ACO Executive or Authorized to Sign Contacts (primary or secondary) must submit a voluntary termination request in [ACO-MS](#). For step-by-step instructions, review the [Submitting a Voluntary Termination Notice in ACO-MS](#) tip sheet, found in the Program Resources section of the Knowledge Library tab in ACO-MS.

ACOs terminating their participation in the Shared Savings Program should download and review the [Medicare Shared Savings Program Voluntary Terminations](#) document, available in the Program Resources section of the Knowledge Library tab in ACO-MS, to learn about voluntary termination requirements ([42 CFR § 425.221](#)), close-out procedures, and payment consequences of early termination.

Seeking ACO Speakers for Summer Virtual Learning Collaboratives

The value-based care (VBC) Learning System is pleased to announce the summer virtual learning collaborative (VLC) series. The Learning System will host four VLCs in July and August, convening ACOs across the country to exchange ideas and collaborate on strategies to address health-related social needs (HRSNs) among their beneficiaries. CMS is seeking ACOs to participate in a panel discussion related to building HRSN-focused initiatives. Topics may include, but are not limited to, identifying beneficiary needs, ensuring leadership buy-in, building external partnerships, and establishing referral processes.

Does your ACO have a HRSN-focused story to share?

Please express interest by completing the [speaker interest form](#) by close of business Friday, May 19th. If your proposal is selected, a member of the VBC Learning System team will contact you to discuss a potential presentation. Please contact Juliana Conway (JConway@mathematica-mpr.com) with any questions.

Save the dates for the upcoming VLCs!

Registration details are forthcoming. ACOs are encouraged to register for the **one** meeting that works best for them. All meetings will occur virtually from 1:00–3:30 p.m. ET:

- July 13, 2023
- July 27, 2023
- August 10, 2023
- August 24, 2023

May CCLF Files

May CCLF files for the PY 2023 assignable or prospectively assigned beneficiaries have been made available to ACOs in the Data Hub tab of [ACO-MS](#).

The May delivery timeline for the CCLF files and 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 23 CCLF	Week of May 15 th	P.A****.ACO.ZCY23.Dyymmdd.Thhmsst	2023	CCLF delivered in May 2023 (zip)
PY 23 Beneficiary Exclusion and MBI XREF files	Week of May 15 th	P.A****.ACO.MBIY23.Dyymmdd.Thhmsst P.A****.BNEX.Y23.Dyymmdd.Thhmsst	2023	Excluded Beneficiary MBI XREF File delivered in May 2023 (txt) Beneficiary Data Sharing Exclusion File delivered in May 2023 (xml)

ACOs should refer to the [CCLF Information Packet \(IP\)](#), Version 36 (V36), and the [ACO and ACO-OS Data Exchange User Guide](#) (DEUG), V11, for additional information on the CCLF and Exclusion files. The CCLF IP is available on the [Program Guidance & Specifications webpage](#), and the DEUG can be found in the Knowledge Library tab in ACO-MS.

If you have any questions about ACO-MS or require technical assistance, click the SSP Helpdesk icon (located within the ACO-MS banner) or email SharedSavingsProgram@cms.hhs.gov.

EVENT ANNOUNCEMENTS

SSP Learning System Shared Learning Webinar: Caring for Patients with Alzheimer’s and Alzheimer’s Disease Related Dementias

THURSDAY, MAY 25, 2023, 3:00 P.M.–4:00 P.M. EASTERN TIME

- [Register Here](#)
- **Audience:** This event is open to all Shared Savings Program ACO staff. Team members supporting patients with Alzheimer’s Disease and Alzheimer’s Disease Related Dementias (AD/ADRD) or participating in care management efforts may be most interested in attending.
- **Description:** Join us on Thursday, May 25th at 3:00 p.m. ET for a webinar highlighting how ACOs care for patients with AD/ADRD. ACO presenters will discuss how their teams structure care management specific to patients with AD/ADRD, engage family and caregivers in a patient’s care, and support the daily care of patients with AD/ADRD. Attendees will have an opportunity to ask questions during the webinar.

SSP Learning System Shared Learning Webinar: Strategies for Reporting MIPS CQM

THURSDAY, JUNE 8, 2023, 3:00 P.M.–4:00 P.M. EASTERN TIME

- [Register Here](#)
- **Audience:** This event is open to all Shared Savings Program ACO staff. Team members supporting quality reporting efforts may be most interested in attending.
- **Description:** Join us on Thursday, June 8th at 3:00 p.m. ET for a webinar exploring ACO strategies for reporting MIPS Clinical Quality Measures (CQMs). Presenters from ACOs will discuss their experience in reporting MIPS CQMs for the Calendar Year (CY) 2022 reporting period. Discussion topics may include why ACOs decided to report MIPS CQMs versus electronic Clinical Quality Measures (eCQMs), approaches to data collection and aggregation, or implementation considerations such as building data infrastructure, training staff, and enlisting external partners. This webinar will mirror the Strategies for eCQM/CQM Reporting Webinar held on August 3, 2022—materials from that webinar are available in the Knowledge Library tab in ACO-MS [here](#). Attendees will have an opportunity to ask

questions to learn more about how ACOs overcame challenges they encountered as quality reporting implementation progressed.

ACO REACH Shared Learning Webinar Building Relationships with Community-Based Organizations

THURSDAY, JUNE 15, 2023, 2:00 P.M.–3:00 P.M. EASTERN TIME

- [Register Here](#)
- **Audience:** This event is open to all ACO Realizing Equity, Access, and Community Health (REACH) Model staff, Shared Savings Program ACOs, Kidney Contracting Entities (KCEs) and CMS Kidney Care First (KCF) Practices.
- **Description:** Join on us Thursday, June 15th at 2:00 p.m. ET for a webinar on building relationships between ACOs and Community-based Organizations (CBO). The webinar will highlight considerations and strategies for ACOs addressing patients' HRSN and health disparities by partnering with community-based social service organizations to provide additional supports and wrap-around care. The webinar will feature a REACH ACO and a CBO partner discussing their collaborative approach to addressing patients' social needs.

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 SSP 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

Quality Payment Program Service Center

QPP@cms.hhs.gov

Hours: Monday–Friday, 8:00 a.m.–8:00 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
- For hearing impaired customers, please dial 711 to be connected to a telecommunications relay service (TRS) Communications Assistant

[CCSQ Support Central](#): Request Support, Schedule a Call, Chat Support

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