Newsletter



February 2022 Volume 80

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Silver State ACO in 2022

As we begin 2022, we are acutely aware of the value of working as a team. Our outstanding Participants and partners, along with our talented and dedicated staff, have made Silver State ACO one of the most successful Accountable Care Organizations in the country. Over the six years for which we earned shared savings, we saved CMS and taxpayers nearly \$163,000,000! We look forward to continuing this valuable partnership which benefits each of our Participant groups and, moreover, our attributed patients.

We continue to strive to be the best that we can be. Each year, we

add new practices. These practices are carefully vetted. They must meet strict CMS guidelines, but also Silver State ACO standards. Our success is a result of the contribution of each practice and team member. The practice, and its staff, must be highly skilled, dedicated, and willing to work with us to deliver excellent care while reducing overall costs. Silver State ACO maintains various programs to assist our practices, but the practice staff must



be prepared to utilize the systems, change habits if necessary, and follow guidelines to help achieve success. Silver State ACO's team of quality coordinators meet with practices, at least monthly, to answer questions, review systems, and educate the staff on ever changing CMS guidelines.

In 2022, Silver State ACO is comprised of 56 groups, representing over 730 providers and with over 42,500 attributed beneficiaries. More than 25% of our practices are located in Northern Nevada, broadening Silver State ACO's influence on healthcare in the entire state.

Next Practice Meetings: Southern Nevada February 2, 2022

Northern Nevada: February 3, 2022

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Welcome new Participants that have joined for 2022:

Good Samaritan, LLC Henry Wang, Inc.

Kimberly A. Adams MD, PC (Total Wellness Family Medicine) Syed F. Hussain MD, PC (Health First Medical Center)

Wikler Family Practice



We look forward to a productive and mutually beneficial partnership. Together, we anticipate another fabulous year.

Quality Reporting

Quality of services is an integral part of the equation which CMS uses to ascertain whether an ACO will earn shared savings. Over the course of the year, Silver State ACO quality coordinators review patient charts to identify gaps in care (or, often, gaps in *reporting* care).

During the months of January and February, the quality coordinators are tasked with reviewing charts for specific patients



identified by CMS for quality reporting. Please be sure to work with your quality coordinators to give them access to the charts so that they can gather the information needed for reporting. Again, our thanks to all for their hard work at the end of 2021 in collecting data and closing gaps. We

won't know the results for 2021 until the summer of 2022 but we do know that we must complete quality reporting on time to *qualify* for Shared Savings. We've learned from our success, having earned shared savings for six years in a row. We're hopeful for an unprecedented seven years.

DISPATCH HEALTH

Last month, we announced the partnership between Silver State ACO, the Valley Health System and DispatchHealth, which was created to offer same-day, in-home medical care. You may have seen the cute, blue decorated DispatchHealth cars around town. Make no mistake, those cars are fun but they deliver real and valuable medical care. The cars are equipped and staffed to allow a patient with certain urgent illnesses and injuries to receive necessary medical care without

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requiring a visit to the emergency room at a hospital. Avoiding an ER visit saves money but also may be far better for a patient who is safer and more comfortable at home.

Each DispatchHealth team that visits a patient in the home is made up of either a Nurse Practitioner or Physician Assistant, as well as an assistant. They carry basic medical supplies as well as advanced screening and lab technology, allowing the staff to do various testing right in the home. In addition, a certified emergency room physician is always on call for consultation,

as needed.



The partnership between DispatchHealth, SSACO and the Valley Health System allows DispatchHealth to follow certain patients after they've been discharged from the hospital. Bringing care to the home should help these patients feel more comfortable – both physically and emotionally – when returning home after a hospital stay. The objective is both better results and to avoid a readmission to the hospital. A patient being readmitted to the hospital is often due to poor follow-up because of an inability to access the care or supplies needed or because of a lack of understanding of the discharge instructions. DispatchHealth's team can help alleviate these challenges.

In addition to the post-acute program, patients can also be referred directly to DispatchHealth, without having been to the hospital. If a patient calls the practice and the practice identifies this patient as one who could use "hands on" help, the practice can call DispatchHealth directly. In fact, the patient can even call him/herself. Attached to the

email to which this newsletter is attached is a one page descriptive flyer which can be printed out and

distributed in the waiting room. It describes the numerous DispatchHealth services and capabilities. Medicare will generally pay for the visit. (We should note that DispatchHealth does have an algorithm built into its program to identify patients who call repeatedly, to be sure that the services are not being abused or overused.)

As a partner with Silver State ACO and the Valley Health System, DispatchHealth is determined to help improve outcomes and reduce ER utilization.

A special phone number has been set up for Silver State ACO referrals:

725-246-1973

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Using this number will allow DispatchHealth to automatically know that the patient is a Silver State ACO beneficiary. This should shorten wait times and will give the patient the special attention that he/she deserves because the relationship between DispatchHealth and the patient's PCP already exists. It will also give Silver State ACO the ability to follow the patient's progress and to monitor the effectiveness of the program so as to understand if / how it can be improved in the future.

ER at Valley Vista Now Open

There are times that a patient does need the care that only an emergency room can provide. Our partner, the Valley Health System, has announced that the freestanding ER at Valley Vista, an extension of

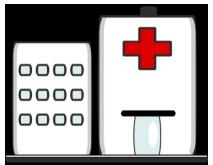
Centennial Hills Hospital, opened for patient care at 7 a.m. on Monday, January 17, 2022.

The freestanding emergency department, located on the northwest corner of Decatur and Elkhorn in North Las Vegas (across from the DMV), provides 24-hour emergency care every day of the year. It



is staffed with the same medical personnel, including emergency medicine physicians, and equipped with the same diagnostic technology available in Centennial Hills Hospital's emergency department, including an on-site laboratory, CT scanner and imaging equipment. The new ER at Valley Vista features six treatment rooms, three rapid medical exam rooms and an on-site decontamination room with showers.

"We are excited to extend our emergency services to the residents of North Las Vegas and surrounding neighborhoods," said Sajit Pullarkat, CEO of Centennial Hills Hospital. "We can diagnose



and treat the same types of emergencies and illnesses that are seen in our hospitalbased ER, with the same goal of seeing and treating patients as quickly as possible.

"Because this time of year is historically busy in hospitals and emergency departments, our new ER at Valley Vista offers patients another choice for safe,

high-quality emergency care," said Pullarkat.

ER at Valley Vista is the fourth freestanding emergency department in The Valley Health System. The others include the ER at Green Valley Ranch, the ER at Blue Diamond and Elite Medical Center.

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ER at Valley Vista, an extension of Centennial Hospital 7230 N. Decatur Boulevard, North Las Vegas NV 89084 (702) 534-7200

https://www.centennialhillshospital.com/services/emergency/ervalley-vista

EXPERIAN – Community Partner Encounters

We've said it before and we'll say it again, "We can't help fix it if we don't know that it's broken." Experian's transition to their new portal, Community Partner Encounters or CPE, was finalized in November. Yet, there are still some practices who are now calling because they "can't get their messages." Generally, it's an issue stemming from the transition and which can be corrected quickly and easily. We just need to know that it has to be. Please don't be shy. If you think there might be an issue with your

Experian access, please call so that we can help. Knowing that your patient has been discharged from the hospital allows you to bring the patient in (and bill for) a Transitional Care Management (TCM) visit. CMS is willing to pay a substantial premium for this visit because they know how beneficial it can be for the patient. Please help by using the Experian notification system and bringing in the patient for the TCM visit... which also benefits your practice's bottom line!

Please reach out to your quality coordinator or directly to Rena Kantor, Director of Operations, at 702-751-0945.

COVID-19 Testing Location Look Up Tool

There are many reasons why someone needs to be tested for



COVID, including proof that it is safe for him/her to return to work.

Unfortunately, it's sometimes difficult to find a testing location. To the left is a QR code that will link directly to the state's COVID testing location search site. It can be used by anyone. If your practice is unable to provide testing for your patients, you might be able to identify somewhere that tests are available.

For COVID testing locations, use the QR code, scroll down and type in your zip code.

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CMS Quality Measures -2022 update

CMS has made changes to the quality reporting measures and parameters for 2022. Be sure to pay attention to these changes when they are introduced by your quality coordinator.

QUALITY MEASURES SPOTLIGHT

Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

Updated for Performance Year 2022

The Centers for Medicare and Medicaid Services (CMS) requires the ACO to report several Quality Measures on behalf of our Participant Practices. This month we are focusing on the "Statin Therapy for the Prevention and Treatment of Cardiovascular Disease" measure. Please review as there are changes for the 2022 performance year.

CMS requires patients who are considered high risk for a

cardiovascular event, under ACC/AHA guidelines, to be <u>prescribed or on statin therapy</u> at any point during the calendar year.

When auditing your charts for measure compliance, your assigned Quality Coordinator will first confirm if the patient falls into one or more of the following three categories:



SPOTLIGHT

- All patients with an active diagnosis of, or history of, clinical Atherosclerotic Cardiovascular Disease (ASCVD). This includes acute coronary syndromes, history of myocardial infarctions, angina and stroke or transient ischemic attack, as well as patients who have had an ASCVD procedure.
- 2. Patients age 20 or older who have ever had a fasting or direct LDL-C result of 190 mg/dL or higher, or were previously diagnosed with/or currently have an active diagnosis of **familial hypercholesterolemia**. This does not include patients with a diagnosis of pure hypercholesterolemia as prior years.
- 3. Patients aged 40 to 75 years with Type 1 or Type 2 diabetes regardless of their LDL-C level as prior years.

If it is confirmed that the patient falls into one or more of the categories above, the Quality Coordinator will then review the patient's encounters (starting with the most recent date of service) for documentation of a prescribed statin or notation that the patient is currently on statin therapy.

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<u>ONLY</u> statin therapy meets the measure criteria. Other cholesterol lowering medications, such as Zetia, will <u>NOT</u> meet this measure.

CMS will make exceptions for this measure, but these <u>must</u> be documented in a dated encounter during the measurement period. The most common exceptions are:

- Patient allergy or intolerance to statin medication
- Patient with active liver disease or hepatic disease
- Patient with end-stage renal disease (ESRD)

If the patient does not fall into the exceptions listed above but your provider feels statin therapy is not appropriate for the patient, please have them document the reason why and we will submit to CMS for an exception for that patient.

Please reach out to your Quality Coordinator if you have any questions or need help meeting this measure.

Yes, again

On January 14th, the Secretary of Health and Human Services of the United States renewed the COVID19 Public Health Emergency determination which was initially declared on January 31, 2020. Nobody can foresee how long the current wave will last nor how many times the Secretary may extend the PHE declaration. What we do know is that we must adapt to situations and circumstances as they arise. That way, we can get through this wave and be ready for new developments which, we certainly hope, will be all positive and good ones.

Sharing Passwords? DON'T DO IT!

A recent survey found that over 40% of employees admit to sharing passwords to workplace related systems. Doing so opens the door to



data breaches, fraud and compliance issues. Staff who are dismissive about the importance of protecting passwords put their employer at great risk for data being stolen or compromised. Imagine the fallout of an ex-employee who still has access to files at their former job. In the case of a small medical practice, this can have the potential for a serious and costly data breach.

This ^ is a BAD IDEA! (But how many people do it, anyhow?!)

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All passwords should require resetting on a regular basis. Now, as



we are at the beginning of the year, practice managers should review all those who have access to systems to ensure that only those who need access have it. Be sure to deactivate and disable any staff who have left the practice or have been assigned to new duties that don't require that they have

access to patient data, PHI, or other protected information.

Preventing and Reporting Potential Fraud

CMS has reminded all ACOs that they can help prevent fraud and abuse by ensuring that there is "a method for employees or contractors of the ACO, ACO participants, ACO providers or suppliers, and other individuals or entities performing functions or services

related to ACO activities to anonymously report suspected problems related to the ACO to the compliance officer." ACOs can report potential fraud or abuse to government agencies, including the Office of Inspector General (OIG).



We, at Silver State ACO, want to remind anyone employed by, engaged with, or providing services on our behalf or on behalf of

any of our participants or preferred providers, that we maintain a dedicated compliance line. Anyone who suspects suspicious behavior may call **702-751-0834** to report it, without fear of ramification. Messages may be left anonymously but should contain enough information for the ACO Compliance Officer to be able to responsibly research the complaint. Please be sure to post this number for your staff.

2022 Practice Meetings

Practice meetings are an opportunity to be educated about new programs, or updated about existing ones, established by Silver State



ACO and/or required by CMS. There's often a presentation by a Preferred Provider who outlines new and/or unique services being offered. Having the opportunity to ask questions and to learn from other's questions is a bonus. The meetings make it possible to meet additional members of the

Silver State ACO team and staff from other practices. (And, there are

almost always prizes to be won just for attending!) Please do your best to join us.

Practice Meeting Schedule for 2022:

Watch emails for changes to schedule or venue (in person/virtual)

SOUTHERN NEVADA

Wednesday, February 2, 2022

NOTE: The February 2nd meeting will be held via Zoom ONLY! You must register in advance:

https://uhsinc.zoom.us/meeting/register/tJItfuupqzsjHtF8bVv ZFE-2awYk60O0za6P

Once registered, you will receive a confirmation email with specifics for joining the meeting.

Future meetings are scheduled to be held at 11:30 a.m. on the day and at the hospital listed:

Wednesday, May 4, 2022 - at Summerlin Hospital Wednesday, August 3, 2022 - at Desert Springs Hospital Wednesday, November 2, 2022 - at Summerlin Hospital

NORTHERN NEVADA

Thursday, February 3, 2022

NOTE: The February 3rd meeting will be held via Zoom ONLY! The meeting time has also changed to 11:30 a.m.

You must register in advance:

https://uhsinc.zoom.us/meeting/register/tJYtcOihqzMiHtJ11 H6MQsoLuI8WGzW3Lej3

Future meetings are scheduled to be held at NNMC Sparks Medical Building, Suite 201.

Meet and greet begins at 5 p.m., program begins at 5:30.

Thursday, May 5, 2022 Thursday, August 4, 2022 Thursday, November 3, 2022

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Available for secure reporting of any suspected compliance issues, without fear of retribution.

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