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March 25, 2021

Liz Richter Acting Administrator Centers for Medicare and Medicaid Services 7500 Security Blvd. Baltimore, MD 21244 Elizabeth Fowler Deputy Administrator and Director Center for Medicare & Medicaid Innovation Centers for Medicare & Medicaid Services 7500 Security Blvd. Baltimore, MD 21244

Re: Request for Information on Medicare Shared Savings Program and Direct Contracting Model Options

Dear Acting Administrator Richter and Deputy Administrator and Director Fowler,

Vizient and our member hospitals appreciate the adaptability and communications that the Centers for Medicare and Medicaid Services (CMS) and the Center for Medicare & Medicaid Innovation (CMMI) have provided to hospitals and other health care providers participating in alternative payment models (APM) throughout the COVID-19 Public Health Emergency (PHE). As hospitals, providers and patients are coping with the pandemic, a renewed attention is being paid to planning for 2022 given the rapidly approaching application cycle for the Medicare Shared Savings Program, and potentially, Direct Contracting.

Vizient has been closely monitoring announcements from CMS and CMMI to share with our members, as developments related to accountable care organizations (ACOs) are of great importance, particularly for planning purposes. CMS recently announced the Medicare Shared Savings Program (MSSP) application cycle for 2022 will begin on June 1, with phase one of the application due by June 28. As CMS is likely aware, there are more than 140 MSSP ACOs that started their current agreement period in 2018 (before Pathways to Success was implemented) that will be required to make a decision on their ACO this year.

Vizient's members have indicated they are actively considering various tracks in MSSP or Direct Contracting, but current gaps in knowledge are preventing providers from being able to make informed decisions. Further, our members have indicated that several months are needed to properly make such decisions once guidance or rulemaking is released. Given that COVID-19 has resulted in various changes to programs like MSSP, ACO participants need additional time to evaluate these changes before they make decisions for 2022. While Vizient thanks CMS for releasing in December 2020, "Shared Savings and Losses and Assignment Methodology – Specifications of Policies to Address the Public Health Emergency for COVID-19"¹ and in February 2021, "Shared Savings and Losses and Assignment Methodology - Specifications"², several questions still remain unanswered.

¹ <u>https://www.cms.gov/files/document/medicare-shared-savings-program-shared-savings-and-losses-and-assignment-methodology-specifications.pdf</u>

² https://www.cms.gov/files/document/medicare-shared-savings-program-shared-savings-and-losses-and-assignment-methodologyspecifications.pdf-0

Notably, several questions remain for 2022, including how baseline years 2019, 2020 and 2021 will be handled in the MSSP benchmark given the PHE and related impacts on utilization. The benchmark and the methodology for determining the benchmark are among the most important aspects of decision making for participants. Vizient urges CMS to promptly release more information regarding the methodology and the benchmark for those providers starting in 2022 that addresses whether and what modifications, if any, will be made given the baseline years (2019, 2020 and potentially 2021) run in parallel with the PHE. Typically, stakeholders have relied on rulemaking, such as the 2018 "Pathways to Success" rule³ and annual quality payment program rulemaking, for planning purposes (e.g., program structure and methodology) which suggests the baseline would include 2019-2021. Due to the PHE, stakeholders have also looked to interim final rules and CMS guidance for additional information and changes to MSSP.⁴ Should this information not be provided with sufficient time for stakeholders to evaluate their options before the enrollment deadline, we request CMS provide an extension of the enrollment period. Additional flexibility would be particularly helpful given the resource constraints and operational disruptions that have occurred, and persist, due to the PHE.

The lack of information also may impact enrollment for Direct Contracting as ACOs are considering various tracks in the MSSP or Direct Contracting Model. Unlike the MSSP, the window for enrollment in the Direct Contracting Model to start in 2022 has not been announced. However, like the MSSP, ACOs and other potential participants need more immediate clarity on whether Direct Contracting baseline years will remain 2017, 2018 and 2019 for those starting in 2022, as it is for those starting April 1, 2021. Such information is needed to help ACOs evaluate their options.

Vizient is the nation's largest health care performance improvement company. Vizient provides solutions and services that improve the delivery of high-value care by aligning cost, quality and market performance for more than 50% of the nation's acute care providers, which includes 95% of the nation's academic medical centers, and more than 20% of ambulatory providers. Vizient provides expertise, analytics, and advisory services, as well as a contract portfolio that represents more than \$100 billion in annual purchasing volume, to improve patient outcomes and lower costs. Headquartered in Irving, Texas, Vizient has offices throughout the United States.

Thank you for considering this information and request. Again, Vizient recommends that CMS and CMMI provide more information in a timely manner regarding 2022 participation in MSSP and Direct Contracting. Please do not hesitate to contact me at shoshana.krilow@vizientinc.com or 202-354-2607 if you have any questions about Vizient or if there is any way we can be of assistance.

Sincerely,

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Shoshana Krilow Senior Vice President, Public Policy & Government Relations

³ https://www.govinfo.gov/content/pkg/FR-2018-12-31/pdf/2018-27981.pdf

⁴ https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/news