



## In this Issue:

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#VegasStrong



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## NEW YEAR, RENEWED EXCITEMENT

Each new year, we look back at our accomplishments over the previous twelve months. As individuals, we review our accomplishments and lost opportunities. We refer to *missed opportunities* as they are only failures if we don't learn from the experience.

As a company, we at Silver State ACO (SSACO) do the same. What have we done right? Have we done everything in our ability to support our beneficiaries and improve the healthcare experience for both the patients and caregivers?

We have proven that, as a team, we can be successful while sticking to our mission of providing excellent care. Or, perhaps, that's the very reason that we have been successful. We keep our eye on the ultimate evidence of success – better outcomes for patients and a healthier, less stressful environment for providers and their support staff. Providing unique opportunities and relationships, and educating our participant practices on CMS rules and regulations, helps our practices.

The past two years have been challenging for many. For some, the bounce back and reorganization after COVID proved to be even more difficult than providing services during the pandemic. We have been faced by many challenges over the years, yet are proud to say that we have been successful for *seven years in a row*. We are one of only nineteen ACOs across the country, and the only one west of Texas, who can claim that. And, over those seven years, we have saved CMS over \$196,500,000!

The Centers for Medicare and Medicaid Services ("CMS") will not deliver results of our efforts for 2022 until August 2023. We feel



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Southern Nevada  
February 1, 2023

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February 2, 2023

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confident that we have done well by our patients and practices and hope for an eighth successive year of Shared Savings.



As we begin 2023, now is the time to renew, recharge and make resolutions. When your Silver State Quality Coordinator reaches out, set an appointment to meet with him/her early in the year to learn about changes, updates, or new programs and benefits. Perhaps you can work together to develop new systems or protocols to improve coordination and communication, and to streamline the sharing of data.

Please be sure to respond promptly to any requests from the quality coordinators. They are busy at work gathering required information for 2022 quality reporting to CMS.

Warmest wishes for a wonderful 2023 from all of us at Silver State ACO to our Participants, providers and support staff.

### WELCOME NEW PARTICIPANTS

CMS rules allow Accountable Care Organizations (ACOs) to change their participant list only once a year. The process is generally completed by the end of summer for an effective date of January 1<sup>st</sup> of the following year. Silver State ACO takes its responsibility seriously and carefully vets any practice that applies to join. Each practice's performance has an effect on the success of SSACO as a whole and, as such, on the other practices.

For 2023, we are excited to announce that the following two practices have joined:

UNLV Medicine  
Mountain View Primary Care



In 2023, Silver State is comprised of fifty three practices, representing over 850 providers in the state of Nevada.

## **BENEFICIARY INFORMATION POSTERS AND NOTICES- WHY SO MANY?**

CMS requires that every ACO participant practice post a notification in each clinic where it sees patients. CMS wants patients to be aware that their doctor's practice is part of an ACO and what that means for their care. In addition to the poster, the practice must hand every patient a printed notice at their first visit of the year.

CMS has strict guidelines and verbiage for these notifications and



does not allow practices to make any changes except to add the practice name and/or logo. CMS has changed the verbiage for 2023. The new versions are attached to this newsletter. They have already been

configured with the Silver State ACO logo.

In its ongoing attempt to be sure that beneficiaries understand their rights, CMS has made changes to the rules as well as to the templates. Every newly assigned beneficiary must receive a beneficiary notice at, or before, his/her first office visit of the year. *In addition*, there must be follow-up communication with these new patients within 180 days of the original notice. CMS is granting flexibility to ACOs to decide how to implement this – in writing or verbally. CMS has explained that it does not expect ACOs or their practices to apply these rules retrospectively. In other words, neither the ACO nor the practice has to deliver a new notice to any beneficiary who already received one in 2022.

In addition, CMS has changed the rule to deliver beneficiary notices only once per ACO Agreement period. So, practices will not be required to deliver new notices to any beneficiary who already received one, until 2025.

We continue to follow notices and comments to/from CMS, and to request additional clarification. We will keep you apprised of any information that will be helpful to implementing these new requirements.

There are numerous templates attached. Let us explain. First, each document is provided in both English and Spanish. (CMS makes them available in Spanish but practices are *not* required to post both.) In addition, each of the documents has two versions, one of which contains “without portal” in the file name. Within the body of the document that does *not* contain that in the title, there's a reference to “ask about signing up for our secure online portal” in bold print. Be sure to use the correct template for your practice. (If you have a secure online portal, you certainly want your patients to know about it and use it. If you don't have a portal... you should!)

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Please be sure to complete each of the templates with your practice name where indicated at the top, and the office phone number where indicated at the end of the document. Practices are required to display the new version of the poster, and to use the new beneficiary information notice, as soon as possible. CMS does not permit the use of older versions of either document.

**2023 Web Interface Quality Measures**

Silver State ACO is responsible for both the quality and cost of Medicare attributed lives. Before we can share in any savings, we must demonstrate that we have met certain performance standards outlined by Medicare. We do this through quality reporting.

Throughout the year, your Quality Coordinators manually audit your patient charts for specific documentation on what are called the **CMS Web Interface Measures**. *(These are not to be confused with the electronic EMR based measures called MIPS eQMs – which we will cover in next month’s newsletter.)*

As we head into the New Year, we would like to take the opportunity to re-introduce the required Web Interface Measures and prepare our practices for the documentation changes taking effect in 2023.

- **Diabetes: Hemoglobin A1c Poor Control:** Patients age 18–75 with diabetes must have an HbA1c completed during the 2023 year. Medicare considers HbA1c “controlled” if it is less than



9.0%. Unfortunately, we are unable to accept any patient reported values for this measure. Silver State ACO is required to report the last HbA1c reading of the year.

**Notable Change:** Previously, patients with diabetes secondary to another condition were not included – However, for 2023 all patients with **ANY** diagnosis of diabetes will be included.

- **Colorectal Cancer Screening:** This measure does have a **Notable Change:** The age parameters have changed and patients aged **45-75** are now required to have an appropriate screening for colorectal cancer.

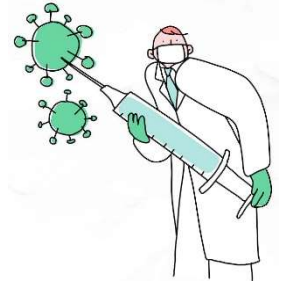
If a patient “Self-Reports” the provider must document within the patients chart: the name of the test, year completed and the result.



**SPOTLIGHT**

Abnormal or Normal will suffice as a documented result. Only certain tests will meet the screening component of this measure:

- Fecal Occult Blood Test (FOBT) during calendar year 2023 ONLY
- Flexible Sigmoidoscopy or CT Colongraphy during calendar year 2023 or the four years prior
- Colonoscopy during calendar year 2023 or nine years prior
- Fecal Immunochemical DNA Test (FIT-DNA) during calendar year 2023 or two years prior



➤ **Influenza Immunization:** This measure has experienced significant changes effective 2023. As with previous years, patients age 6 months and older will be included in this measure.

**Notable Changes:** Medicare will be looking for patients with a qualifying office visit for two different periods of time. Each time period has a specific flu season for which the ACO will be required to report receipt of a flu vaccine. If a patient has an office visit during both date ranges, the ACO will be required to submit documentation of flu vaccine receipt for both flu seasons. Refusals, allergies and any adverse reactions must be documented within the patients chart during each specific flu season time frame in order to exclude the patient from the measure.

Office Visit Dates	Flu Season Time Frame for Vaccine
01/01/2023 – 03/31/2023	08/01/ <u>2022</u> – 03/31/2023
10/01/2023 – 12/31/2023	08/01/2023 – 12/31/2023

➤ **Tobacco Use: Screening and Cessation Intervention:** Patients age 18 and older are required to be screened for **ALL** forms of tobacco use at least once during the 2023 calendar year and if identified as a tobacco user, cessation counseling must also be performed and documented.



**Notable Changes:** Tobacco cessation can be performed and documented during the 2023 calendar year or 6 months prior to the start of the year (July 1 through December 31, 2022). The US Food and Drug Administration now defines tobacco as “any product made or derived from tobacco intended

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for human consumption.” Which may include, but is not limited to: Cigarettes, cigars, chewing tobacco, hookah tobacco, nicotine gels, pipes tobacco, vapes, electronic cigarettes, hookah pens and other electronic nicotine delivery systems. (This measure is not intended for marijuana). There are no exceptions or exclusions available for this measure in 2023.

- **Screening for Depression and Follow-Up Plan:** A screening for depression should occur for all patients age 12 and older using an age-appropriate standardized depression- screening tool AND, if positive, a follow-up plan is required to be documented within the patients chart. A follow-up plan must include one or more of the following:
  - Referral to a provider for additional evaluation and assessment
  - Pharmacological interventions
  - Other interventions or follow-up for the diagnosis or treatment of depression

**Notable Changes:** The follow-up plan for a positive depression screening can be documented on the day of the positive screening or 2 days after the day of the screening. It is now recommended that **both** a score and the clinician interpretation of the score be documented. However, at a **minimum**, chart documentation **MUST** include the name of the tool and the **results of the screening** with a score OR clinician interpretation of positive or negative for depression. Each standardized screening tool provides guidance on whether a particular score is considered positive for depression.

- **Statin Therapy for the Prevention and Treatment of Cardiovascular Disease:** Patients who are considered at high risk for cardiovascular events, by falling into one of the three categories outlined below, are required to be prescribed statin therapy during calendar year 2023:
  - All patients who were previously diagnosed with or currently have an active diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD), including an ASCVD procedure
  - Patients age 20 or older who have ever had a low-density lipoprotein cholesterol (LDL-C) level  $\geq$  190 mg/dL; OR were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia

- Patients age 40-75 years with a diagnosis of diabetes

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**Notable Changes:** Statin therapy may be documented or prescribed during a telehealth encounter. There is also a new exception available for patients not being prescribed statin therapy due to a documented medical reason. This may assist with patients who decline a statin due to adverse reactions. If appropriate, please confirm that the documentation in the patient’s chart can support this exclusion.

The other Quality Measures for 2023 remain unchanged from 2022. These include the following measures:

- **Screening for Future Fall Risk:** This pertains to patients age 65 and older and needs to occur at least once during calendar year 2023, regardless of ambulatory status. A screening requires an assessment of whether an individual has experienced a fall and/or has problems with gait or balance. There are no exclusions or exceptions for this measure. 
- **Controlling High Blood Pressure:** This measure includes patients 18–85 years of age who have a diagnosis of hypertension and whose blood pressure was adequately controlled. Medicare defines “adequately controlled” as less than or equal to 139/89 mmHg. Silver State ACO is required to report the last blood pressure reading taken in 2023. 
- **Depression Remission at Twelve Months:** This measure is for patients age 18 and older with major depression or dysthymia and an initial Patient Health Questionnaire (PHQ-9) score greater than nine who demonstrate remission at 12 months. Medicare defines remission as a PHQ-9 score lower than 5. This measure is Pay-For-Reporting, meaning this score does not affect our overall score. Please make sure to complete yearly depression screenings on your patients.

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➤ **Breast Cancer Screening:** Female patients, 50–74 years of age, are required to have a mammogram to screen for breast cancer during the years 2022 or 2023. If a patient “Self-Reports” the provider must document within the patient’s chart: the name of the test, month/year completed, and the result. Abnormal or Normal will suffice as a documented result. Unfortunately, ultrasounds, biopsies and MRIs will not meet the screening component of this measure – only screening, diagnostic and 3-D mammograms are adequate. Documentation of a bilateral mastectomy will exclude the patient from this measure so, if appropriate, please confirm that the documentation in the patient’s chart can support this exclusion.



Your Quality Coordinators will provide more in depth education during your next monthly meetings. In the meantime, please do not hesitate to reach out to them if you require any assistance or have any questions on any of these measures.

**RENEW THE MESSAGE**

Reminder for 2023: Be sure to reiterate to your staff: DON’T SHARE PASSWORDS; DON’T OPEN TEXTS FROM UNKNOWN EMAIL ADDRESSES; BE CAREFUL; ENCRYPT ALL PHI; REPORT SUSPICIOUS BEHAVIOR; ALWAYS LOG OFF YOUR COMPUTER.



You’ve returned to the office after a long holiday weekend, and packed away the decorations. The office walls look bare and boring after removing all the lights and glitter of the holiday. It’s a new year. Isn’t now a perfect time to post new messages? “Spice it up” with some new posters? Maybe have them printed on a colored background? Or have a contest to have staff members design reminder posters that will be posted at other’s desks. Begin a conversation.



We are all busy with “life” and tend to tune out the usual, the things we see every day. If we make changes to the usual, perhaps staff will notice. Perhaps it will make someone think twice before forwarding an email, or walking away from their computers without logging out? If we can change even just one behavior every day, we could avoid an



turn off your PC



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incident or a compliance issue, and save ourselves a lot of headache in the future.

Repeat. Reiterate. Reword. Remember to be clear.

**PRACTICE MEETINGS**

We look forward to seeing you at the quarterly Silver State ACO practice meeting on February 1<sup>st</sup> in Southern Nevada or on February 2<sup>nd</sup> in Northern Nevada. Please note the locations, below, as the meetings are not being held at their usual venue.

Each meeting focuses on different topics, but the meetings are always educational, informative and interesting. And, they are a wonderful opportunity to meet staff from other practices, as well as Silver State ACO staff. Team work is how the magic happens. We have been working together to help our practices and to be successful, allowing us to share the success. Please join us.

**Practice Meeting Schedule for 2023:**

Please note your calendar and watch for emails re: changes to schedule or venue

**SOUTHERN NEVADA**

**Meetings are scheduled to be held at 11:30 a.m.**

Wednesday, February 1, 2023 – at Desert Springs Hospital

Wednesday, May 3, 2023 – Summerlin Hospital

Wednesday, August 2, 2023 – Desert Springs Hospital

Wednesday, November 1, 2023 – Summerlin Hospital

**NORTHERN NEVADA**

Meetings are scheduled for 5 pm “meet and greet”. Program begins at 5:30 pm.

**Thursday, February 2, 2023 – Junior League of Reno Office - 190 W. Huffaker Lane, #407, Reno, NV 89511**

Thursday, May 4, 2023

NNMC Sparks Medical Building – Ste 201

Thursday, August 3, 2023

NNMC Sparks Medical Building – Ste 201

Thursday, November 2, 2023

NNMC Sparks Medical Building – Ste 201

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*“Cheers to a new year and another chance for us to get it right.”*

Oprah Winfrey, talk show host, television producer, actor, writer, philanthropist

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