

Frequently Asked Questions

What is a MSSP Track 1 ACO?

A MSSP Track 1 ACO is a group of providers who collaborate to provide higher quality care for Medicare beneficiaries, as well as reduce Medicare Parts A and B spending for those beneficiaries. CMS will give the providers a target spending amount for their aligned beneficiaries based on their historical spending. If the providers spend less than that target and meet quality requirements, they are eligible to keep a percentage of the savings. If the providers spend more than their target, they do not pay back the overage to CMS. The goal of MSSP Track 1 ACOs is to reduce health care spending and improve quality of care through clinician collaboration, care coordination, and emphasizing preventive care.

How are participants in MSSP Track 1 ACOs paid?

Clinicians who participate in MSSP Track 1 ACOs continue to be paid fee-for-service as usual. There won't be any change to their current claims submission process.

CMS will estimate a target spending amount for all Part A and B services furnished to MSSP ACO-aligned beneficiaries. This target will be based on historical spending amounts for these beneficiaries. If the MSSP ACO spends less than its target, it is eligible to keep up to 50% of the savings (these savings are called "shared savings"). Note: in order to receive shared savings, a MSSP ACO must meet a "minimum savings rate," meaning it must reduce savings by at least a certain amount (usually between 2% and 4%). The actual percentage of savings that will go to the MSSP ACO is based on quality performance. If the SCICN MSSP ACO receives savings, those savings will be distributed to you and other clinicians in the network based on quality performance.

As a participant in the SCICN ACO, what is my financial risk?

Track 1 of the MSSP is upside risk only. Participating clinicians won't take on any downside financial risk.

How is quality of care measured for MSSP Track 1 ACO participants?

MSSP ACOs report data to CMS for 31 quality measures from the following categories:

- 1) Patient and caregiver experience (8 measures)
- 2) Care coordination and patient safety (10 measures)
- 3) Preventive health (8 measures)
- 4) Clinical care for at-risk populations (including patients with depression, diabetes, hypertension, and ischemic vascular disease) (5 measures)

CMS calculates a quality score for each category by dividing the total points earned in a category by the total points available for the category. Then CMS calculates a final score by averaging the category scores. Each category score is given equal weight in this calculation.

In the first performance year, all measures are pay-for-reporting. In subsequent performance years, some measures shift to pay-for-performance. CMS establishes performance benchmarks based on national FFS data.

Frequently Asked Questions (cont.)

How is a MSSP Track 1 ACO's benchmark determined?

CMS will establish a benchmark using risk-adjusted average per capita expenditures for Parts A and B services for beneficiaries who would have been assigned to the MSSP ACO in each of the three calendar years prior to 2017. They trend forward each of the first 2 benchmark years' per capita risk-adjusted expenditures to third benchmark year dollars based on the national average growth rate in Parts A and B per capita FFS expenditures. The first benchmark year (2014) is weighted 10%, the second benchmark year (2015) is weighted 30%, and the third benchmark year (2016) is weighted 60%.

How does the SCICN MSSP Track 1 ACO plan to reduce spending?

The SCICN ACO plans to reduce spending through a number of strategies including:

- 1) An emphasis on preventive and primary care visits
- 2) Referring to a preferred list of high-quality, efficient post-acute care providers
- 3) Increasing care coordination and communication between providers

How do providers benefit from participating in a MSSP Track 1 ACO?

Participating in a MSSP ACO is a chance to receive financial rewards for providing higher-quality, lower cost care for patients. In addition, being in a MSSP ACO helps providers and practices better manage their patient population which can strengthen their ability to succeed under public and private value-based payment models.

Providers in MSSP ACOs receive preferential scoring under the Merit-Incentive Payment System (MIPS, which can help facilitate success. For example, MSSP ACO participants will automatically receive full credit for the Improvement Activities category. In addition, under the Advancing Care Information category, data reporting burden will be reduced for MSSP ACO participants because the ACO will handle much of the data submission process.

How are patients aligned ("attributed") to the SCICN ACO?

Beneficiary attribution or alignment to an ACO is tied to the delivery of primary care services. A beneficiary is assigned to an ACO based on the following process:

- 1) If the majority of a beneficiary's primary care services are provided by an ACO-participating Primary Care Physician, Physician Assistant, Nurse Practitioner, or Clinical Nurse Specialist
- 2) If Step 1 does not apply, but the majority of a beneficiary's primary care services are provided by an ACO-participating Specialist Physician
- 3) In addition to the above, beneficiaries can also identify their primary care provider as the person who coordinates the majority of their care. Designation of a primary care provider will supplement the attribution process.

What beneficiary information will be shared with the ACO? Who will have access to beneficiary information?

Medicare will share with the ACO information about beneficiaries' care, including dates of clinician visits, medical conditions, and prescription lists for the purpose of coordinating care. Only clinicians and staff will have access to beneficiary data; it will be protected and handled with care in accordance with federal regulations. If a patient does not want Medicare to share their health care information with the ACO for the purpose of coordinating care, the patient may call 1-800 MEDICARE (1-800-633-4227).