

OCTOBER 4, 2023 | ISSUE 20

AT A GLANCE

UPCOMING DEADLINES

- **Managing Emergency Department Utilization Speaker Interest Due: October 13, 2023**
- **Phase 2 Submissions Due: October 30, 2023, at 12:00 p.m. (noon) ET**

EVENT ANNOUNCEMENTS

- **SSP Learning System Webinar: Facilitating Post-Acute Care Transitions to the Home**
October 24th | 3:00–4:00 p.m. ET | [Register](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

- [PY 2024 Change Request Cycle: Dispositions for Phase 1 Change Requests and Phase 2 Submission Period](#)
- [PY 2023 APM Performance Pathway Toolkit: Now Available in the QPP Resource Library](#)
- [Shared Savings Program PY 2022 Benchmark Public Use Files: Now Available](#)
- [Seeking ACO Speakers for November Webinar: Managing Patient Utilization of Emergency Department Services](#)
- [Case Study on Community Care Cooperative's Approach to Center Patient Experience When Addressing Health-Related Social Needs](#)
- [Case Study on Mission Health Partners' Approach to Meeting Patients' HRSNs with a Care Coordination Model](#)
- [Case Study on MetroHealth's Approach to Screening for and Addressing HRSNs](#)

PROGRAM ANNOUNCEMENTS AND RESOURCES

PY 2024 Change Request Cycle: Dispositions for Phase 1 Change Requests and Phase 2 Submission Period

On Wednesday, October 18, 2023, CMS plans to issue final dispositions for your ACO's Phase 1 change request submissions for Performance Year (PY) 2024. These final dispositions may include Participation Options, Repayment Mechanism, ACO Participant List, and Skilled Nursing Facility (SNF) Affiliate List change requests, as applicable. The dispositions will be labeled either "Approved" or "Denied" in the [ACO Management System \(ACO-MS\)](#).

Note: Dispositions for SNF 3-Day Rule Waiver applications will be issued at Phase 2 final dispositions.

How Do You Request a Reconsideration Review for Phase 1 Final Dispositions?

Pursuant to [42 CFR § 425.206\(b\)\(2\)](#) and [42 CFR part 425 subpart I](#), your ACO has the right to request a reconsideration review of a change request determination if it is not prohibited from administrative or judicial review under [42 CFR § 425.800](#). ACOs should request a reconsideration review only when they believe CMS has made an error in the initial determination. The reconsideration review process is not an opportunity for an ACO to seek an exception to CMS requirements or request relief from its own errors. For additional information on the reconsideration review request and process, please refer to the [Requesting Technical Assistance and Reconsideration Review Guidance](#).

Phase 2 of the Application Submission Period

Phase 2 of the application submission period will open on Thursday, October 19, 2023. During Phase 2, currently participating ACOs can elect to apply and submit narratives to establish and operate a Beneficiary Incentive Program (BIP), if applicable. If your ACO is submitting a BIP application, an authorized ACO contact must submit Phase 2 electronically through ACO-MS by 12:00 p.m. (noon) Eastern Time (ET) on Monday, October 30, 2023.

PY 2023 APM Performance Pathway Toolkit: Now Available in the QPP Resource Library

On September 27, 2023, CMS posted the [PY 2023 Alternative Payment Model \(APM\) Performance Pathway \(APP\) Toolkit](#) (zip). The PY 2023 APP Toolkit zip file includes the following documents: 2023 APP Toolkit Table of Contents, 2023 APP for MIPS APM Participants Fact Sheet, 2023 APP Quick Start Guide, 2023 APP Infographic, and 2023 APP Scoring Guide. The APP toolkit contains resources designed to help ACOs participating in the Shared Savings Program to successfully report quality data through the APP.

Shared Savings Program PY 2022 Benchmark Public Use Files: Now Available

On September 20, 2023, CMS released the *PY 2022 Number of ACO Assigned Beneficiaries by County* public use file (PUF). This PUF includes county and state identifiers, aggregate data consisting of total assigned beneficiaries by ACO for each county where at least one of their assigned beneficiaries resides, and total person-years by Medicare enrollment type. This standard analytical file 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. The *PY 2022 Number of ACO Assigned Beneficiaries by County* PUF is available on the [Number of Accountable Care Organization Assigned Beneficiaries by County webpage](#).

Seeking ACO Speakers for November Webinar: Managing Patient Utilization of Emergency Department Services

The Value-Based Care (VBC) Learning System for Shared Savings Program ACOs will host a webinar in November highlighting ACOs' strategies for managing patients' utilization of emergency department (ED) services.

Presentation topics may include, but are not limited to:

- Strategies to manage ED utilization, such as bolstering preventive services in primary and specialty care and improving care management;
- Patient-centered practices ACOs use to reduce avoidable ED utilization, such as education and accessible scheduling at primary and specialty care practices; and
- Approaches to analyze data to identify drivers of avoidable ED utilization.

Does your ACO have a story to share about managing ED utilization? Please express interest in presenting by emailing knilles@mathematica-mpr.com with the subject line "ED Utilization" and a brief description of how your ACO manages patients' ED utilization **by close of business on Friday, October 13th**.

Case Study on Community Care Cooperative's Approach to Center Patient Experience When Addressing Health-Related Social Needs

This case study from the VBC Learning System describes how Community Care Cooperative (C3), a Realizing Equity, Access, and Community Health (REACH) ACO, works with its Federally Qualified Health Centers (FQHCs) to screen for and address patients' health-related social needs (HRSNs) through internal staff expertise and referrals to community partners. C3 centers the patient experience by tailoring screening and referral workflows to each population's needs. C3's efforts to support clinical sites in addressing patients' HRSNs and expanding community capacity could be instructive for other ACOs working to provide whole-person care.

[Centering Patient Experience When Addressing Health-Related Social Needs: A Case Study on Community Care Cooperative](#) can be found by checking the Learning System resource type in the Knowledge Library tab of [ACO-MS](#).

Case Study on Mission Health Partners' Approach to Meeting Patients' HRSNs with a Care Coordination Model

This case study from the VBC Learning System describes how Mission Health Partners (MHP) designed its care coordination efforts and health information technology systems to address patients' HRSNs. MHP's efforts to address the nonmedical factors that affect health outcomes could serve as an example for other health care organizations seeking

ways to build or enhance organizational infrastructure to address HRSNs. MHP's experience might be particularly informative for other ACOs using or considering community-focused care coordination models.

[Meeting Health-Related Social Needs with a Care Coordination Model: A Case Study on Mission Health Partners](#) can be found by checking the Learning System resource type in the Knowledge Library tab of [ACO-MS](#).

Case Study on MetroHealth's Approach to Screening for and Addressing HRSNs

This case study from the VBC Learning System describes the development and implementation of the MetroHealth System's initiative to screen patients for HRSNs and make appropriate referrals to community-based organizations (CBOs) using an online platform. Through this initiative, MetroHealth was able to connect interested patients to social services that addressed their HRSNs; forge stronger community partnerships; and build a richer understanding of its patients, along with an evidence base to guide future work. This case study could be informative for organizations looking to establish or enhance programs that screen for HRSNs, refer interested patients to CBOs, and prioritize high-quality patient-centered care.

The [MetroHealth's Approach to Screening for and Addressing Health-Related Social Needs](#) case study can be found by checking the Learning System resource type in the Knowledge Library tab of [ACO-MS](#).

EVENT ANNOUNCEMENTS

SSP Learning System Webinar: Facilitating Post-Acute Care Transitions to the Home

TUESDAY, OCTOBER 24, 2023, 3:00–4:00 P.M. EASTERN TIME

- [Register Here](#)
- **Audience:** This event is open to all Shared Savings Program ACOs, REACH ACOs, Kidney Contracting Entities, and CMS Kidney Care First, and clinicians may be most interested in attending.
- **Description:** Join us for a webinar highlighting ACOs' strategies for facilitating patients' transitions from the hospital to the home. The event will feature a panel discussion among three Shared Savings Program ACOs: Cleveland Clinic Medicare ACO, Delaware Valley ACO, and Memorial Hermann ACO. These ACOs will discuss how their organizations identify a patient's path home based on risk-level; monitor post-acute admissions data to identify system-level needs; and develop interdisciplinary teams and partners to care for patients transitioning home.

CONTACT INFORMATION FOR ACOs

ACO Coordinator

For questions regarding the Shared Savings Program, **your ACO Coordinator is your first line of contact**. For further assistance, reach out to the SSP Helpdesk or Quality Payment Program (QPP) Service Center. Refer to the section below to determine which center to contact.

ACO Information Center

Click the SSP Helpdesk icon (located within the [ACO-MS](#) banner)

- Shared Savings Program operations and policy inquiries; technical inquiries related to program data, reports, and performance; 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, MACRA, CAHPS® for MIPS survey, CMS Web Interface, quality measures, quality reporting, and Promoting Interoperability measures
- 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.