

AT A GLANCE

UPCOMING DEADLINES

- **Phase 1 RFI-1**
Due: August 1, 2023, at 12:00 p.m. (noon) ET

EVENT ANNOUNCEMENTS

- **Registration Open for Summer Virtual Learning Collaboratives**
July 13th | 1:00–3:30 p.m. ET | [Register](#)
July 27th | 1:00–3:30 p.m. ET | [Register](#)
August 10th | 1:00–3:30 p.m. ET | [Register](#)
August 24th | 1:00–3:30 p.m. ET | [Register](#)
- **Shared Savings Program Application – Making the Most of Phase 1 RFI-1**
July 14th | 1:00–2:00 p.m. ET | [Register](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

- [2022 MIPS Final Score Preview: Now Available](#)
- [PY 2024 Change Request Cycle RFI-1: Actions Available](#)
- [How to Review Participation Options Report Applicable to PY 2024 in ACO-MS](#)
- [PY 2023 Final Historical Benchmark Report Packages for ACOs With an Agreement Beginning January 1, 2023: Available This Week](#)
- [Phasing Out the Shared Savings Program Telephone Support](#)
- [Updated Benchmark Estimation Calculator After the Expiration of PHE for COVID-19](#)
- [Governance and Leadership Digest: Now Available](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

2022 MIPS Final Score Preview: Now Available

CMS has opened the Final Score Preview period for the Merit-based Incentive Payment System (MIPS) to allow eligible clinicians an opportunity to review the 2022 MIPS final score, submit any concerns, and identify potential issues to CMS for evaluation before calculating payment adjustments for MIPS-eligible clinicians. ACOs are strongly encouraged to preview their final scores during the Final Score Preview to have any concerns addressed prior to CMS finalizing scores. CMS anticipates that final performance feedback, including MIPS payment adjustment information, will be available in August 2023.

- Shared Savings Program ACO Quality Payment Program (QPP) Security Official (SO) or QPP Staff User contacts in the [ACO Management System \(ACO-MS\)](#) can preview the ACO's final score based on performance under the Alternative Payment Model (APM) Performance Pathway (APP) by signing in to the [QPP website](#) using their ACO-MS username and password.

PY 2024 Change Request Cycle RFI-1: Actions Available

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](#) and review the *Participation Options Report* in ACO-MS.

During the Phase 1 first request for information (RFI-1) response period, which opens on July 11th at 12:00 p.m. (noon) Eastern Time (ET) and closes on August 1st at 12:00 p.m. (noon) ET, ACOs will have the final opportunity to:

- Add ACO participant and/or Skilled Nursing Facility (SNF) affiliate taxpayer identification numbers (TINs).
- Elect to apply for a SNF 3-Day Rule Waiver.

The [Requests for Information in ACO-MS](#) tip sheet provides information on how to respond to RFIs in ACO-MS.

How to Review Participation Options Report Applicable to PY 2024 in ACO-MS

CMS will be providing all ACOs with a *Participation Options Report* that is applicable for Performance Year (PY) 2024 in [ACO-MS](#) with the release of RFI-1 on July 11th at 12:00 p.m. (noon) ET in ACO-MS. The *Participation Options Report* has been revised for the PY 2024 Application and Change Request Cycle to include two new tabs for Beneficiary Assignment Estimates and Advance Investment Payments (AIP) estimates. Additionally, the Revenue-Repayment Mechanism tab has been revised. ACOs should review this report for any changes to their eligibility to participate in the program. This report is also designed to help ACOs evaluate future participation options.

For more information about the report, download the *PY 2024 Participation Options Report Data Dictionary*, which will be available with the release of RFI-1 in the Application Cycle subtab (via the information bubble), the Reporting tab (via the information bubble in the *Participation Options Report* tile), and the Knowledge Library tab in ACO-MS.

The *Participation Options Report* has six tabs:

- 50% ACO Composition
 - Provides ACOs with information on the Shared Savings Program participation history of the ACO participants on their latest ACO Participant List for the upcoming performance year.
- 40% Risk Check
 - Provides ACOs with information on whether the ACO meets the definition of experienced or inexperienced with performance-based risk Medicare ACO initiatives (as those terms are defined at [42 CFR § 425.20](#)) based on the latest version of the proposed ACO Participant List for the upcoming performance year.
- Revenue-Repayment Mechanism
 - Revised to provide more concise information about estimated and final repayment mechanism amounts for ACOs establishing a new repayment mechanism.
- Beneficiary Assignment Estimate (NEW)
 - Provides ACOs with assigned beneficiary estimates for the benchmark years and the upcoming performance year at the ACO level and the individual ACO participant TIN level. In the RFI versions of the report, rows for proposed and currently participating ACO participant TINs and rows at the ACO level, which summarizes beneficiary-level estimates across all TINs, will be displayed. Values in the ACO-level rows reflect ACO participants after accounting for all deficiencies (deficiency information is provided for all ACO participants). For example, for an ACO with an agreement level deficiency (Y) value, the ACO participant TIN will be included in the ACO-level row. However, for an ACO with an overlap deficiency (Y) value, the ACO participant TIN will not be included in the ACO-level row.
- AIP Estimate (NEW)
 - Provides ACO participant TIN-level and ACO-level information related to AIP to all initial applicants, inclusive of quarterly advance investment payment estimates.
- ACO Summary
 - Includes a new AIP eligibility column for initial applicants and combines information presented in other tabs to summarize an ACO's participation options and program eligibility.

Accessing the Participation Options Report

Option 1: Application Cycle subtab (Note that only information from the ACO Summary tab of the *Participation Options Report* is available through this method.)

- Navigate to the My ACOs tab on the left-side menu and select your ACO.
- Select the Application Cycle subtab.
- Select "2024" in the program year drop-down menu to access participation options information.

Option 2: *Participation Options Report* (Full *Participation Options Report* and all six tabs are available.)

- Navigate to the Reporting tab on the left-side menu.
- Select your ACO from the drop-down menu.
- Select “2024” in the program year drop-down menu to access information for PY 2024.
- Select the .xlsx format (the report is not available in .csv format).
- Select the *Participation Options Report* to download the report.

An updated version of the *Participation Options Report* will also be available at Phase 1 RFI-2 and Phase 1 Dispositions.

PY 2023 Final Historical Benchmark Report Packages for ACOs With an Agreement Beginning January 1, 2023: Available This Week

CMS released PY 2023 Final Historical Benchmark Report packages to ACOs with an agreement period start date of January 1, 2023, this week. The packages include an ACO's PY 2023 *Final Historical Benchmark Report* along with informational files for each of the ACO's three benchmark years: *Annual Assignment List Report*, *Annual Assignment Summary Report*, *Annual Aggregate Expenditure/Utilization Report*, *Annual Beneficiary Expenditure Utilization Report*, and *Annual Non-Claims-Based Payment File*.

CMS establishes an ACO's historical benchmark at the start of its agreement period, and the benchmark is based on the most recent three calendar years prior to the start of the ACO's current agreement period. For ACOs that received their final historical benchmark report package, CMS applied the benchmarking methodology that was finalized in the [December 2018 Final Rule](#) and codified at [42 CFR § 425.601](#). This historical benchmark report package is based on the PY 2023 ACO Participant List that your ACO certified and the assignment methodology your ACO selected for PY 2023.

Because of the timing of the *Preliminary Historical Benchmark Report*, certain data needed to calculate values for Benchmark Year 3 (BY3), which aligns with Calendar Year (CY) 2022, was not yet available at the time the preliminary report was produced in March 2023. The CY 2022 data, which is used in the *Final Historical Benchmark Report*, replaces CY 2021 data that was used for the *Preliminary Historical Benchmark Report*. ACOs with an agreement period that started prior to January 1, 2023, received their Adjusted PY 2023 Historical Benchmark Report Package in March 2023, and did not receive a Historical Benchmark Report Package this week because all the data needed to calculate their historical benchmarks was available in March 2023.

Phasing Out the Shared Savings Program Telephone Support

SSP Helpdesk support for the CMS Shared Savings Program via telephone number 1-888-734-6433 will end as of July 26, 2023. CMS will be launching a new and enhanced customer service system in [ACO-MS](#) to support and assist ACOs. Assistance for the CMS Shared Savings Program will continue to be available by clicking on the SSP Helpdesk icon in ACO-MS, or by submitting a ticket through the ACO Information Center via email at SharedSavingsProgram@cms.hhs.gov. Currently participating ACOs are encouraged to contact their ACO Coordinator for direct, one-on-one assistance.

Updated Benchmark Estimation Calculator After the Expiration of PHE for COVID-19

As described in the May 18, 2023 *ACO Spotlight Newsletter* (Issue 10), any episodes of care for treatment of Coronavirus Disease 2019 (COVID-19), based on a discharge from eligible inpatient services that occurred on or before May 11, 2023 (the expiration date of the COVID-19 Public Health Emergency (PHE)), 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.

Note that within the quarterly reports and performance year calculations, June 2023 will be the last month associated with any episodes of care for treatment of COVID-19 (that is, the month following the end of qualifying inpatient stays with discharge dates between May 1–May 11, 2023).

ACOs that plan to use the [Updated Benchmark Estimation Calculator](#), available in the Knowledge Library tab in [ACO-MS](#), to estimate their PY 2023 updated benchmark should continue to use quarterly values provided in *Aggregate Expenditure/Utilization Report* (EXPU) Tables 1A and 2A as inputs to the tool for all quarters of the year. The expenditures in these tables will reflect the exclusion of COVID-19 episodes for months through June 2023, where applicable, and will reflect no exclusions for months after June 2023. This mirrors the approach that will be used to calculate performance year expenditures for PY 2023 financial reconciliation.

CMS will continue to provide ACOs with tables in the EXPU, *Assignment Summary Report* (ASR), and *Assignment List Report* (ALR) that reflect the exclusion of COVID-19 episodes based on discharges that occurred on or before May 11, 2023, and assigned beneficiaries with COVID-19 diagnoses, in all PY 2023 quarterly report packages and in the PY 2023 financial reconciliation report package.

Governance and Leadership Digest: Now Available

The Value-Based Care (VBC) Learning System produced the [VBC Resource Digest: Governance and Leadership](#), which presents publicly available resources that capture evidence-based practices, promising approaches, and lessons learned related to delivering value-based care.

This edition of the digest features resources on designing an effective governance structure, engaging leaders in value-based care transformation, conducting strategic planning, and developing and fostering partnerships for community engagement.

The *VBC Resource Digest: Governance and Leadership* can be found in the Knowledge Library tab in ACO-MS. Previous digests on patient-centered care, provider engagement, care delivery, and health equity can also be found in the Knowledge Library by searching “digest.”

To provide feedback, email VBCLearningSystem@mathematica-mpr.com with the following subject line: VBC Resource Digest.

EVENT ANNOUNCEMENTS

Registration Open for Summer Virtual Learning Collaboratives

MULTIPLE DATES, 1:00 P.M.–3:30 P.M. EASTERN TIME

- **Please RSVP to one virtual learning collaborative (VLC) using the links below:**
 - July 13, 2023 | [Register Here](#) by June 29th
 - July 27, 2023 | [Register Here](#) by July 13th
 - August 10, 2023 | [Register Here](#) by July 27th
 - August 24, 2023 | [Register Here](#) by August 10th
- **Audience:** To promote collaboration during this meeting, all attendees must be directly affiliated with either an ACO or CMS. Third party vendors are not invited.
- **Description:** The VBC Learning System is pleased to invite you and your ACO colleagues to join a VLC this summer. Each VLC will convene ACOs across the country to connect with peers and collaborate on strategies to address Health Related Social Needs (HRSNs) among their beneficiaries. Meeting attendees will participate in virtual knowledge-sharing activities, an ACO panel discussion, and small group breakout rooms. Attendance is limited to ensure all interested ACOs have the opportunity to meaningfully connect with their peers through interactive breakout sessions. CMS invites each ACO to register for the meeting that best aligns with your team’s schedule. CMS requests you limit your enrollment to three participants per ACO; these three attendees may attend the same or different meetings, at their convenience. ACOs should prioritize staff who work on quality and performance improvement initiatives. Each VLC meeting will have a limit of 150 participants.

Shared Savings Program Application – Making the Most of Phase 1 RFI-1

FRIDAY, JULY 14, 2023, 1:00 P.M.–2:00 P.M. EASTERN TIME

- [Register Here](#)
- **Audience:** This event is open to all Shared Savings Program ACOs and applicants that are responding to the Phase 1 RFI-1.
- **Description:** Join us as CMS hosts an office hours webinar to assist applicants in responding to the Phase 1 RFI-1, which opens July 11th and closes August 1st at 12:00 p.m. (noon) ET.

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

Not for Public Dissemination: The ACO Spotlight Newsletter is a biweekly publication by CMS for ACOs participating in the Shared Savings Program. It is distributed by email only to ACO contacts listed in CMS' ACO-MS. This newsletter is not intended to establish CMS policy and is for informational purposes only for the sole use of the individual(s) to whom it is addressed, and individuals associated with their ACO. The newsletter is not intended for public release. The ACO Spotlight Newsletter is published, produced, and disseminated at U.S. taxpayer expense. If you have received this in error, please notify the sender immediately by emailing SharedSavingsProgram@cms.hhs.gov.

Section 508 Disclaimer: This document and information contained therein may not adhere to Section 508 Compliance standards and guidelines for accessibility by persons who are visually impaired. Those who are visually impaired should contact the ACO Information Center at 1-888-734-6433 (Option 1) for assistance.