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## Upcoming Practice Meetings:

Southern Nevada:  
Wednesday, May 6, 2020 at  
Summerlin Hospital

Northern Nevada:  
Thursday May 7, 2020 at NNMC  
Sparks Medical Building

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## **“Satisfaction Guaranteed?!”**

When Congress passed the Affordable Care Act (ACA), the focus was on both getting better results and reducing costs. Results can have two components – actual clinical results, as well as perceived results – how satisfied the patient is with the process, the care, and the ultimate outcome.

The Centers for Medicare and Medicaid Services (CMS) created ACOs as one means to achieve these goals. In fact, CMS’s calculation of whether an ACO is successful includes both clinical results and outcomes, as well as patient satisfaction. All ACO beneficiaries are Medicare fee-for-service patients and CMS understands that they must be satisfied with their care.

Otherwise, if the Medicare beneficiary is not satisfied, he/she might visit other doctors, repeat visits or tests or, perhaps worse, will not follow the provider’s instructions, leading to possible exacerbation of a health issue. That behavior would be directly contrary to the desired result – improve results while also reducing costs.

Each year, ACOs are required to engage (and pay for) a Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey. The CAHPS survey addresses numerous aspects of a practice’s performance including, for example, waiting times, ease of making an appointment, and patient perception that he/she is part of the decision making process.

As part of CMS’s final reconciliation for each ACO, they include results of the CAHPS survey. Unfortunately, CMS provides only an overall score for the whole ACO; they will not share the results by practice. This makes it impossible for Silver State ACO to identify which of our Participants are doing an excellent job of keeping their patients happy, versus which of our Participants could use some help in a particular area.

Silver State ACO understands the importance of meaningful feedback. How can a practice correct processes with which patients may not be satisfied, if they don’t know about them?

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Therefore, Silver State ACO has engaged a private company to perform an additional Patient Satisfaction survey, completely independent of CAHPS. The survey will be conducted via email, addressed on behalf of your practice. (Sample email, below). Once the patient is engaged, he/she will receive a follow-up text message with a link to the survey. Your Silver State ACO (SSACO) Quality Coordinator will be requesting a list of email addresses and cell phone numbers for your attributed patients. Please cooperate with them and prepare the list of contact information. The results will be shared with you so that you can understand how your patients perceive your care and the practice can make adjustments, if / as needed. We, at Silver State ACO, hope that this will help us increase our overall Quality Score. The Quality Score is a substantial component used in calculating Shared Savings and the percentage of that Shared Savings that CMS will share with SSACO (and which SSACO will distribute to you – the Participants), should it be earned.



Feel free to talk to your Quality Coordinator for additional clarification. Thanks for your cooperation and help!

Sample email which will be sent to attributed patients by the survey vendor, on your behalf:

Dear (first name) (last name),

**We at (your practice name) need your help.** Our records indicate that you have visited (provider's name) in the last six months, and we would like you to tell us about your care. We are committed to providing you with the best quality health care available, and your input will help us to achieve this goal. This brief survey should only take about 13 minutes or less of your time.

The information that you provide will be kept **completely private and confidential**. Your answers will never be matched with your name. No one involved in your care will see your individual answers. We have hired SPH Analytics, an independent professional survey organization, to conduct the survey. SPH Analytics will combine your answers with those of other people who complete the survey to create a summary report that tells us about our patients' experiences with our providers and medical office.

We hope you will take this chance to tell us about your experiences with health care. Please complete the survey by (month/ day/ year) by clicking on the survey link below: [link]

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*You may choose to participate or not, but the more people who respond, the greater our ability to improve the quality of care you receive. If you choose not to participate, this will not affect the health care you get from your providers.*

*If you have any questions about this survey, please call SPH Analytics at 1-800-588-1659. All calls to this number are free. Thank you for helping to make health care at (practice name) better for everyone!*

*Sincerely,  
Name, Title*

## QUALITY MEASURES – Spotlight

### Falls: Screening for Future Fall Risk

The Centers for Medicare and Medicaid Services (CMS) requires patients age 65 years and older be screened for future fall risk at least once per calendar year. While a specific screening tool is not required for this measure, potential tools include the Morse Fall Scale and the timed Get-Up-And-Go test. A gait and balance assessment will also meet the intent of the measure.



# SPOTLIGHT

Screening for a future fall risk includes an assessment of whether an individual has experience a fall or has problems with gait or balance. CMS defines falls as a sudden, unintentional change in position causing an individual to land at a lower level, on an object, the floor, or the ground, other than as a consequence of sudden onset of paralysis, epileptic seizure, or overwhelming external force.



A clinician with appropriate skills and experience may perform the screening, however the screening is not restricted to an office setting. This measure may be completed and documented during a telehealth encounter such as a chronic care management call. Any history of falls during the measurement period is acceptable as meeting the intent of the measure, as well as, simply documenting “no falls.”

**Some of the most common documentation that CMS will NOT accept include:**

- Discussed Fall Prevention
- Discussed Fall Risk
- No Fall Risk
- Low/High Fall Risk

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**Some examples of documentation CMS WILL accept:**

- No Falls
- Documenting the question, “Have you fallen in the past 12 months?” with the patient’s response
- Gait Normal/Abnormal
- Documenting that the patient had a fall on a certain date (Patient fell at home on 01/06/2020)

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

**HealthInsight becomes Comagine Health**

Improving health care is a team effort. Education, closing quality gaps, improving health outcomes or becoming more sustainable, practices must work together and with outside resources to achieve their highest potential. Over the past few years, many SSACO Participant practices have been recommended to, and have utilized, the services of HealthInsight. HealthInsight has now joined with Qualis Health to create a bigger and broader scope organization, now known as Comagine Health.

Comagine Health is a CMS Quality Improvement Organization (“QIO”) that offers its services to medical practices in a number of states, including Nevada. As they are contracted with CMS to help deliver better care, their services are *free of charge* to the practice. In the past, many of our practices have used HealthInsight for assistance and guidance in filing Promoting Interoperability (originally known as Meaningful Use). Now, as Comagine Health, they continue to focus on aligning community interests and improving health systems.

Among the services they offer, for example, is help creating Diabetes Self Management Education classes and programs. In fact, CMS may pay for in-person classes. For ideas, services and contact information, visit their website at [www.comagine.org](http://www.comagine.org).

Please note that Comagine Health is not affiliated with Silver State ACO. We include this information in an effort to identify helpful services for our Participants.



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## Reminders

### Posters and Beneficiary Notices

In past newsletters, we've shared CMS' directive that, as of January 1, 2020, ACO Participants must have a poster displayed in every office where patients are seen, notifying Medicare



beneficiaries that the practice is a Participant in Silver State ACO and what that means to them. CMS has specific verbiage which is to be used so that every Medicare beneficiary is aware of his / her rights.

In addition, please remember that CMS now also requires that every Medicare beneficiary be given a Beneficiary Information Notification which further describes and explains what an ACO is and how the patient is affected. The Notification must be given to the beneficiary at his/ her first visit of the year. CMS has not specified if, or how, practices must document delivery of the Notifications. However, Silver State ACO highly recommends that each practice create a workflow, or simple listing of Notifications delivered, as proof that the practice is complying with all CMS directives.

For the convenience of those who may not yet have implemented these requirements, attached to the email which contains this newsletter are the templates for CMS posters and Beneficiary Notifications, in both English and Spanish.

### Risk Scores and US Health Systems ("USHS")

During their monthly meeting with practices, Quality Coordinators deliver a risk score report, identifying patients who are at the highest risk for admission and /or exacerbation of their health conditions. This is a service of Silver State ACO. It is an effort to assist practices in identifying which of their patients need help.

US Health Systems, care coordinators for Silver State ACO, are here to help you! Please reach out to them for assistance in dealing with these patients. The risk report delivered to you is a *starting point*, a call to action, not a report which reflects what *has* been done. Please keep the USHS 24/7 Care Line call center phone number readily available for help with your patients:

**833-208-0588**

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**Practice Meetings Schedule for 2020**

Mark your calendars for the next practice meetings: In  
Southern Nevada: Wednesday, May 6<sup>th</sup> (7:30 a.m. and 11:30 a.m.)  
at Summerlin Hospital

Northern Nevada: Thursday, May 7<sup>th</sup> at 5 p.m. at Northern Nevada  
Medical Center Sparks MOB.

Please be sure to join us and your fellow Silver State ACO  
Participant practice managers, providers and staff at our quarterly  
practice meetings. It's a wonderful opportunity to learn, meet  
other SSACO Participants, and win great prizes.

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