

# Shared Savings Program Policy & Procedure Manual PY 2023 Updates

## General Updates:

- Updated to reflect CMS preference for Shared Savings Program over MSSP
- Updates for clarity, consistency, and formatting

## Updates to Existing Policies:

### CPG-004: Non-Discrimination

- Updated to reflect CMS' inclusion of additional cohorts for purposes of non-discrimination.
- Updated to more accurately reflect ACO reliance on the practice to provide auxiliary aid and language assistance services, as this is the most common practice amongst Shared Savings Program ACOs.

### CPG-005: Beneficiary Discharge, Avoidance and Referrals

- Updated to more clearly reflect requirements and limitations around ACO referrals.
- Updated to more clearly reflect provider and practice obligations related to patient terminations.
- Updated to more clearly reflect ACO obligations following a patient termination.

### CO-002: ACO Compliance Officer Duties and Responsibilities

- Updated to include CMS liaison and notification responsibilities most commonly held by the Compliance Officer.

### CMO-001: Introduction

- Updated to more clearly stipulate the role of the Compliance Officer and Legal Counsel in reporting to law enforcement.

### DRP-006: Record Retention

- Updated to reflect the specific requirement to maintain records of remuneration paid or received pursuant to participation in the ACO.

### COM-001: ACO Communications and Material Review

- Updated to remove the requirement to submit materials for approval by CMS prior to release.
- Updated to specifically require the use of template materials related to Voluntary Alignment.
- Updated to include "Medicare.gov or any successor site" to match language utilized and preferred by CMS.

### COM-002: ACO Governance and Public Reporting Requirements

- Policy Name Change to include ACO Governance.

- Policy Updates to match new requirements for the ACO's public reporting webpage.
- Policy updates to include Governance requirements to highlight the need to ensure ongoing compliance due to natural attrition in a Governing Body after initial CMS approval during the application cycle.

#### **PVS-001: Compliance with HIPAA and DUA Requirements**

- Updated to highlight and ensure compliance with commonly missed elements of the Data Use Agreement.

#### **OPS-004: Internal Reporting on Cost and Quality Metrics**

- Updated to specifically include the annual Quality Reporting process and recent guidance released by CMS related to patient matching, parsing and data cleansing.

#### **OPS-005: Participant and Provider/Supplier List Updates**

- Updated to more accurately reflect recent trends in Medicare Revalidation processes.
- Updated to document ACO review the effect of Participant additions on ACO designation and eligibility for Advanced Incentive Payments.

#### **OPS-007: Initial Beneficiary Notifications**

- Updated to reflect changes in the Beneficiary Notification requirements.

#### **New in 2023**

#### **OPS-008: Advance Investment Payments**

This policy is only required for ACOs participating in Advance Investment Payments. While these payments are not yet available, this P&P has been included in 2023 to ensure it's availability when CMS makes these payments available in the future.