

All Practice and CTO Office Hour with CMMI and the PMO

December 10, 2020

Welcome and Introductions



Platform Logistics

The screenshot displays the MDPCCP meeting interface with several callout boxes and red arrows pointing to specific features:

- Manage audio**: A callout box with a red arrow pointing to the audio control icons (mute, unmute, and a telephone handset icon) in the top toolbar.
- View presentation**: A callout box with a red arrow pointing to the "MDPCP Presentation" header at the top of the main content area.
- Send questions or messages**: A callout box with a red arrow pointing to the "Chat (Everyone)" header on the right side of the interface.
- View closed captioning**: A callout box with a red arrow pointing to the "Closed Captioning" header at the bottom of the main content area.
- Download available resources**: A callout box with a red arrow pointing to the "Resources" header in the bottom right corner.
- Dial in via telephone**: A callout box with a red arrow pointing to the "Dial-In Information" header in the bottom right corner.

The main content area displays the "MDPCP Office Hour" presentation. The "Dial-In Information" panel includes the following text:

Dial-in Number: 1-800-832-0736
Dial-in Number: 9660931#
If you choose the *Dial-in* option, please be sure to enter [blank] in the Audio

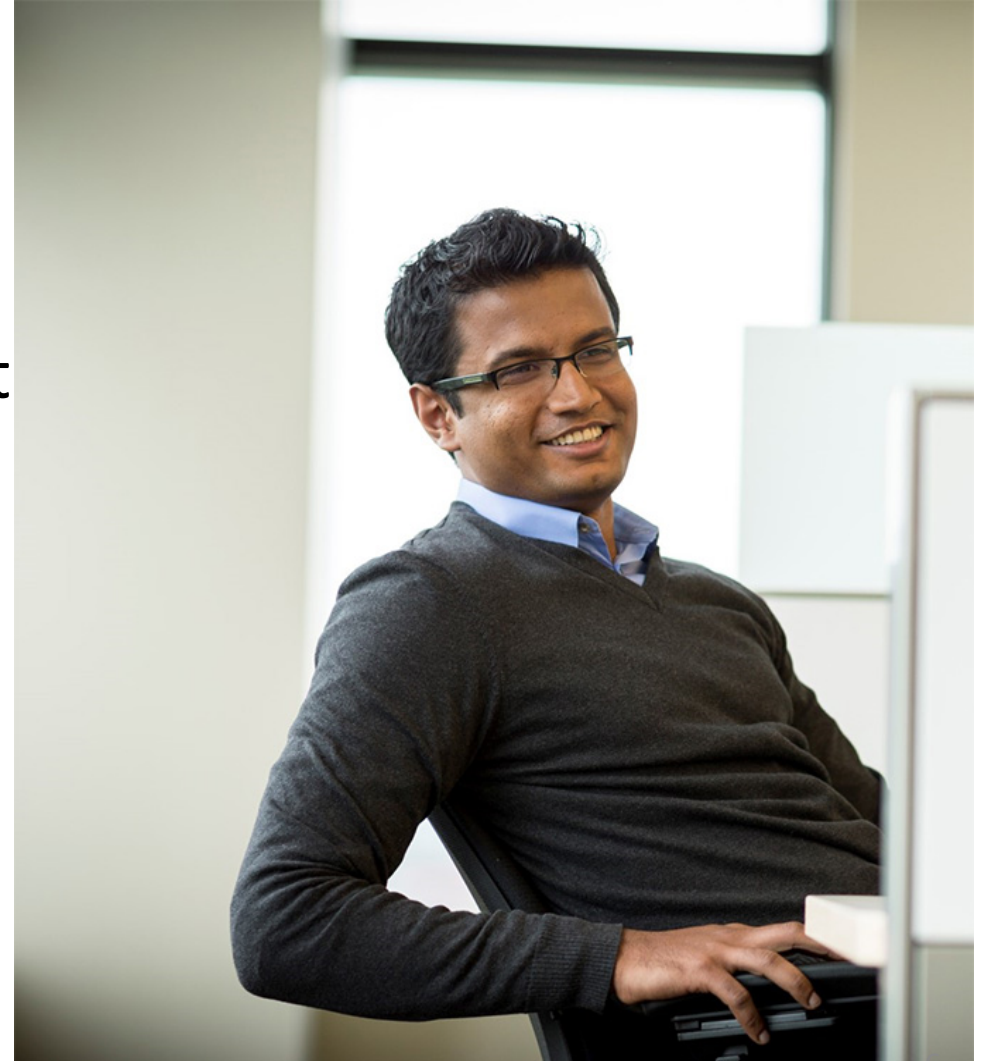
Discussion Topics

- Performance Year (PY) 2019 MDPCP Audits
- PY 2020 CAHPS Overview
- Q&A

Performance Year 2019 MDPCP Audits

Audit Purpose

- Assist CMS in MDPCP compliance oversight and model improvements



Audit Goals

- Substantiate practice-reported data to ensure care delivery services were delivered as reported
- Determine practice and CTO compliance with the provisions of the MDPCP Participation Agreement (PA)
- Provide education to stakeholders, inform policies and program design, and improve model effectiveness

Audit Contractor and Subcontractor Roles

- The Lewin Group (Lewin), with the support of iCareSolutions, has developed and will be executing program compliance audits.
- Practices and CTOs may hear from either Lewin or iCareSolutions in the course of an audit.

How are practices and CTOs chosen for an audit?

- Selection is based on risk assessments performed using MDPCP data
- Combination of various risk elements related to care delivery measures and program compliance measures
- Practices may be selected for follow-up audits based on findings related to the prior Performance Year (PY) audits performed in future performance years

When will I know if my practice or CTO is selected for an audit of PY 2019? How will I be notified?

- The audit team will notify your practice or CTO by email in Q1 2021 for Performance Year (PY) 2019
- Notifications and instructions for MDPCP program compliance audits will be sent to all points of contact (POCs) for your practice or CTO listed in the MDPCP Portal
 - Important to keep POC information updated in the MDPCP Portal
- Notices are sent via email from the Lewin audit team

Where do MDPCP audits take place?

- All audits are conducted remotely

If my practice or CTO is selected for an audit, will the audit cover more than the specified year?

- No, the audit covers only 2019 program compliance data per the terms of your MDPCP Participation Agreement

What is audited during the program compliance audits?

- Evaluation of participant compliance with the MDPCP PA. The audit will focus on:
 - Changes in participant ownership or operations
 - Appropriate use of CMF and CPCP payments
 - No engagement in inappropriate activities such as offering inducements to patients
 - Documentation substantiating the progress of care transformation requirements reported via the MDPCP Portal including:
Empanelment, Risk stratification, Hospital discharge follow-up, and ED visit follow-up

If my practice or CTO is selected for an audit, how will the process begin?

- Your practice or CTO will receive an audit notification package that will include:
 - Notification letter, information and document request list, and the name(s) of your audit team members
- Your practice or CTO will participate in an interactive web-based introductory audit conference and discuss:
 - Audit timeline
 - Documentation request list
 - Due dates for documentation submission
 - Specific instructions for documentation submission
 - Overall audit process

How can our practice or CTO prepare for the financial information part of the program compliance audit?

- Ensure documentation related to your accounting methodologies is organized, accessible, and current
- Other financial documentation may be requested, such as:
 - Written policies and procedures for financial reporting process
 - Accounting system reports
 - Financial statements
 - Payroll reports and Form W-2s
 - Invoices/receipts related to expenditures made with MDPCP funds

How can our practice or CTO prepare for the care delivery transformation portion of the program compliance audit?

- Save documentation used at the time of reporting your care transformation requirements within the MDPCP Portal
 - Ensure the documentation saved incorporates as many data points as possible (e.g., name of patient, date of visit, date of follow-up)
- Care transformation documentation may include:
 - Health care IT reports
 - Screenshots from your EHR
 - Crosswalks for reporting

Will CMS ask other payers for payment information?

- CMS will not ask other payers for payment information or financial reports related to the MDPCP Audit

How long will it take to receive audit results?

- Audit timelines typically span 90–120 days, and may vary depending on:
 - Type of audit performed
 - Practice or CTO size
 - How promptly and completely you respond to auditor's requests for information

Will my practice or CTO receive feedback throughout the audit process or only at the end?

- Feedback throughout the entire audit process is provided, especially as any potential issues arise
- MDPCP audit team coordinates with your practice or CTO's POC to request extra supporting documentation and ask follow-up questions as needed throughout the audit

How will the audit be concluded?

- Evaluate audit findings and provide an exit conference report to the practice/CTO. Findings will be discussed during the exit conference. If no significant findings are uncovered during audit, a notification will be sent to the practice/CTO to inform it of its audit results in lieu of an exit conference
- Provide the practice a specific number of days to resolve audit findings by providing additional supporting documentation or information
- A final audit report with recommended actions will be sent to CMS for approval. Upon approval, the report will be emailed to the practice/CTO

What is the most common audit finding

- Unable to substantiate the information reported in MDPCP Portal
 - Important to keep all the documentation used to report your quality, care delivery, and financial data
- Noncompliance with the MDPCP PA requirements
 - Important to keep documented policy and procedures on your practice or CTO's MDPCP program operations

What are the possible outcomes of MDPCP audits?

- Remember audits are for educational purposes and to assess MDPCP compliance
- Met the audit requirements
 - No further action is required
- Identify audit findings
 - Educational opportunities
 - Serious violations
 - Notice of remedial action
 - Request for corrective action(s)
 - Follow-up audit
 - Repayment of program funds
 - Termination from MDPCP

What if we uncover that our practice or CTO may have misreported or underreported data? When and how should we fix this?

- Notify the MDPCP audit team:
 - Provide the correct information
 - Provide an explanation of why the misreporting or underreporting took place
- If not under audit, please submit a Help Desk ticket with an explanation of reported data error.

What tools are available to my practice or CTO if there are questions about the audit?

Your practice or CTO will have access to the following information regarding the audit process:

- Audit Overview Slides
- Audit Overview Slides provide practices and CTOs with an overview of the audits; detailed and descriptive information on what to expect before, during, and after an audit; and explanations for how to provide required information
- FAQs
- Published FAQs will highlight known compliance challenges and answer common questions received from practices and CTOs

What tools are available to my practice or CTO if there are questions about the audit? (continued)

- Your practice or CTO will have access to the following information regarding the audit process:
 - Audit quick reference guides
 - A brief overview of the types of audits conducted, as well as a high-level explanation of the audit process
 - Dedicated phone line and MDPCP Help Desk
 - Providing direct audit support, guidance for questions, and general compliance support, with a response within 2 business days

PY 2020 CAHPS Overview

C&G CAHPS Survey Overview

- The CAHPS survey is designed to collect information on patients' experiences with the care and services administered by their providers.
- The C&G CAHPS Survey covers topics that are important to consumers and focus on aspects of quality that consumers are best qualified to assess, such as the communication skills of providers and ease of access to health care services.

Why is the C&G CAHPS Survey Important to MDPCP?

- CAHPS composites can inform your practice about how well specific aspects of care are being delivered
- The result of the C&G CAHPS Survey will be the basis of each practice's patient experience of care survey portion of the Performance-based Incentive Payment (PBIP)
 - Practices will earn up to 30% of the PBIP quality payment for C&G CAHPS. See the Payment Methodologies document for more information on the PBIP.
 - MDPCP practices that fail to provide a Patient Survey Roster will not receive a C&G CAHPS score and will not qualify to retain the Quality or Utilization Component of the PBIP.

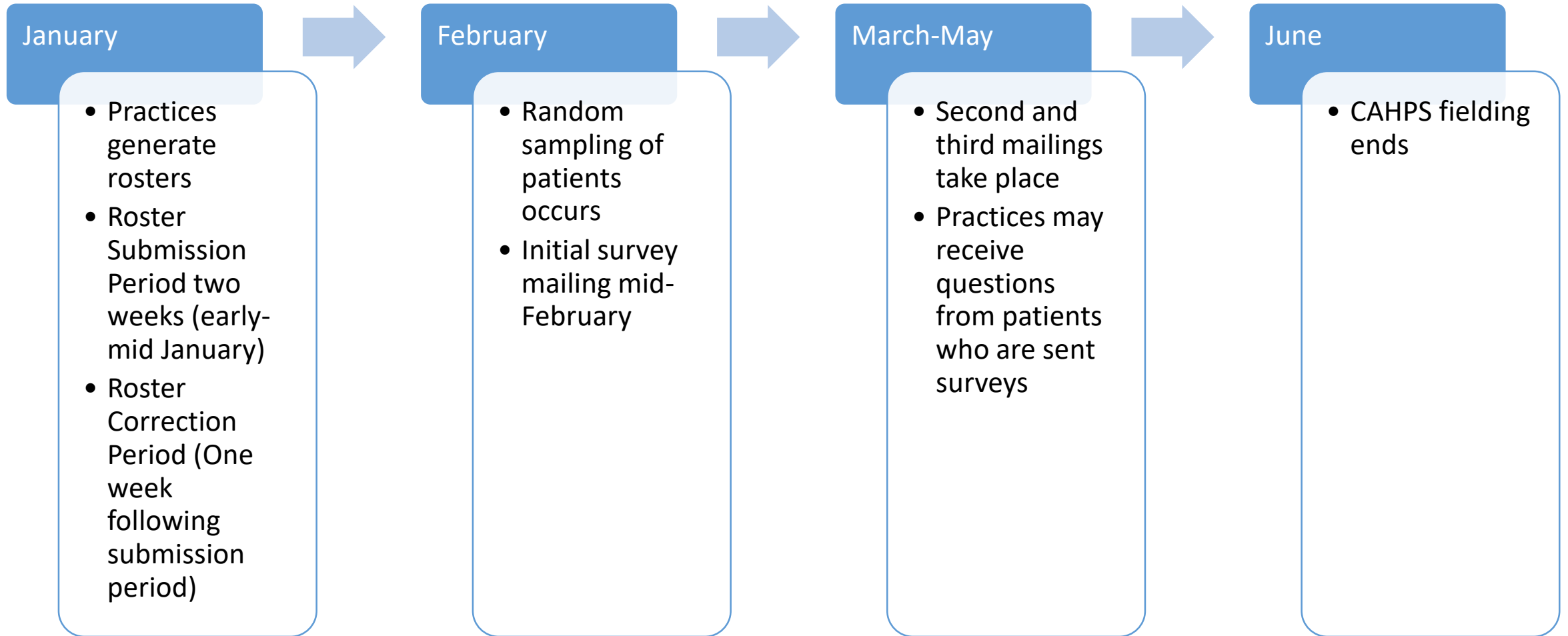
MDPCP C&G CAHPS Survey Logistics

- Practices are **required to generate an ALL-PAYER Patient Survey Roster** that includes all eligible adult patients for the 6-month **Measurement Period, July 1– December 31** of the Performance Year.
- At the end of the measurement period, practices will generate their Patient Survey Rosters. They will submit them to CMS via the MDPCP Portal during a **two-week roster submission window**.
- A random sample of patients from the Patient Survey Rosters are selected to receive a CAHPS Patient Experience Survey.

MDPCP C&G CAHPS Survey Logistics (continued)

- Surveys will be sent to selected patients by US Mail only
 - Up to three survey packet mailings
 - Up to two reminder letter mailings
- Survey materials are available in English and Spanish
 - The 1st survey packet mailing sent to the eligible patients will be in English only
 - The cover letters include instructions for patients to call DataStat to request a copy of the survey materials in Spanish

Timelines and Milestones



Generating Your Patient Survey Roster

- Eligibility Requirements:
 - Adults ages 18 years of age and older as of December 31
 - Adult patient was seen at your practice during the measurement period
 - Measurement period: **July 1-December 31**
 - Visit was scheduled, walk-in, or virtual
 - Visit was with an **eligible provider**
 - Visit was at your **practice**
- MDPCP C&G CAHPS Patient Survey Roster file:
 - Accepted file formats: **.XLSX** or **.XLS** or **.CSV**

Two tabs to populate:

- Patient Survey Roster: One row for each eligible adult patient
- Practice Information

Questions?



Help Desks

Help Desk	Contact Information	Go-To for Questions on
<u>MDPCP Team at CMS and MDPCP Portal</u>	Phone: 1-844-711-2664, Option 7 MarylandModel@cms.hhs.gov	<ul style="list-style-type: none"> • MDPCP Management • Medicare policy relating to the MDPCP • Accessing MDPCP Portal or Creating a New Account • Payments and Attribution • Quarterly Reporting Requirements
<u>MDPCP Learning Network</u>	MDPCP@Lewin.com	<ul style="list-style-type: none"> • Learning Event Content and Logistics • Content you see on Connect • Getting Added to the MDPCP Mailing List • Baseline Assessment
<u>CRISP</u>	Phone: 1-877-952-7477 support@crisphealth.org	<ul style="list-style-type: none"> • Technical Support, including: Clinical Support Tools, eCQM Reporting Tool, and MDPCP Claims Data Reporting Dashboard
<u>MDPCP Connect</u>	Phone: 1-888-734-6433, Option 2 CMMIConnectHelpDesk@cms.hhs.gov	<ul style="list-style-type: none"> • Technical Support relating to your Connect Account • Accessing Connect or Creating a New Account
<u>Maryland Program Management Office</u>	Phone: 410-764-3971 mdh.pcmoel@maryland.gov	<ul style="list-style-type: none"> • State Practice Coaches • State Tools, such as SBIRT, MAT, and Social Needs • How Practices Can Utilize CRISP in the MDPCP • Practices Interested in Applying to the MDPCP

Reminder, always include your practice and CTO MDPCP IDs when sending tickets to the CMS help desk, MarylandModel@cms.hhs.gov. For practices, your MDPCP ID is T#MD####. For CTOs, your ID is CTO0####. If you are a CTO and referring to a specific practice please include that practice's ID in addition to your CTO ID.

Continue the Discussion on Connect



**Universal
Search Bar**



**Posts
Organized
by Topic**



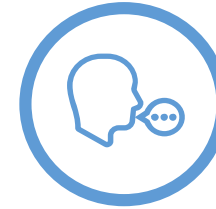
**Sorted
Library**



Notifications



**Homepage
Updates**



**Call to
Action**

MDPCP: Save-the-Dates

More information and registration details are available on the MDPCP Connect Calendar and in the newsletter.

MDPCP Activities	Scheduled Date
PY 2: 2020 Reflection and Looking Forward to 2021 (PMO)	12/10/2020
COVID-19 Update	12/9 & 12/16/2020
COVID-19 Surge: Flash Briefing and Q&A Session (PMO)	12/14/2020
COVID-19 Surge: Flash Briefing and Q&A Session (PMO)	12/28/2020
Pharmacist Affinity Group	1/6/2021
Care Manager Affinity Group	1/12/2021
All Practice and CTO Office Hour	1/14/2021

Your Feedback is Important!

- Please take 3 minutes to complete our survey
- Let us know what would improve your experience
- Your input influences future events



thank you!