



NATIONAL ASSOCIATION OF
Community Health Centers®

MEDICARE SHARED SAVINGS PROGRAM ADVANCE INVESTMENT PAYMENT WEBINAR SERIES



Webinar 2: MSSP AIP Application and Q&A

Tuesday, May 23rd 1-2pm ET



THE NACHC MISSION

America's Voice for Community Health Care

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.



NACHC Quality Center



Cheryl Modica

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Design & Learning



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Manager,
Transformation

MEDICARE SHARED SAVINGS PROGRAM ADVANCE INVESTMENT PAYMENT WEBINAR SERIES



Webinar 2: MSSP AIP Application and Q&A

Tuesday, May 23rd 1-2pm ET

Who can see your messages? Recording On

To: Hosts and panelists

Type: Hosts and panelists

Everyone

Unmute Stop Video Participants 2 Chat Share Screen Record Reactions Leave

During today's session:

- Questions:** Throughout the webinar, type your questions in the chat feature. Be sure to select "Everyone"! There will be Q&A and discussion at the end.
- Resources:** If you have a tool or resource to share, let us know in the chat!

MSSP AIP Webinar Series



Missed webinar #1? No problem!

Access the [slides](#) and [recording](#) that provide an overview of the Medicare Shared Savings Program (MSSP) Advance Investment Payment (AIP) and how it can advance the value-based care journey of health centers, PCAs, and HCCNs.

NACHC Resources to Support your VBC Transformation

As your health center considers the MSSP AIP, or other value-based care options, leverage NACHC's FREE resources:

- **Value Transformation Framework:** An organizing framework to support health center systems change and advancement toward value-based care
- **VTF Assessment:** An assessment tool to measure organizational progress in 15 Change Areas for transformation
- **Elevate National Learning Forums:** Live, virtual learning opportunities with peer exchange focused on topics relevant to value-based care transformation
- **Online Learning Platform** with resources to support value-based care transformation:

Action Guides

Reimbursement
Tips

Webinars

eLearning
Courses

Microlearnings



Resources target ***different levels of health center readiness***, provide ***skill development opportunities*** for the health center workforce of the future, and offer an ***actionable value-based care transformation strategy*** that supports and complements the work of PCAs, HCCNs, and CINs.

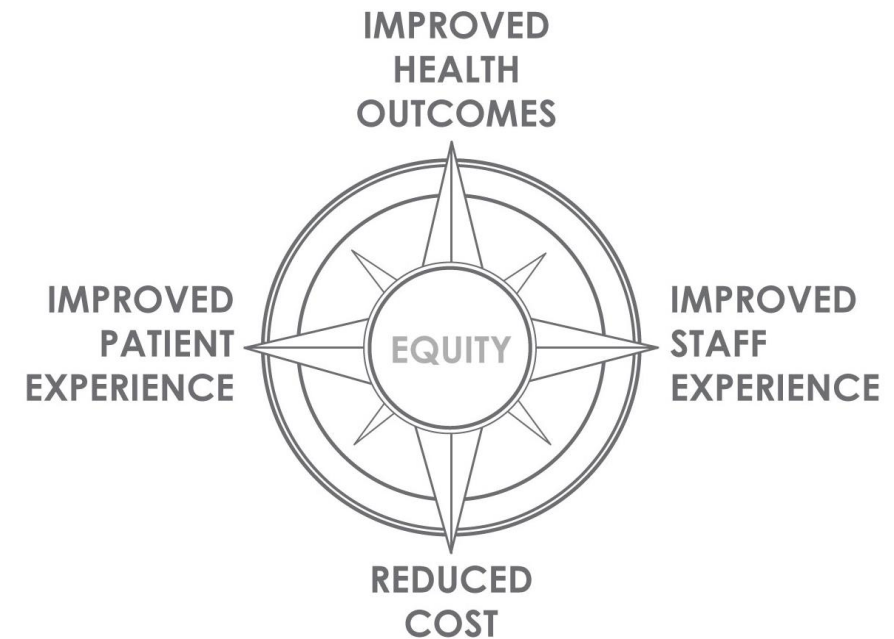
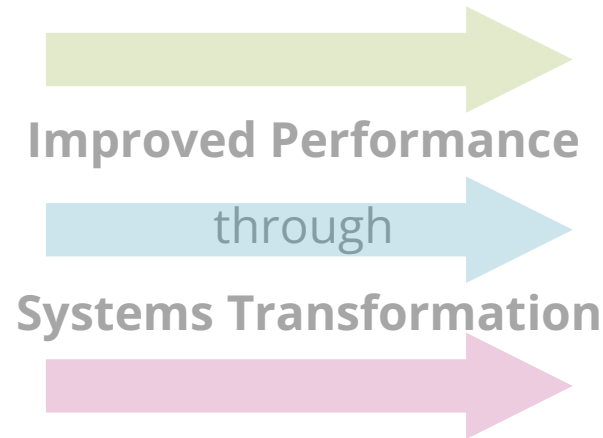
The Value Transformation Framework

Value Transformation Framework

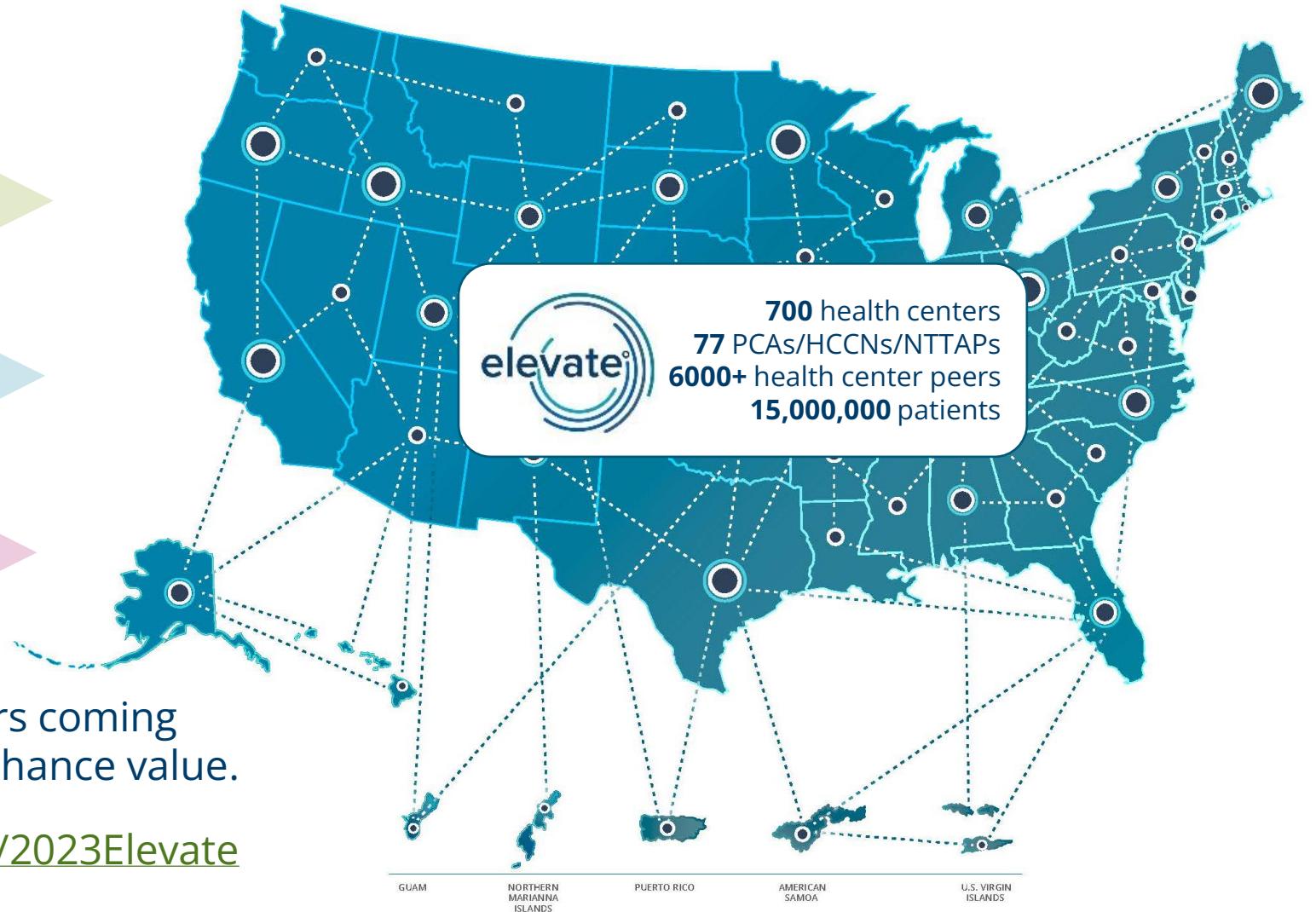
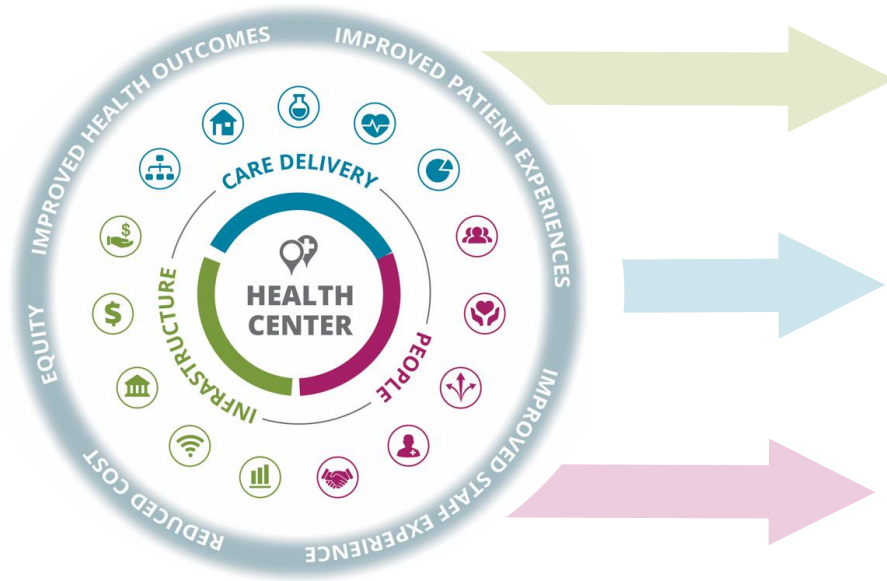


An organizing framework to guide health center systems change

Quintuple Aim Goals



Elevate National Learning Forum



A national community of health centers coming together to transform systems and enhance value.

Registration is FREE: <https://bit.ly/2023Elevate>

Featured Speaker



Heidi Robertson-Cooper, MPA
President
Health Care Advisors

Heidi Robertson-Cooper, MPA served over ten years in health care, focusing on primary care policy, value-based payment, and delivery system redesign impacting primary care and the safety net community. Before starting HRC Health Care Advisors, she served in leadership roles for the Missouri Primary Care Association, MissouriHealth+, the American Academy of Family Physicians, and a health center in Northeast Missouri. In these roles, she oversaw efforts to influence primary care delivery and payment systems reform, develop resources assisting primary care physicians in achieving professional success in all practice settings, and provide effective value-based practice transformation and performance improvement support for primary care and community health centers.



2024 Medicare Shared Savings Program:

Understanding the Application Process - What Health Centers Needs to Know

Agenda

1.

Recap of 2024 MSSP
Advance Investment
Payment Program

2.

Timeline

3.

Participation
Considerations – What
to Expect and When

4.

Key Next Steps

Opportunity Overview: Medicare Shared Savings Program Advance Investment Payment (AIP) Model

- Non-competitive Application Process
- Program begins in 2024 with a Five-Year Agreement Period
- AIP offers eligible ACOs advance shared savings payments
- Goal is to build the infrastructure needed to succeed in the program and promote equity by holistically addressing beneficiary needs, including social needs.
- AIP funds will be recouped from earned shared savings in an ACO's current five-year agreement period, if a balance persists
- 2025 Performance Year

MSSP AIP: Three Funding Sources



Upfront infrastructure
funding

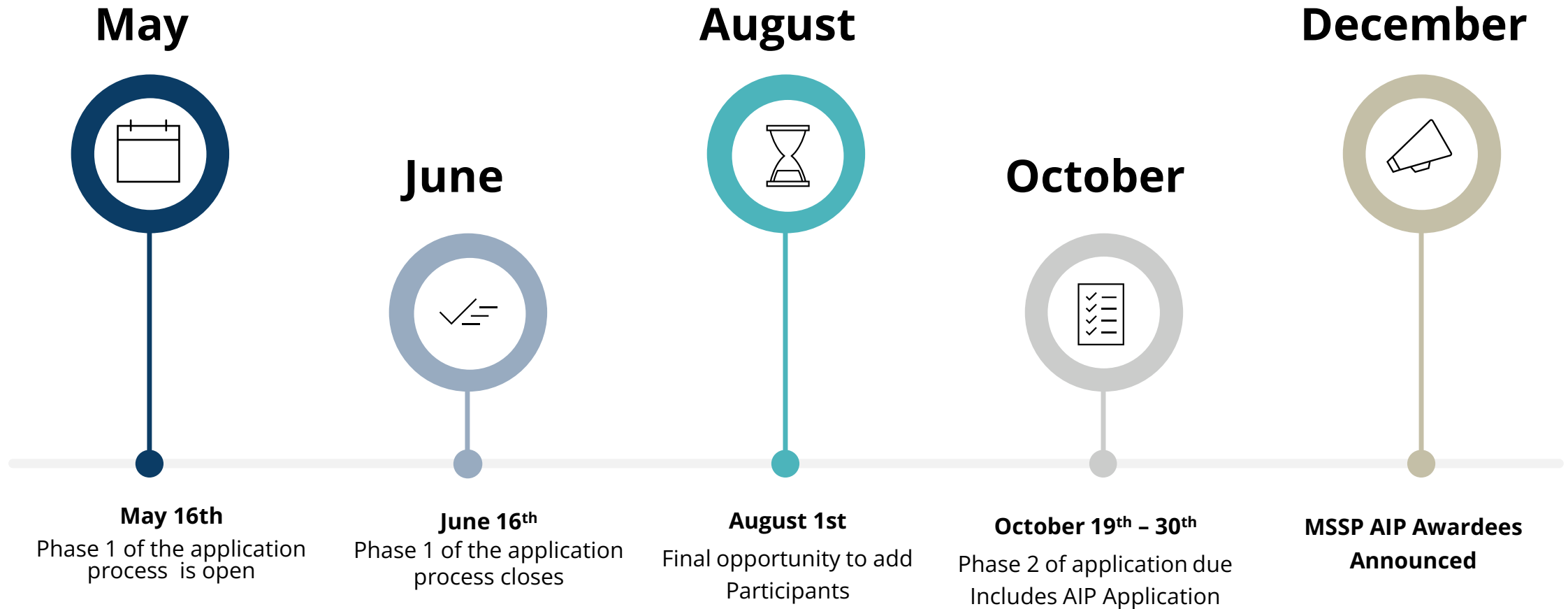


Per beneficiary per
quarter payments



Shared savings

Key Timeline: CMS MSSP AIP Application Timeline



Phase 1: What You Need to Know

May 18, 2023 - June 16, 2023

What Should My Health Center Expect During the Application Process?

Understanding of ACO's Operating Model

- Mission and value alignment
- Operational and care delivery requirements
- Funds distribution
- Data use
- Governance



Participation Agreement

- Key requirement for ACO to CMS
- Due before June 16th



Data Submission

- Health Center TIN and legal business entity
- Due before June 16th

AIP Funding Uses

Increased Staffing

- Staff to support care delivery for the ACO:
 - Care manager
 - Community Health Workers
 - Physician or Nurse Practitioner

Provision of Accountable Care for Underserved Beneficiaries

- Services to support addressing social social risk factors:
 - Medically tailored meals post discharge,
 - Moving expenses,
 - Employment related services

Healthcare Infrastructure

- Infrastructure supporting data aggregation, care coordination and population health:
 - HIT investments
 - Closed loop referral tools to connect to CBOs
 - Claims analytics

Things to Know and Ask

Track Selection & Attribution Methodology	<ul style="list-style-type: none">• BASIC Track: A or B• Prospective or Retrospective Attribution
Expectations	<ul style="list-style-type: none">• Does the ACO align with my health center's mission and values?• What is the ACO expecting of my health center to participate?• As a participant, what should I expect from the ACO?
Attribution Estimate	<ul style="list-style-type: none">• When will these be shared?• How often will I receive the list?
Fund Distribution	<ul style="list-style-type: none">• AIP Funding• Shared Savings Distribution• Does the fund distribution model reflect investment in community health centers?



ACO Participation and Infrastructure Payments



Use of Technology
and Analytics

Claims, cost and
utilization to inform
care delivery



Preventive
Activities

Annual Wellness Visits
Closing Care Gaps



Care Management

Identifying and
engaging high-risk
patients



Transitions of Care

Managing transitions

How is the ACO Equipping you for Success?

01

Medicare Specific Data Analytics

Data and analysis based on incoming Medicare data including identification of high-risk patients

02

Training and Technical Assistance

Training & data for CHC targeted care coordination, care management and for closing care gaps

03

Alignment with Current Initiatives

Strategy aligns with health center's population health analytics, finds synergy with other initiatives and mission alignment.

04

Equipping for Care Management and Coordination

Data and tools for effective transitions of care from Hospital based care to CHC primary care

Other Considerations: Governance and Compliance

Board

- At least 75 percent controlled by its ACO participants
- Expectations and time commitment
- Health center representation

Committees

- Compliance
- Finance
- Quality
- Beneficiary Engagement
- HIT

Compliance

- AIP Fund Use
- Patient Notification
- Marketing


Participation Agreement

Agreement ensures requirements and expectations of participation are understood. Common elements include:

- Duration of agreement
- ACO responsibilities
- CMS responsibilities
- Financial arrangements
- Quality reporting and performance measures
- Termination provisions
- Confidentiality and data sharing
- Dispute resolution



Participation Data

- Information to gather:
 - Health center billing Tax Identification Number (TIN)
 - Health Center legal business name (LBN) as show in Provider Enrollment, Chain, and Ownership System (PECOS)
- Strongly suggest gathering:
 - Provider Transaction Access Number (PTAN)
 - CMS Certification Number (CCN)
 - Provider Identification Number (PIN)
-  Information must match what is shown in PECOS



Important Dates

May – June 16th

- Participation Agreements Due
- Data Request Due: TIN and Legal Business Name

July 11th – August 1st

- Final opportunity to **join** an ACO

August 22nd – September 5th

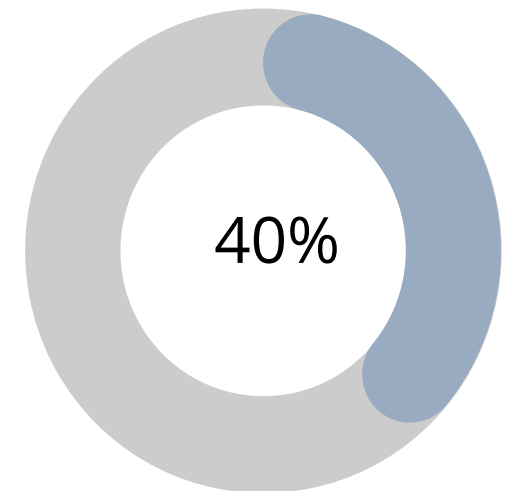
- Final opportunity to **remove** your participation with the ACO

October 18th

- Final attribution list
- AIP Eligibility and Funds

What if I'm already participating in an ACO?

- Less than 40 % of the ACO's participants participated in a performance-based risk Medicare ACO initiative in each of the five performance years
- Primary care providers can only participation in one ACO at a time
- Consider mission and values alignment with current ACO
- Review Participation Agreement with current ACO
- Know that you have options...



Four Key Next Steps

One	<ul style="list-style-type: none">• Identify Health Center staff member to serve as the liaison with the ACO
Two	<ul style="list-style-type: none">• Review Participation Agreement and Understand Requirements
Three	<ul style="list-style-type: none">• Gather Health Center TINs and CCNs Matching PECOS
Four	<ul style="list-style-type: none">• Seek Board Approval, if needed

Q & A

Heidy Robertson-Cooper, MPA

HRC Healthcare Advisors, LLC

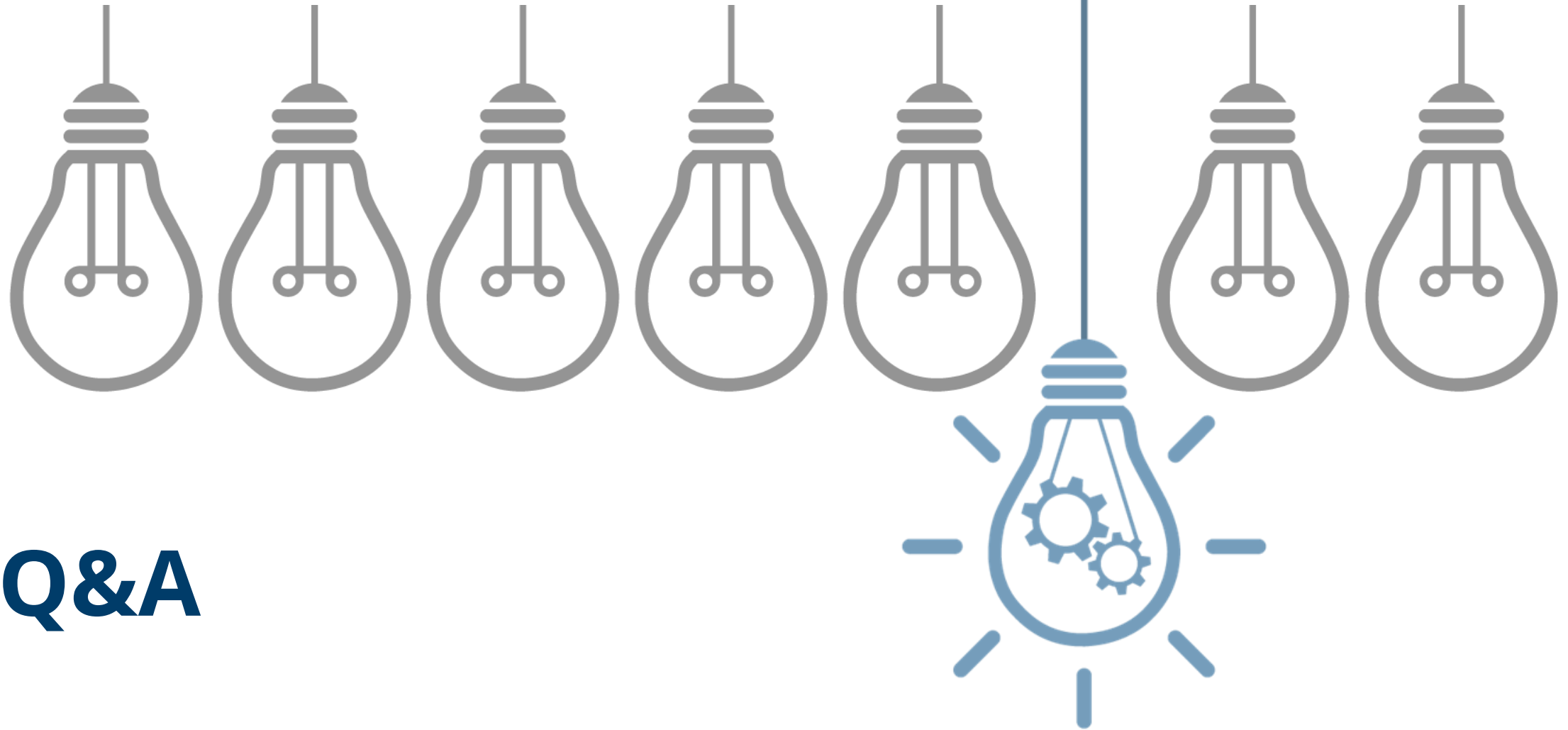
Heidy@HRC-Advisors.com

Thank You

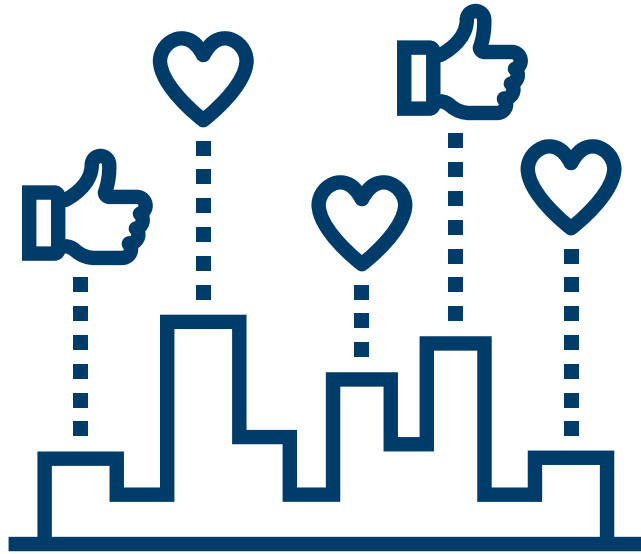
Heidy Robertson-Cooper, MPA

HRC Health Care Advisors, LLC

Heidy@HRC-Advisors.com



Q&A



Provide Us Feedback

FOR MORE INFORMATION CONTACT:

qualitycenter@nachc.org

Cheryl Modica

Director, Quality Center

National Association of Community
Health Centers

cmodica@nachc.org

301.310.2250

**SHARE YOUR
FEEDBACK**

Don't forget! Let
us know what
you thought
about today's
session.

Elevate Forum
Topic: Value-Based Care

June 13, 2023
1:00 – 2:00 pm ET

Appendix



Value Transformation Framework (VTF) & Elevate Resources

Value Transformation Framework

The Value Transformation Framework (VTF) is *an organizing framework* to guide health center systems change

- ***Supports change*** in many parts of the health center simultaneously
- ***Organizes and distills evidence-based interventions*** for discrete parts of the systems called 'Change Areas'
- ***Incorporates evidence, knowledge, tools and resources*** relevant for action within different parts of the system, or Change Areas
- ***Links health center performance to the Quintuple Aim***



The Value Transformation Framework

INFRASTRUCTURE

IMPROVEMENT STRATEGY
Define vision, goals, and action steps that drive transformation and improved performance.

HEALTH INFORMATION TECHNOLOGY
Leverage health information technology to track, improve, and manage the Quintuple Aim.

POLICY
Pursue decisions, plans, and actions that help secure support and resources for health centers and expand access for underserved populations.

PAYMENT
Utilize value-based and sustainable payment methods and models to facilitate care transformation.

COST
Address the direct and indirect expense of delivering comprehensive primary care to health center patients while considering the total cost of care.

CARE DELIVERY

POPULATION HEALTH MANAGEMENT
Use data on patient populations to target interventions that advance the Quintuple Aim.

PATIENT-CENTERED MEDICAL HOME
Employ a model of care that transforms the delivery of primary care into a comprehensive, patient-centered system focused on high quality, accessible, and coordinated care.

EVIDENCE-BASED CARE
Make patient care decisions using clinical expertise and best-practice research integrated with patient values and self-care motivators.

CARE COORDINATION AND CARE MANAGEMENT
Facilitate the delivery and coordination of care for high-risk and other patient segments through targeted services, provided when and how needed.

SOCIAL DRIVERS OF HEALTH
Address the social, economic, and environmental circumstances that influence patients' health and the care they receive.

PEOPLE

PATIENTS
Intentionally and actively incorporate the patient perspective into governance, care system design, and individual care.

CARE TEAMS
Utilize groups of staff with different skills to work together to deliver and improve care, offering a wider range of services more efficiently than a provider alone.

GOVERNANCE AND LEADERSHIP
Apply position, authority, and knowledge of governing bodies (boards) and leaders to support and advance the center's transformation goals.

WORKFORCE
Leverage a trained and fully engaged staff to successfully address the health center's mission and goals, with optimal joy in work.

PARTNERSHIPS
Collaborate and partner with external stakeholders to pursue the Quintuple Aim.

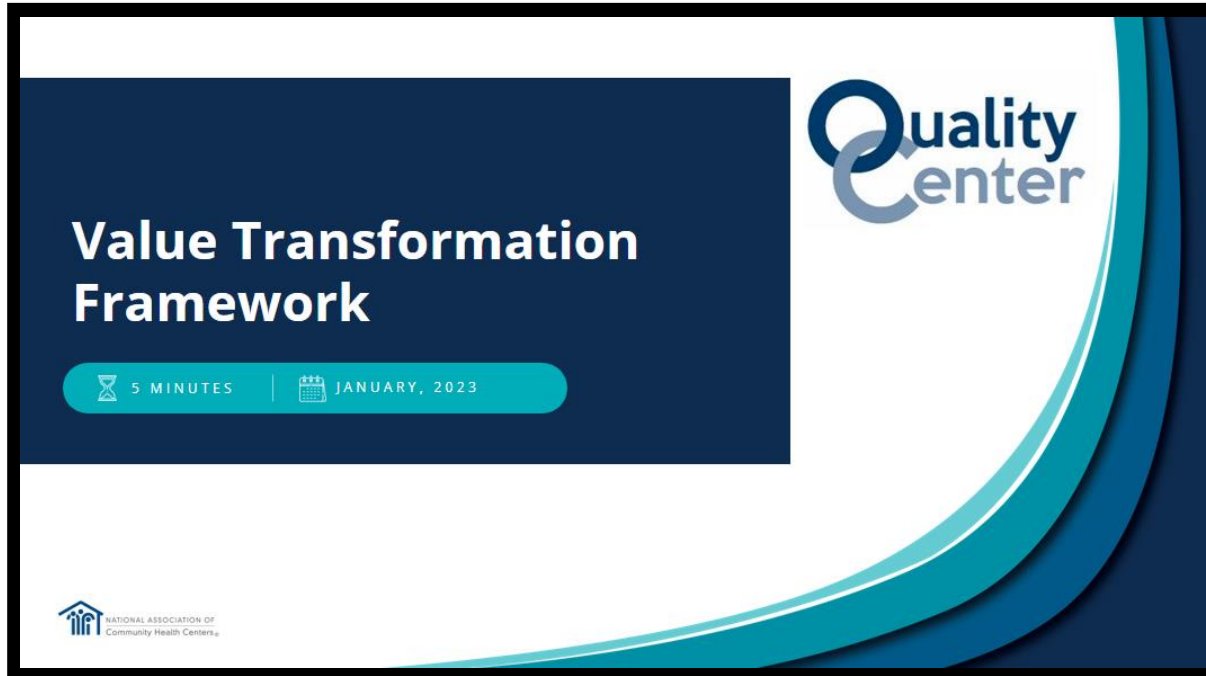
15 Change Areas organized by 3 Domains:

Infrastructure: the components, including health information systems, policies, and payment structures, that build the foundation for reliable, high-quality health care

Care Delivery: the processes and proven approaches used to provide care and services to individuals and target populations, such as evidence-based care and social drivers of health

People: the stakeholders who receive, provide, and lead care at the health center, as well as partners that support the goals of high-value care

Learn More About the VTF: *NEW* eLearning Modules



The screenshot shows the cover of an eLearning module titled "Value Transformation Framework". The cover features the Quality Center logo in the top right corner. The title "Value Transformation Framework" is prominently displayed in white text on a dark blue background. Below the title, there are two teal buttons: one with an hourglass icon and the text "5 MINUTES", and another with a calendar icon and the text "JANUARY, 2023". In the bottom left corner, there is a small logo for the National Association of Community Health Centers.

eLearning - Value Transformation Framework

START COURSE

Health Centers are complex systems that have many important processes to carry out and often limited resources. The VTF is an **organizing framework** that guides health center transformation within this complexity.

<https://www.youtube.com/watch?v=WcfWczRoYY0>

VTF Assessment: Use To Drive Transformation

INFRASTRUCTURE	CARE DELIVERY	PEOPLE
IMPROVEMENT STRATEGY Effectively and routinely measure and communicate information about the quality, value, and outcomes of the health care experience and use this information to drive improved performance.	POPULATION HEALTH MANAGEMENT Use a systematic process for utilizing data on patient populations to target interventions for better health outcomes, with a better care experience, at a lower cost.	PATIENTS Intentionally and actively incorporate the patient perspective into governance, care system design, and individual care.
HEALTH INFORMATION TECHNOLOGY Leverage health information technology to track, improve, and manage health outcomes and costs.	PATIENT-CENTERED MEDICAL HOME Employ a model of care that transforms the delivery of primary care into a comprehensive, patient-centered system focused on high quality, accessible, and coordinated care.	CARE TEAMS Utilize groups of staff with different skills to work together to deliver and improve care, offering a wider range of services more efficiently than a provider alone.
POLICY Pursue decisions, plans, and actions that help secure support and resources for health centers and expand access for underserved populations.	EVIDENCE-BASED CARE Make patient care decisions using a process that integrates clinical expertise and best-practice research with patient values and self-care motivators.	GOVERNANCE AND LEADERSHIP Apply position, authority, and knowledge of leaders and governing bodies (Boards) to support and advance the center's people, care delivery processes, and infrastructure to reach transformational goals.
PAYMENT Utilize value-based and sustainable payment methods and models to facilitate care transformation.	CARE COORDINATION AND CARE MANAGEMENT Facilitate the delivery and coordination of care and manage high-risk and other subgroups of patients with more targeted services, when and how they need it.	WORKFORCE Leverage a trained and fully engaged staff to successfully address the health center's mission and goals, with optimal joy in work.
COST Effectively address the direct and indirect expense of delivering comprehensive primary care to health center patients while considering the total cost of care for attributed patients.	SOCIAL DRIVERS OF HEALTH Address the social and environmental circumstances that influence patients' health and the care they receive.	PARTNERSHIPS Collaborate and partner with external stakeholders to pursue the Quintuple Aim.

2023 Refresh

VTF Assessment 2.0

- ✓ Still only 15 questions – 1 for each Change Area
- ✓ Refreshed to reflect current state of value-based care

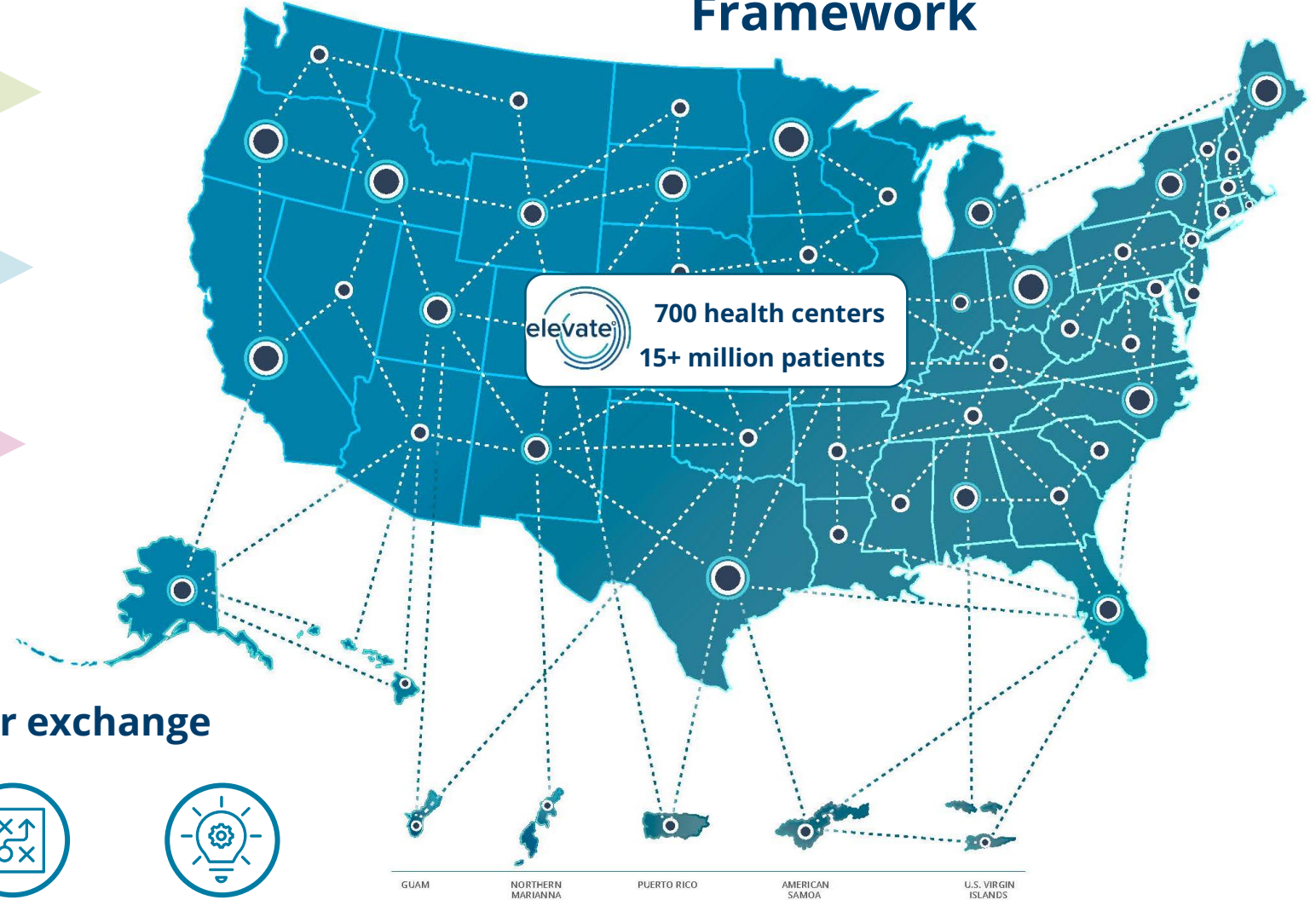
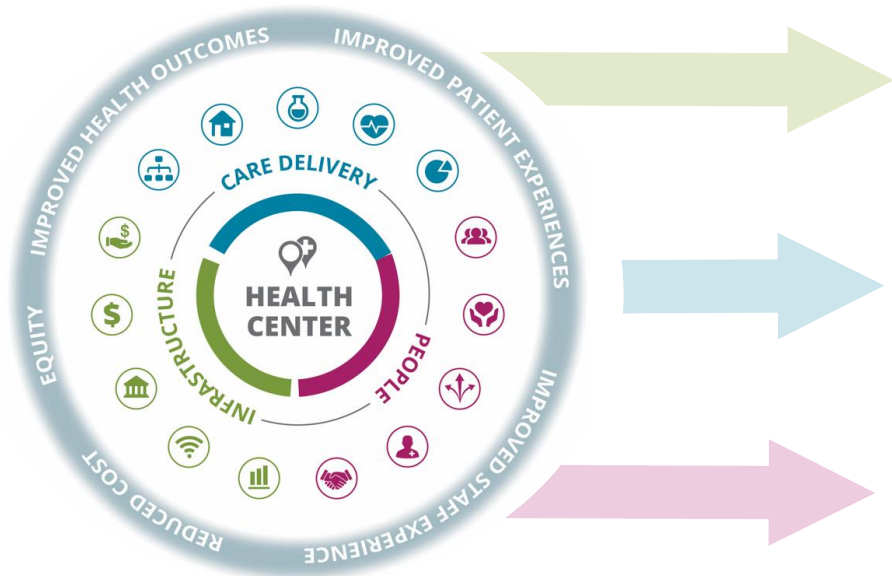


reglantern.com/vtf

- ✓ Assess organizational progress in 15 areas of systems change important to value transformation.
- ✓ Recommended that 3 or more health center staff complete the assessment to get a balanced perspective of organizational progress in areas of systems change

Elevate Learning Forum

Guided application of the Value Transformation Framework



National learning forum and peer exchange

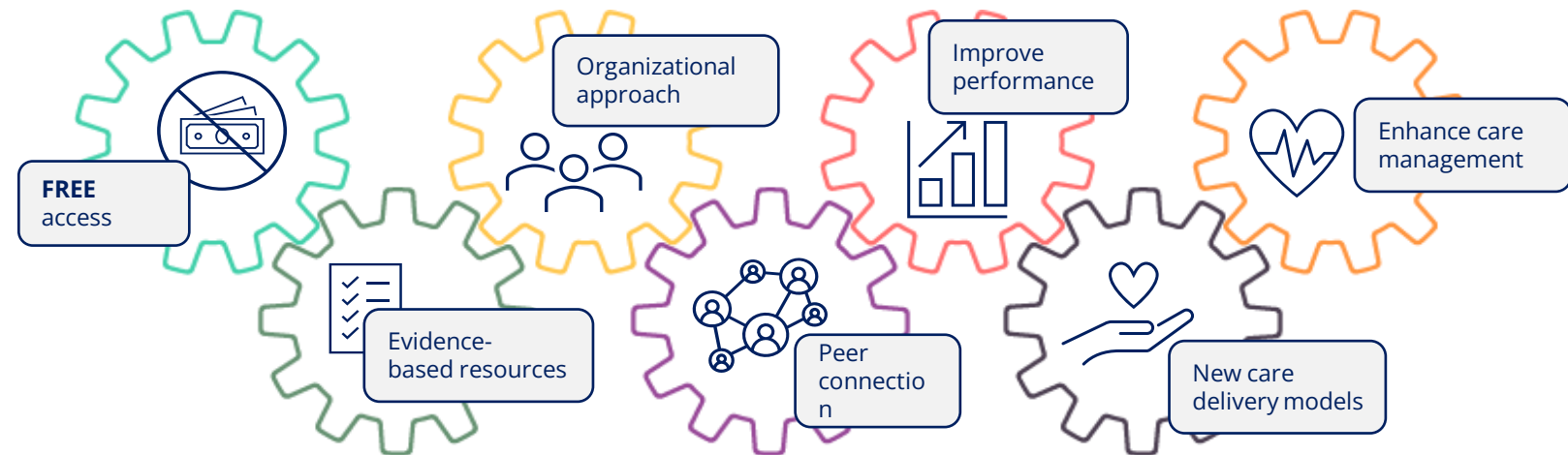
- 
COLLABORATE
- 
LEARN
- 
SHARE
- 
CREATE
- 
INNOVATE

WHY participate in Elevate?

- **FREE access** to transformation resources, tools, and learning
- **Save time!** Elevate does the 'lift' of distilling vast evidence-based information into 'bite-size' actionable, easy-to-digest resources
- **Can be shared** across your organization, bringing staff together using a common learning approach with open access to all
- **Connect with peers** across the nation to explore, share, learn, and innovate
- **Improve measures of performance**⁺ and Quintuple Aim goals through systems transformation
- **Explore new ways of working and delivering care** and work to **enrich patient and staff experience**
- **Build/enhance care management programs** to improve patient outcomes and **generate revenue to support transformation**

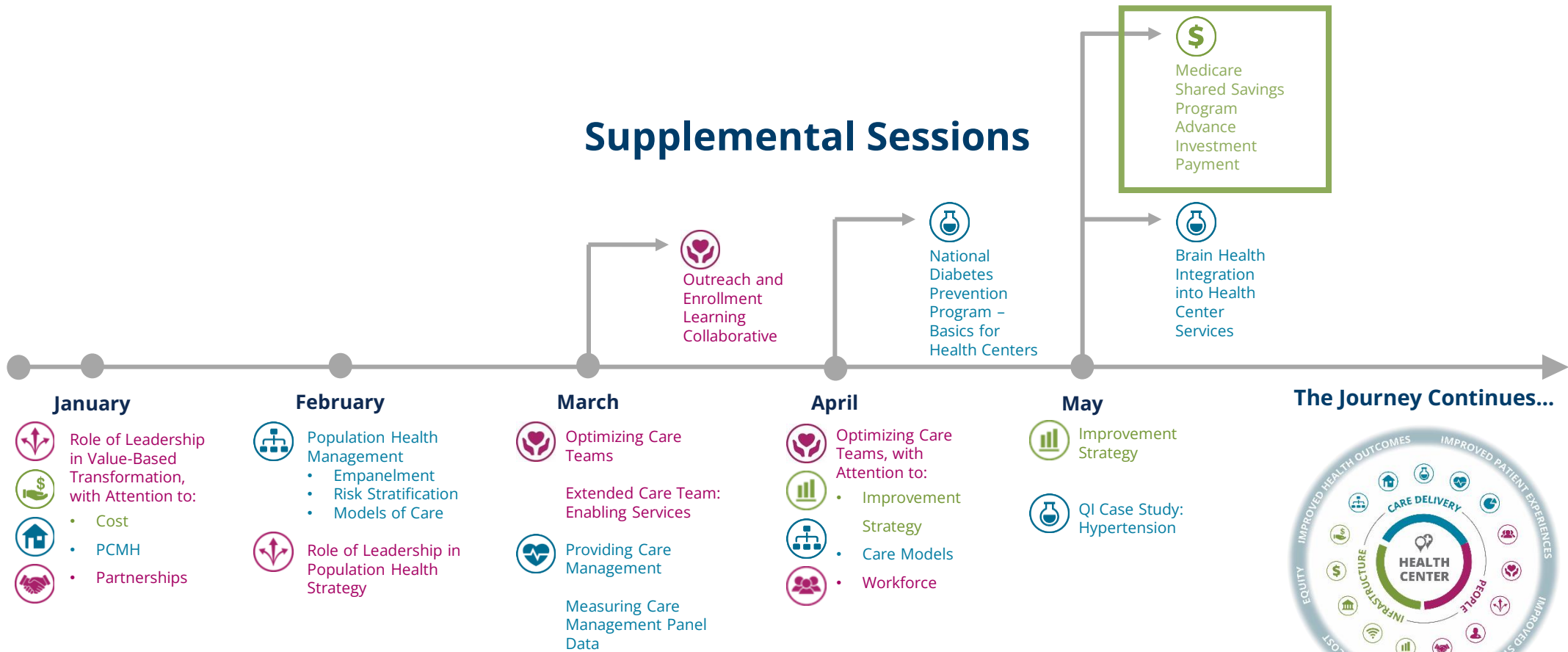


*An organizing approach
in a changing world*



Elevate Journey 2023

Supplemental Sessions



Core Elevate Learning Forums

Enhance VTF Application Through Elevate



National Learning Forum:
Guided application of the VTF



Register

<https://bit.ly/2023Elevate>



Assess

Ideally 3+ staff complete the VTF Assessment

<https://reglantern.com/vtf>



Engage: Monthly Forums & Supplemental Sessions

registered participants



Access: Online Resources

<https://nachc.docebosaa.com/learn/signin>

MSSP AIP Webinar #2

Appendix

CMS MSSP AIP Links

[Advance Investment Payments At-a-Glance](#)

[CMS MSSP Webpage](#)

[CMS MSSP 2024 Application Timeline](#)

[Area Deprivation Index \(ADI\)](#)

[How to Complete ACO Management System \(ACO-MS\) Registration](#)

[Application Reference Manual Advance Investment Payments Guidance](#)

[ACO Participant List and Participant Agreement Guidance](#)

ACO Participation Considerations



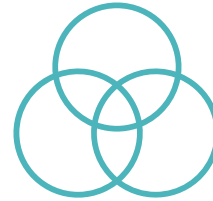
Do you have time and resources to joint an ACO?

- 01.**
- Quality Improvement Staff
 - Care management or coordination staff infrastructure
 - Transitions of Care
 - Population Health Analytics



Medicare Patient Mix

- 02.**
- Attribution is key
 - Payer mix
 - How well does your patient panels translate into attributed members?
 - Area Deprivation Index



Program and Initiative Alignment

- 03.**
- Value-based Care Strategy
 - UDS
 - Medicaid Managed Care
 - Medicare Advantage
 - State-based Initiatives



ACO Partners

- 04.**
- Identify mission and value-aligned partners
 - Power in primary care
 - Influx of Primary Care “Enablers”

Application Phases

Phase 1: MSSP

1. Gain Access to the ACO Management System
2. Shared Savings Track Selection
3. Submit Participant List
4. Submit Signed Participation Agreements
5. Select Assignment Methodology
6. Receive Immediate beneficiary assignment estimates for each ACO Participant TIN at submission
7. Two Requests for Information (RFI) to correct any deficiencies

Phase 2: AIP

1. ACO Information
2. ACO's governing body and organizational chart
3. Governing body narrative
4. AIP supplemental information, inclusive of spend plan
5. One RFI to correct any identified deficiencies

PCA VBC Collaborative

State	Organization	Contact	Website
Alabama	Alabama Primary Care Association	Mary Hayes Finch, JD, MBA President & CEO	https://www.alphca.com
Alaska	Alaska Primary Care Association	Nancy Merriman Chief Executive Officer	https://alaskapca.org/
Arizona	Arizona Alliance for Community Health Centers	Jessica Yanow President & CEO	https://aachc.org/
California	California Primary Care Association	Francisco J. Silva, Esq. President & CEO	https://www.cPCA.org/
Connecticut	The Community Health Center Association of Connecticut	Katherine Yacavone Interim CEO	https://www.chcact.org/
District of Columbia	District of Columbia Primary Care Association	Tamara Smith President & CEO	https://www.dcpca.org/
Florida	Florida Association of Community Health Centers	Jonathan Chapman, MBA President & CEO	https://fachc.org/
Hawaii	Hawaii Primary Care Association	Robert Hirokawa, DrPH Chief Executive Officer	https://www.hawaiipca.net/
Idaho	Idaho Community Health Center Association	David Garrett Chief Executive Officer	http://www.idahopca.org/home
Illinois	Illinois Primary Health Care Association	Ollie Idowu, JD, MPH President & CEO	https://www.iphca.org/
Indiana	Indiana Primary Health Care Association	Ben Harvey Chief Executive Officer	https://www.indianapca.org/
Iowa	Iowa Primary Care Association	Aaron Todd, MPP, MHCDS Chief Executive Officer	https://iowapca.org/
Kansas	Community Care Network of Kansas	Sonja Bachus Chief Executive Officer	https://www.communitycareks.org/

PCA VBC Collaborative

State	Organization	Contact	Website
Kentucky	Kentucky Primary Care Association	Molly Lewis, JD Chief Executive Officer	https://www.kpca.net/
Louisiana	Louisiana Primary Care Association	Gerelda Davis Executive Director	https://lpca.net/
Maine	Maine Primary Care Association	Darcy Shargo, MFA Chief Executive Officer	https://mepca.org/
Michigan	Michigan Primary Care Association	Phillip Bergquist Chief Executive Officer	https://www.mpca.net/
Minnesota	Minnesota Association of Community Health Centers	Jonathan Watson, MPIA Chief Executive Officer	https://www.mnachc.org/
Missouri	Missouri Primary Care Association	Joe Pierle Chief Executive Officer	https://www.mo-pca.org/
Nebraska	Health Center Association of Nebraska	Amy Behnke Chief Executive Officer	https://hcanebraska.org/
Nevada	Nevada Primary Care Association	Nancy Bowen Chief Executive Officer	https://www.nvpca.org/
New Hampshire/Vermont	Bi-State Primary Care Association	Tess Stack Kuenning, CNS, MS, RN President & CEO	https://bistatepca.org/
New York	Community Health Care Association of New York State	Rose Duhan President & CEO	https://www.chcanys.org/
New Jersey	New Jersey Primary Care Association	Selina Haq, Ph.D. President & CEO	https://www.njpca.org/
North Carolina	North Carolina Community Health Center Association	Chris Shank President & CEO	https://www.ncchca.org/
South Carolina	South Carolina Primary Health Care Association	Lathran Woodard Chief Executive Officer	https://www.scphca.org/
North Dakota/South Dakota	Community Healthcare Association of the Dakotas	Shelly Ten Napel Chief Executive Officer	https://communityhealthcare.net/

PCA VBC Collaborative

State	Organization	Contact	Website
Ohio	Ohio Association of Community Health Centers	Randy Runyon President & CEO	https://www.ohiochc.org/
Oklahoma	Oklahoma Primary Care Association	Sara Barry, M.Ed, LBP Chief Executive Officer	https://www.okpca.org/
Oregon	Oregon Primary Care Association	Joan Watson-Patko Executive Director	https://www.orpca.org/
Pennsylvania	Pennsylvania Association of Community Health Centers	Cheri Rinehart President & CEO	https://pachc.org/
Puerto Rico	Asociación de Salud Primaria de Puerto Rico	Alicia Suarez-Fajardo Executive Director	https://saludprimariapr.org/
Rhode Island	Rhode Island Health Center Association	Elena Nicolella President & CEO	https://rihca.org/
Tennessee	Tennessee Primary Care Association	Libby Thurman, MA Chief Executive Officer	https://www.tnpca.org/
Texas	Texas Association of Community Health Centers	Jana Eubank Executive Director	https://www.tachc.org/
Utah	Association for Utah Community Health	Alan Pruhs Executive Director	https://www.auch.org/
West Virginia	West Virginia Primary Care Association	Sherri Ferrell, MBA Chief Executive Officer	https://www.wvpca.org/
Virginia	Virginia Community Healthcare Association	Tracy Douglas, MS Chief Executive Officer	https://vcha.org/
Wisconsin	Wisconsin Primary Health Care Association	Stephanie Harrison, MA Chief Executive Officer	https://www.wphca.org/