



MASSACHUSETTS
Health & Hospital
ASSOCIATION

Proposed 2019 Accountable Care Organization (ACO) Certification Standards

On behalf of our member health systems, hospitals and physician organizations, the Massachusetts Health and Hospital Association (MHA) appreciates the opportunity to submit comments on the Health Policy Commission's (HPC's) proposed 2019 Accountable Care Organization (ACO) Certification Standards. MHA had provided comments on the initial proposed ACO standards in October 2018 and we are grateful that the HPC seriously considered feedback from healthcare providers and made a number of modifications as a result. As the HPC formally proposes changes to certification standards, MHA values the opportunity to offer additional feedback.

General Comments

We continue to be concerned about the additional administrative burden that results from multiple requests for more data and information. We strongly recommend that the HPC limit the questions and required data to information that specifically supports the goals of the certification program which is ultimately designed to encourage value-based care delivery. We also see opportunities to better align these goals with those of the Registered Provider Organization (RPO) and Risk Bearing Provider Organization (RBPO) processes. Since many of the questions seek the same or similar information, it would be greatly appreciated if the HPC could work with the Division of Insurance (DOI) and the Center for Health Information Analysis (CHIA) towards developing a single process for providing information one time per year rather than endure separate RPO, ACO and RBPO data collection efforts for those organizations that are subject to all three. We encourage the HPC to pursue a process allowing ACOs to attest these requirements have been met and for the HPC to obtain the information from CHIA and DOI. The HPC states that one of its core program values is to increase public transparency while balancing administrative burden for Massachusetts providers. This is one place where that can be accomplished without sacrificing any data needs.

We also want to reiterate the importance of continuing to recognize that flexibility is needed by ACOs in meeting and responding to certification requirements. As we noted in our October comments, a "one size fits all" approach requiring all ACOs to focus broadly on numerous different areas could actually have unintended consequences, including compromising the focus of the ACO. Lastly, MHA members had noted that the HPC's electronic platform was not user friendly and could be improved to lessen frustration and expedite the process of completing the questions. We hope that the HPC was able to undertake steps to address these issues with its platform.

Administrative Burden & Scope of the Certification Process

We appreciate that the HPC made a number of changes to its supplemental questions based on earlier provider feedback. However, we remain concerned with the number of these questions which will add to the burden of completing the certification requirements. We are also concerned that some of these questions are beyond the scope of the ACO certification program and we question their inclusion. For example, it does not appear that the very specific questions on coding strategy are germane to the goals of the ACO certification program. We recommend this question be eliminated as it is unclear how this will enhance the certification process. If it is to be included, we would appreciate a better understanding of why the HPC is requesting this information. Similarly, the question on price variation and referral decisions is one that does not seem to directly related to the certification of ACOs.

Risk Contract Template

The proposed certification standards would require the ACO to complete a detailed risk contract information template. The DOI already requires RBPOs to provide a description of the level and nature of risk including details about number of members covered under alternative payment contracts. The registered provider organization data submission manual requires contracting entities to provide extremely detailed information on contractual arrangements with commercial carriers and government payers. Thus, it appears that the HPC's risk contract information template duplicates at least some of the data requirements that are solicited through the RBPO and RPO processes. In addition, it is not clear why the HPC needs to collect this information at this extraordinary level of detail given the administrative burden that it would create. MHA respectfully recommends that the HPC consider whether it can either obtain the data it needs through the RBO or RBPO processes and/or reduce data risk contract information that is required for ACO certification.

ACO Distinction Program

While we recognize and appreciate the HPC's objectives in proposing a distinction program, we believe that it is premature to launch such a program in 2019-2020. There is not enough scientific evidence yet to identify with certainty which measures should be followed for achieving best practices and whether those measures can effectively be used to distinguish an ACO. There also does not appear to be any incentive for an ACO to pursue a distinction program. MHA recommends that the HPC consider eliminating the distinction program at this time and work with ACOs over the coming years to develop a program as we all gain more knowledge about which measures truly result in performance improvement.

As always we thank you for the opportunity to submit comments. If you have any questions, please don't hesitate to contact Karen Granoff, Sr. Director Managed Care at 781-262-6035 or KGranoff@mhalink.org