Medicare Shared Savings Program
Self-Guided ACO Compliance Training
2016
Oregon ACO LLC compliance training is self-guided. Simply read through these questions and answers, attest that you have completed the training and contact your Compliance Officer or the ACO Compliance Officer if you have questions or concerns.
The Oregon ACO LLC (the ACO) has compliance program requirements for entities participating in the Medicare Shared Savings Program (MSSP): your organization, its employees and downstream entities.

These requirements include, but are not limited to, the core elements of the ACO’s Compliance Plan. Your organization may be required to provide assurance that it understands and incorporates these components into its own compliance program or that it has a materially similar program.
This training will cover

1. Reason for training
2. What is a MSSP?
3. Patient referrals
4. Patient Inducements
5. Marketing Materials
6. Data Use and Access
7. Record Retention
8. Requirement to screen all ACO parties from OIG’s Exclusion List upon hire or affiliation with ACO and periodically
9. Reporting Compliance Concerns
Q: Why do I have to complete ACO compliance education? I already receive compliance training from my organization.

A. Your organization has chosen to participate in the Medicare Shared Savings Program (MSSP), which means that you are now participating in the MSSP too.

*Completion of ACO compliance training is a condition of continued engagement or affiliation for ACO Participants and ACO Providers/Suppliers.*

There are a few things you need to know to ensure compliance with the regulatory requirements for MSSP Accountable Care Organizations (ACOs). This education module will highlight them for you.
Q: What is a Medicare Shared Savings Program Accountable Care Organization?

A. MSSP ACOs are groups of physicians, hospitals and other health care providers who voluntarily work together to coordinate care for traditional Medicare (or “fee-for-service”) beneficiaries. MSSP ACOs share in any savings that result from providing beneficiaries with coordinated, high quality care.

MSSP ACOs are not managed care organizations, do not use closed networks of providers, and do not limit a Medicare beneficiary's so-called “free choice” of Medicare providers.
Q: Does an MSSP ACO differ from other ACOs that my organization is involved with?

A. Yes. MSSP ACOs must meet specific regulatory requirements that other ACOs don’t. MSSP ACOs also differ because they do not have closed provider networks and primarily coordinate care for the fee-for-service Medicare population.
Q: What am I going to learn and does it really matter?

A. This compliance education covers:
   - MSSP ACO regulatory requirements
   - Reporting compliance, fraud, waste and abuse issues
   - Who to contact with questions or concerns

And yes, compliance matters. Non-compliance could result in:
   - Termination of our ACO’s contract with CMS,
   - Repayment of substantial amounts of funding, and possibly,
   - Civil and/or criminal penalties for serious violations.
Recap - Key Takeaways

• This MSSP ACO has unique and important regulatory requirements
• Non-compliance has significant consequences
Q: We are responsible for patients across the care continuum, so can we limit referrals to only MSSP ACO providers?

A. In general, no. The MSSP is not a closed network program. This means that Medicare fee-for-service patients must be able to seek care from providers that are outside of the ACO.

However, employed or contracted physicians may limit referrals when acting within the scope of their contract.

Example: A hospital may require its employees to refer patients to the hospital’s imaging center as long as the referring employee is free to honor patient choice, insurer requirements and the best interests of the patient.

Please see the MSSP Prohibited Referrals Policy on the Oregon ACO LLC website: www.ACOOregon.com
Q: Can we encourage patients to seek care from the MSSP ACO by providing free or discounted services?

A. Sometimes, and only under certain circumstances. The federal government has put limitations on the strategies we can use to encourage patients to seek care from the MSSP ACO.

We’ll start with what MSSP ACOs may not do, then we’ll go over what MSSP ACOs may do.

MSSP ACOs may not give beneficiaries cash or items unrelated to health care under any circumstances.

Examples of prohibited items include sporting event tickets or gift certificates for non-health care related retail items.

MSSP ACOs may not give beneficiaries items or services for the purposes of:

• Rewarding them for receiving services from the MSSP ACO, or
• Persuading them to remain assigned to the MSSP ACO.
MSSP ACOs *may* give beneficiaries free or discounted items or services for the purposes of *care coordination* or *encouraging health awareness*. However, these items or services must be:

In-kind (i.e. goods, commodities, and services, but not cash);
Reasonably connected to the patient’s medical care; and either preventive care items or services, or intended to advance one or more of the following clinical goals:

- Adherence to a treatment (including a drug treatment) regime;
- Adherence to a follow-up care plan; and/or
- Management of a chronic disease or condition.

**Example:** An MSSP ACO *may* give blood pressure monitors to patients with hypertension to encourage regular blood pressure monitoring and to educate and engage beneficiaries to be more proactive in their disease management. **Example:** An MSSP ACO *may not* waive or reduce Medicare copayments or deductibles because those are financial incentives and are not “in-kind.”

Please see the MSSP Beneficiary Inducements Policy on the Oregon ACO LLC website: [www.ACOOregon.com](http://www.ACOOregon.com)
Recap - Key Takeaways

• This MSSP ACO has unique and important regulatory requirements
• Non-compliance has significant consequences
• Patient referrals may NOT be restricted within the ACO (unless consistent with an employment contract)
• Patients may NOT be rewarded for staying in the ACO
Q: Can we advertise or promote our MSSP ACO and its benefits to patients?

A. Yes, BUT there are stringent limitations on what are broadly referred to as “marketing materials.” “Marketing materials” include brochures, websites, advertisements, outreach events, letters to beneficiaries, social media, etc.

In general:
- Marketing materials must be submitted by Oregon ACO LLC to CMS for pre-approval; and
- CMS templates must be used as-is when they are available.
There are also some prohibited terms and phrases that may **never** be used:

<table>
<thead>
<tr>
<th>Prohibited Phrase/Term</th>
<th>CMS’ Suggested Alternative</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Managed care” or “care management”</td>
<td>“Coordinated care” or “care coordination”</td>
</tr>
<tr>
<td>Beneficiaries “enroll” or “enrollment”</td>
<td>Providers “participate”</td>
</tr>
<tr>
<td>“You have been selected to participate”</td>
<td>“Your provider has chosen to participate”</td>
</tr>
</tbody>
</table>
Q: Do we need to tell our patients about the MSSP ACO?

A. Yes, CMS has some beneficiary notification requirements:

• Patients must receive notice via an approved Poster in the office that their provider is participating in a MSSP ACO;
• Patients must be given the option to opt-out of some data sharing between CMS and the MSSP ACO; and
• Patients must be given the option to change their data sharing preferences.

Since beneficiary notifications are “marketing materials” and are strictly regulated, Oregon ACO LLC policies and procedures must be followed.

Please see the MSSP Beneficiary Data Sharing Notification Policy on the Oregon ACO LLC website: www.ACOOregon.com
Q: We’d like to crunch some numbers, so can we access the ACO’s data on our providers and patients?

A. Yes, but under limited conditions. In general, data can be shared *within* the ACO to promote better care, better health, and lower growth in expenditures. Sharing data *outside* of the ACO is generally prohibited.

Also, as with all protected health information or personally identifiable information, access and use is limited to the “minimum necessary” to accomplish an intended purpose.

To access or use the ACO’s patient/provider data, please see the MSSP Data Use and Access Policy on the Oregon ACO LLC website: [www.ACOOregon.com](http://www.ACOOregon.com)
Recap - Key Takeaways

• This MSSP ACO has unique and important regulatory requirements
• Non-compliance has significant consequences
• Patient referrals may NOT be restricted within the ACO (unless consistent with an employment contract)
• Patients may NOT be rewarded for staying in the ACO
• Marketing and patient communications are strictly regulated
• ACO data access and use is strictly regulated
Q: Do we need to retain records regarding the MSSP ACO?

A. Yes. CMS requires that MSSP ACOs retain all records related to the ACO for a minimum of 10 years after the MSSP ACO agreement period has ended. Beyond the minimum 10-year requirement, you should follow your organization’s record retention policies and procedures.

Please see the MSSP Records Retention Policy on the Oregon ACO LLC website: www.ACOOregon.com
Q: Do we have to check the Office of Inspector General’s List of Excluded individuals prior to hiring employees?

A. Yes, the ACO, ACO Participants, ACO Providers/Suppliers and any contractor or individual that performs functions on behalf of the ACO must check the OIG’s Exclusion List prior to hiring of employees and periodically thereafter. If any member of the ACO community is aware that an ACO Party or any employee of such party has been excluded from participation in the Medicare program, such member must immediately the ACO Compliance Officer. Excluded individuals or entities are prohibited from participation in the ACO.

Please see the Exclusion Screening Requirement Policy on the Oregon ACO LLC website: www.ACOOregon.com
Q: How do I report suspected non-compliance or suspected fraud, waste, or abuse? Also, where do I find more information on the MSSP ACO requirements?

A. You have several choices:

1. Oregon ACO LLC policies and procedures and Code of Conduct are on the Oregon ACO LLC website: www.ACOOregon.com

2. Contact the Oregon ACO LLC Compliance Officer at 503-952-4951 or beames@propelhealth.com

3. Call the Compliance Hotline (callers can remain anonymous) at 844-593-2464

4. Report Medicare fraud, waste or abuse directly to CMS at 1-800-294-8455
Final Recap - Key Takeaways

• This MSSP ACO has unique and important regulatory requirements
• Non-compliance has significant consequences
• Patient referrals may NOT be restricted within the ACO (unless consistent with an employment contract)
• Patients may NOT be rewarded for staying in the ACO
• Marketing and patient communications are strictly regulated
• ACO data access and use is strictly regulated
• Individuals must be screened for Federal Exclusion prior to hire and periodically.
• You can always contact the Compliance Officer with questions
Acknowledgement Form

- Oregon ACO LLC is committed to carrying out its mission in compliance with all federal and state laws and regulations.
- As an employee, agent, officer, director, ACO Participant, ACO Provider/Supplier, contractor or other representative of the ACO, I am obligated to comply with the ACO’s compliance policies and to demonstrate a commitment to honest and responsible corporate conduct. I recognize an obligation to report any unethical, illegal or other potentially improper conduct related to ACO activities that I am aware of or suspect to the ACO Compliance Officer.
- I hereby acknowledge, with my electronic signature, that I have completed the ACO Self-Guided Compliance Training and understand my obligations.