



# Medicare Shared Savings Program



## *Medicare Shared Savings Program Application: HPMS Training*

*Presented by:*

Centers for Medicare & Medicaid Services

July 7, 2016

# Disclaimer

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# Introduction

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**Karmin Jones**

**Division of Applications, Compliance & Outreach  
Performance-Based Payment Policy Group  
Centers for Medicare & Medicaid Services**



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# Agenda

- Application Deadlines, Webinars, and Submission Process
- Application Toolkit
- Track Selection Options for the 2017 Application Submission Process
- HPMS ACO Application Submission Training
- HPMS ACO Participant List Management Module Training
- HPMS ACO SNF Affiliate List Management Module Training
- Submitting Your Completed Application(s)

# Application Cycle: Submission Deadlines

Application Process	Deadlines <sup>1</sup>
Applications Submission Period (for all applications <sup>2</sup> )	July 1, 2016– July 29, 2016
<b>Applications Due (for all applications<sup>2</sup>)</b>	<b>July 29, 2016, at 5:00pm Eastern Time</b>
First Request for Information (RFI-1) response due from applicants	September 6, 2016
Second Request for Information (RFI-2) response due from applicants	October 5, 2016
Third Request for Information (RFI-3) response due from applicants	October 26, 2016
Application Approval or Denial Decision Sent to Applicants	Late Fall 2016
Reconsideration Review Deadline	15 Days from Notice of Denial

<sup>1</sup>All deadline dates are subject to change.

<sup>2</sup>The SNF 3-Day Waiver application is available to ACOs not currently participating in the program (initial applicants), currently participating ACOs with a 2014 start date that intend to renew (renewal applicants), and currently participating ACOs. Your ACO must be applying for the two-sided risk model under Track 3 or currently participating in Track 3 to be eligible to apply for the SNF 3-Day Waiver.

# Upcoming Application Webinars

- Upcoming calls for pending applicants (by invitation only):
  - July 14: ACO Application Question & Answer Session
  - Aug 25: How to Respond to Your First Request for Information
  - Sept 29: How to Respond to Your Second Request for Information
  - Nov 7: 2017 Initial and Renewal Application Training on the HPMS Electronic Signature Management Module
  
- Dates are subject to change. We will send direct emails through HPMS to announce the details of these calls.
  
- For more information, go to our [Teleconference and Event Page](#).

# Application Submission Process

- The 2017 Medicare Shared Savings Program application submission period is open from Friday, July 1 through Friday, July 29, 2016.
- CMS will not process applications received after the deadline of **July 29, 2016 at 5:00pm Eastern Time**.
- Applications must be received through the Health Plan Management System (HPMS). Paper applications are not accepted.
- If you are an initial applicant and miss the application submission deadline for the 2017 performance year, your next opportunity to apply will be in 2017 for the 2018 program start date.
- If you are a renewing ACO and miss the application submission deadline for 2017, your participation in the program will terminate at the end of your third performance year. To re-enter the program, you would have to apply in 2017 for 2018 as a new ACO entering your first agreement period.
- The initial, renewal, and SNF 3-Day Waiver applications all follow the same deadlines. If you are applying to the Shared Savings Program and the SNF 3-Day Waiver, you are required to respond to both applications completely and timely.

# Application Toolkit

The complete Application Toolkit is available on [2017 Medicare Shared Savings Program Toolkit](#) web page and includes, but is not limited to, the following documents:

- **Sample Application Forms (not for submission)**
  - [2017 Shared Savings Program Application Form \(for Initial Applicants\)](#): For new applicants to the Shared Savings Program
  - [2017 Shared Savings Program Renewal Application Form \(for Renewal Applicants\)](#): For ACOs renewing their agreement with the Shared Savings Program
  - [2017 SNF 3-Day Waiver Application Form \(only available to Track 3 ACOs\)](#): For SNF 3-Day Rule Waiver applicants (only available to Track 3 ACOs)
- **Guidance Documents**
  - Application Reference Manual
  - ACO Participant List and Participant Agreement Guidance
  - SNF 3-Day Waiver Guidance
  - Banking Form (Form CMS-588) Guidance
- **Templates and Instructions**
  - Form CMS-588
  - Governing Body Template and Instructions
  - ACO Participant Agreement Template and Instructions
  - SNF Affiliate List Agreement Template and Instructions
- The Application Toolkit is available at: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/MSSP-Toolkit.html>

# CMS User ID Guidance

- Your NOIA confirmation email includes instructions on how to get a CMS User ID
- If you have not already done so, send the completed CMS User ID Form 20037 via tracked mail (e.g. FedEx) to CMS immediately:

Centers for Medicare & Medicaid Services  
Attention: HPMS Access  
Mail Stop: C4-18-13  
7500 Security Boulevard  
Baltimore, MD 21244-1850

- Allow 3-4 weeks to process your request. If you have questions after this time, send an email to [HPMS\\_Access@cms.hhs.gov](mailto:HPMS_Access@cms.hhs.gov).
- If you have questions about your consultant authorization letter, send an email to [HPMSConsultantAccess@cms.hhs.gov](mailto:HPMSConsultantAccess@cms.hhs.gov).

# Application Reference Manual - Appendices

The 2017 Application Reference Manual includes five Appendices to assist you in the completion of your application:

- Appendix A – Organizational Structure: Used to assist Initial and Renewal applicants in determining the required responses based on their structure.
- Application Reference Tables provide question-by-question instructions and guidance to assist you in answering application questions accurately and completely:
  - Appendix B Application Reference Table – For Initial Applicants
  - Appendix C Application Reference Table – For Renewal Applicants
  - Appendix D Application Reference Table – For SNF 3-Day Waiver Applicants
- Include your ACO Legal entity name and ACO ID with all document uploads according to the instructions found in the Application Reference Tables.
- Use the file naming conventions for each document and section upload zip file name as instructed in Application Reference Table.
- Appendix E – Claims and Claims Line Feed files: Used to assist Initial and Renewal applicants for the type of data received from CMS in regards to the data sharing questions in the application.

# Application Reference Manual - Appendices (cont.)

## Application Reference Table Layout (Appendix B, C and D):

- **Page 1:** Includes the section zip file naming convention and Application Reference Table Layout.
- **Column 1:** Gives you the application question number (Q#), if applicable, and provides space so you may check-off completed items as you complete your application in HPMS.
- **Column 2:** Gives you the application question description and instructions on how to respond, and what, if any, documentation must be uploaded to support your response.
- **Column 3:** Lists the regulation reference.
- **Column 4:** Tells you if supporting documents or a narrative is required, and the document file naming convention.

# Application Reference Manual: Application Reference Table Example

Section 5 – Tell us about your ACO’s governing body			
Q#	Description /Instructions	Regulation Reference	Support Documents / Narrative Required
13.	<p>Certify your ACO governing body has a conflict of interest policy – Indicate whether a conflict of interest policy exists for the governing body. Please note that the conflict of interest policy must meet the requirements specified in the <a href="#">regulations</a>.</p> <p>By selecting YES, you certify that your conflict of interest policy:</p> <ol style="list-style-type: none"> <li>Requires each member of the governing body to disclose relevant financial interests;</li> <li>Provides a procedure to determine whether a conflict of interest exists, and sets forth a process to address any conflicts that arise; and</li> <li>Addresses remedial action for members of the governing body that fail to comply with the policy.</li> </ol>	§425.106 (d)	No
14.	<p>Your governing body template – Upload the names, titles (e.g. Chair, Vice-Chair), and responsibilities for all members of the governing body. See the <a href="#">Governing Body FAQs</a> for additional information.</p> <p>Please use the <a href="#">How To-Governing Body Template Instructions</a> to submit the <a href="#">Governing Body Template</a> identifying:</p> <ol style="list-style-type: none"> <li>All governing body members;</li> <li>Position each member holds on the governing body;</li> <li>Voting power of each governing body member; and</li> <li>Indicate which ACO participant the governing body member represents; or indicate if the governing body member is a Medicare beneficiary representative, community stakeholder representative, or other.</li> </ol> <p><b>NOTE:</b> The Governing Body Template completes this requirement.</p> <p>Confirm that your response is consistent with the guidance in <a href="#">Appendix A</a>:</p> <ul style="list-style-type: none"> <li><a href="#">Section A. Organization Structure Description</a> for definitions on the most common types of organization structures for the Medicare Shared Savings Program</li> </ul>	§425.308 (c)(3) §425.106	Yes, required. Name your file: Axxxx_S5_Q14_GovBody_mmddyyyy.pdf

# Medicare Shared Savings Program Track Selection

- Initial and Renewal applicants may change their program track selection on the Basic Agreement Data Page in HPMS from July 1 through July 29, 2016 by 5:00 p.m. Eastern Time. Revisions after this deadline, can only be processed by CMS.
- Please be mindful that changing tracks after the Application Submission Period closes shortens an applicant's time to accurately and completely submit their application accordance with program requirements.
- Section 2 of the application instructs you to select one of the following:
  - Track 1 (one-sided model, shared savings),
  - Track 2 (two-sided model; shared savings/losses), or
  - Track 3 (two-sided model, shared savings/losses)
- If you select a two-sided model (Track 2 or Track 3), you are also required to select one of the following repayment mechanism options:
  - Funds placed in escrow
  - Surety bond
  - Line of credit as evidenced by a letter of credit that the Medicare program could draw upon
  - Combination of the above options
- If you select Track 3, you will also be given the opportunity to apply for the SNF 3-Day Waiver. If you made this selection during your NOIA submission, the SNF 3-Day Waiver Application is available to you when selecting your application type.

# Medicare Shared Savings Program Track Selection (cont.)

- Renewing ACO applicants who select a two-sided risk model under Track 2 or Track 3 also have the option to defer their entrance into a two-sided risk model and will be given the following options on the Basic Agreement Data Page in HPMS (depending on Track selected):
  - Extend your first agreement period under Track 1 for a fourth performance year and participate under **Track 2** (two-sided model: shared savings/losses) for your second agreement period.
  - Extend your first agreement period under Track 1 for a fourth performance year and participate under **Track 3** (two-sided model: shared savings/losses) for your second agreement period.
- If you choose to extend your first agreement period under Track 1 for a fourth performance year and participate under Track 3, you will not be given the opportunity to apply for the SNF 3-Day Waiver during this Application Submission Period. You may apply for the SNF 3-Day Waiver during the 2017 Application Cycle for the 2018 performance year.

# Medicare Shared Savings Program Track Selection (cont.)

- If you identify that you need to change your Track after July 29, 2016, send an email to [SSPACO\\_Applications@cms.hhs.gov](mailto:SSPACO_Applications@cms.hhs.gov), following the instructions in the “How to Request Changes to Pre-Populated Information” section of the [Application Reference Manual](#).
  - The request must be received from an authorized ACO contact: ACO Executive, Authorized to Sign (primary or secondary), CMS Liaison, or Application Contact (primary or secondary).
  - Identify the track as it currently appears in HPMS; provide the corrected track and the repayment mechanism selection, if applicable.
- The final opportunity to request to change to a two-sided risk model (Track 2 or Track 3) or change selection of risk track, and submit a SNF 3-Day Waiver Application (Track 3 ACOs only) is in response to RFI-1.
- Once an ACO is approved to participate in the program, the ACO must remain under the track they are approved to participate under and may not change tracks during the agreement period.

# HPMS ACO Application Submission Training

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# Agenda

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- HPMS Homepage
- SSP ACO Agreement Management Start Page
- HPMS Quick Reference Guide
- Basic Agreement Data
- Contact Data
- SSP ACO Application Submission Start Page, PY 2017
- Attestation Data
- Upload Application File
- Final Submit

# HPMS Homepage

ACO Management

**Important Notice:**

## HPMS Memos

There are no active memos. Select the more link to view archived memos.

[More »](#)



## Announcements My Favorites

There are no active announcements. Select the more link to view archived announcements.

[More »](#)



# HPMS Homepage: Content

- User Resources located in the upper right next to user's name
  - FAQ–Good first place for questions/issues with HPMS
  - User Account Management– update your HPMS contact information
- To access ACO modules, click “ACO Management” and select a module from the drop down list.

# HPMS Homepage: Content (cont.)

The screenshot displays the HPMS homepage content. At the top, there is a green header bar labeled "ACO Management". Below it is a dark blue navigation menu with a white minus sign. A green dropdown menu is open, listing the following items: "SSP ACO Agreement Management", "SSP ACO Application Submission", "SSP ACO Participant List Management", "SSP ACO SNF Affiliate List Management", "SSP ACO Electronic Signature Management", and "SSP ACO Reports". A yellow arrow points to the first item. Below the navigation menu, there is a blue button. To the right of the button is a photo of a male doctor in a white coat and a female nurse in purple scrubs, both looking at a tablet. Below the photo, there are two tabs: "Announcements" and "My Favorites". The "Announcements" tab is active, showing the text: "There are no active announcements. Select the more link to view archived announcements." and a "More »" link. The "My Favorites" tab is inactive. Below the announcements section, there is a large empty white box.

# SSP ACO Agreement Management Start Page

ACO Management

Home » SSP ACO Agreement Management

## SSP ACO Agreement Management Start Page



The SSP ACO Agreement Management module supports the electronic entry and view of the Shared Savings Program ACO entity agreement data and Shared Savings Program ACO contact data.

**ACO Management**

- Agreement Selection**
  - Select Agreement
- General Information**
  - Basic Agreement Data
  - View Basic Agreement Data
- Contact Information**
  - Contact Data
  - View Contact Data
- Documentation**
  - ACO Module User Manual

CV: 1.23.0.0

Home | About HPMS | Website Accessibility | Web Policies | File Formats and Plug-Ins | Rules Of Behavior | System Requirements | [FAQ](#)

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# SSP ACO Agreement Management Start Page (cont.)

- After selecting your agreement number (ACO ID) from the “Select Agreement” link, you will be sent to your “SSP ACO Agreement Management Start Page”.
- Your “SSP ACO Agreement Management Start Page” is the page from which you navigate to different links to complete Sections 1 and Section 2 of the Initial and Renewal application.
- The “SSP ACO Agreement Management Start Page” also contains your ACO ID, ACO Agreement status, Application status, and Program Start Date.
- “Breadcrumbs” will remain at the top of each HPMS page you access continue as you navigate through HPMS modules.

# ACO Module User Manual

ACO Management

Home » SSP ACO Agreement Management

## SSP ACO Agreement Management Start Page



The SSP ACO Agreement Management module supports the electronic entry and view of the Shared Savings Program ACO entity agreement data and Shared Savings Program ACO contact data.

**ACO Management**

- Agreement Selection**
  - Select Agreement
- General Information**
  - Basic Agreement Data
  - View Basic Agreement Data
- Contact Information**
  - Contact Data
  - View Contact Data
- Documentation**
  - [ACO Module User Manual](#)

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Do you want to open or save **ACO User Manual.pdf** (372 KB) from **hpms.cms.gov**? Open Save Cancel X

# HPMS Quick Reference Guide

## HPMS Quick Reference Guide: How to Update Shared Savings Program (SSP) Accountable Care Organization (ACO) Data and View Reports

### GETTING STARTED

#### ACCESS THE SSP ACO AGREEMENT MANAGEMENT START PAGE

- On the **HPMS Home Page**, select **ACO Management** from the top navigation bar.
- On the flyout menu, click **SSP ACO Agreement Management**.



# HPMS Quick Reference Guide (cont.)

- Under ACO Management>>SSP ACO Agreement Management >> Documentation, you will find the ACO Module User Manual link, which launches the HPMS Quick Reference Guide.
- This HPMS Quick Reference Guide provides a high level overview of how to navigate through the SSP ACO modules.
- We encourage you to download and read the ACO Application Tool Kit PRIOR to completing any part of your application. The ACO Application Toolkit contains links to guidance, instructions, templates, and other documents needed to accurately complete your application.

# SSP ACO Agreement Management Start Page: Basic Agreement Data

ACO Management

Home » SSP ACO Agreement Management

## SSP ACO Agreement Management Start Page



The SSP ACO Agreement Management module supports the electronic entry and view of the Shared Savings Program ACO entity agreement data and Shared Savings Program ACO contact data.

CV: 1.23.0.0

- ACO Management
  - Agreement Selection
    - Select Agreement
  - General Information
    - Basic Agreement Data
    - View Basic Agreement Data
  - Contact Information
    - Contact Data
    - View Contact Data
  - Documentation
    - ACO Module User Manual

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# Basic Agreement Data

ACO Management

Home » SSP ACO Agreement Management » Basic Agreement Data

### Basic Agreement Data

ACO Management +

Enter updates for Z0001

\*Required fields are marked with an asterisk.

Note: You can change your Medicare Shared Savings Program Track at this time. Confirm or change your Track selection below.

Note: The Current Medicare Shared Savings Program Track for 2016 is: Track 1 (one-sided model: shared savings)

**Agreement Start** January 1, 2014

**Date:** January 1, 2017 , Pending

**Renewal Effective Date, Status:**

**Application Type:** Renewing Medicare Shared Savings Program Applicant

**ACO Entity:** Partnerships or joint venture arrangements between hospitals and ACO professionals

**Proposed Medicare Shared Savings Program Track for Renewal:** Select the Medicare Shared Savings Program Track the applicant is filing for:  
Track 3 (two-sided model: shared savings/losses)

If you are currently participating under Track 1 and applying to extend your first agreement period under Track 1 for a fourth performance year and are deferring by one year your entrance into a second agreement period under a performance-based risk model (Track 2 or Track 3), you must submit this renewal application as a Track 2 or Track 3 ACO and meet all repayment mechanism requirements per 42 CFR 425.204. If you select this option to extend, you must select the option below.

Extend your first agreement period under Track 1 for a fourth performance year and participate under **Track 3** (two-sided model: shared savings/losses) for your second agreement period.

#### ACO Applicant Legal Entity Demographics

**ACO Legal Entity Name:** EXAMPLE LEGAL NAME

**Trade Name/DBA:** Example Trade name

**ACO Web Page:** www.test.com

**ACO Public Reporting Web Page:** www.test.com

**\*Address 1:** 123 Main Street

**Address 2:**

**\*City:** Arlington

**\*State:** Virginia

**\*ZIP/Postal Code:** 22201

**ACO Taxpayer Identification Number (TIN):** 123321212  
Note: This is the TIN established for the ACO as a legal entity. Shared savings payments are made to this TIN.

**Date of Formation (MM/DD/YYYY):**

**Tax Status:** For Profit

**Your Business Structure:** Sole Proprietorship

**Beneficiary Identifiable Data Sharing Allowed:**

**\*Proposed Repayment Mechanism for Renewal:** What repayment mechanism will you use to repay CMS for any losses, or other monies owed to CMS?  
(Check all that apply)

Funds Pledged in Escrow

Surety Bonds

A line of credit the Medicare program can draw upon, as evidenced by a letter of credit

Note: The repayment mechanism must be capable of repaying an amount of shared losses equal to at least 1 percent of total per capita Medicare Parts A and B fee-for-service expenditures for your assigned beneficiaries based on expenditures for the most recent performance year or expenditures used to establish the benchmark.

# Basic Agreement Data (cont.)

- Some information is pre-populated from the information provided in your NOIA and information on file for renewing ACOs.
- ACOs can edit the following information:
  - Medicare Shared Savings Track\*
  - ACO Trade Name or DBA
  - ACO Web Page
  - ACO Address 1, Address 2, City, State, and Zip Code/Postal Code
  - ACO Tax Status

# Basic Agreement Data (cont.)

- Information that can only be edited by CMS (after NOIA submission):
  - Application Type
  - ACO Entity Type
  - Medicare Shared Savings Program Track (after Application Submission Period, 7/29/2016)
  - ACO Tax Identification Number (ACO TIN)
  - ACO Legal Entity Name
  - Date of Formation (MM/DD/YYYY)
  - ACO Business Structure
  - Beneficiary Identifiable Data Sharing Allowed Indication
  - CMS Coordinator
  - Data Use Agreement (DUA) Number
  
- If you identify an error in information you cannot edit, follow the instructions in the 2017 Application Reference Manual to request a change to pre-populated information.

# SSP ACO Agreement Management Start Page: Contact Data

**ACO Management**

Home » SSP ACO Agreement Management

## SSP ACO Agreement Management Start Page

The SSP ACO Agreement Management module supports the electronic entry and view of the Shared Savings Program ACO entity agreement data and Shared Savings Program ACO contact data.

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Home | About HPMS | Website Accessibility | Web Policies | File Formats and Plug-Ins | Rules Of Behavior | System Requirements | FAQ  
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# Contact Data

ACO Management

Home » SSP ACO Agreement Management » Contact Data

ACO Management    O Management

### Contact Data

Enter updates for Z0001

\*Required fields are marked with an asterisk.  
**ACO Legal Entity Name:** EXAMPLE LEGAL NAME

**Select Contact to Copy From:**  
 ACO Executive (Authorized Official)    >> Copy >>

**Select Contact(s) to Copy To:**  
 ACO Executive (Authorized Official)  
 CMS Liaison (Primary Contact)  
 Application Contact (Primary)  
 Application Contact (Secondary)

Contact Type	Contact Name	Phone/Email	Mail Address	Mail Location/Other
ACO Executive (Authorized Official) (Required. ESN Designee)	Prefix	*Phone 5555555555	*Address 123 Main St.	*State Virginia
	*First John	Ext.		*ZIP 22201
	MI	*Email test@test.com	*City Arlington	CMS User ID (for ESM access) abcd
	*Last Test			
	Title			
CMS Liaison (Primary Contact) (Required)	Prefix	*Phone 5555555555	*Address 123 Main St.	*State Virginia
	*First John	Ext.		*ZIP 22201
	MI	*Email test@test.com	*City Arlington	
	*Last Test			
	Title			
Application Contact (Primary) (Required)	Prefix	*Phone 5555555555	*Address 123 Main St.	*State Virginia
	*First John	Ext.		*ZIP 22201
	MI	*Email test@test.com	*City Arlington	
	*Last Test			
	Title			

# Contact Data (cont.)

One individual can serve as more than one ACO contact. However, we recommend you diversify your contacts by identifying more than one person to serve each role. Please refer to Section 3.1 of the Application Reference Manual for further guidance about ACO contacts.

■ **Contacts Required With Application Submission:**

- ACO Executive (Authorized Official) (ESM Designee)
- CMS Liaison (Primary Contact)
- Application Contact (Primary)
- Information Technology (IT) Contact (Primary)
- Financial Contact
- Compliance Contact
- Authorized To Sign (Primary) (ESM Designee)
- DUA Requestor (ESM Designee)
- DUA Custodian (ESM Designee)
- Medical Director

■ **Contacts Required Upon Application Approval:**

- Authorized to Sign (Secondary) (ESM Designee)
- Quality Contact (Primary)
- Quality Contact (Secondary)
- Marketing Contact (Primary)
- Marketing Contact (Secondary)
- Public Contact

■ **Optional Contacts:**

- Application Contact (Secondary)
- IT Contact (Secondary)

**NOTE:** All fields indicated on the HPMS Contact Data Screen with a red asterisk (\*) are required and must be entered at one time.

# SSP ACO Application Submission Start Page

ACO Management

- SSP ACO Agreement Management
- SSP ACO Application Submission
- SSP ACO Participant List Management
- SSP ACO SNF Affiliate List Management
- SSP ACO Electronic Signature Management
- SSP ACO Reports

s. Select the more link to

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There are no active announcements. Select the more link to view archived announcements.

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# SSP ACO Application Submission Start Page - PY 2017

ACO Management

Home » SSP ACO Application Submission » PY 2017

## SSP ACO Application Submission Start Page, PY 2017



The SSP ACO Application Submission module supports the electronic view and submission of application data and documents to participate in the Shared Savings Program.

ACO

PY 2017

- Select Agreement
- Attestation Data
- Upload Application Files
- Participant List
- SNF Affiliate List
- Download Application Toolkit
- Final Submit

PY 2016

PY 2015

PY 2014

PY 2013

PY 2012

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# SSP ACO Application Submission Start Page, PY 2017 (cont.)

- Start at the ACO Management Page, select SSP ACO Application Submission from the drop down, click on PY 2017 at the right.
- To complete the online application, the applicant must take the following actions in HPMS:
  - Download Application Toolkit
  - Enter Attestation Data
  - Upload Application Files, by section (supporting documentation)
  - Submit ACO Participant List change requests
  - Submit SNF Affiliate List change requests (SNF 3-Day Waiver Applicants only)
  - Final Submit

# Enter Attestation Data

Section 4 - Your ACO legal entity		
2a	<b>ACO Legal Entity</b> I certify that my ACO is a legal entity that meets the requirements of 42 CFR 425.104.	<input type="radio"/> <b>Yes</b>
2b	Submit a narrative describing any substantive changes to your organization and/or affiliations since the approval of your initial application.	*
3	I certify that my ACO meets the governing body requirements under 42 CFR 425.106, including having a identifiable governing body with ultimate authority to execute the functions of your ACO as defined in the Medicare Shared Savings Program regulations at 42 CFR Part 425.	<input type="radio"/> <b>Yes</b> <input type="radio"/> <b>No</b>
4	I certify that my ACO's leadership and management meet the requirements of the Shared Savings Program at 42 CFR 425.108.	<input type="radio"/> <b>Yes</b>
5	Submit your ACO's organizational chart showing the flow of responsibility. Include committees and the name of each committee member, as well as the key senior administrative and clinical leaders of your ACO. Include any affiliations, such as a parent company, if applicable.	*
6	Submit your ACO's governing body template.	*
Section 5 - Managing your ACO's shared savings		
7	Select your symmetrical Minimum Loss Rate (MLR)/ Minimum Savings Rate (MSR) for your 3-year agreement period (Select One).  Note: ACOs applying under Track 1 must select N/A. ACOs applying under Track 2 or Track 3 must select any other option.  <ul style="list-style-type: none"> <li>▪ 0.0% MLR/MSR</li> <li>▪ 0.5% MLR/MSR</li> <li>▪ 1.0% MLR/MSR</li> <li>▪ 1.5% MLR/MSR</li> <li>▪ 2.0% MLR/MSR</li> <li>▪ Symmetrical Variable MLR/MSR (based on the size of your ACO's assigned population)</li> <li>▪ N/A (Select this option if you are applying under Track 1)</li> </ul>	<input type="radio"/> 0.0% MLR/MSR <input type="radio"/> 0.5% MLR/MSR <input type="radio"/> 1.0% MLR/MSR <input type="radio"/> 1.5% MLR/MSR <input type="radio"/> 2.0% MLR/MSR <input type="radio"/> Symmetrical Variable MLR/MSR <input type="radio"/> N/A
8	<b>Banking Information</b> I certify that my banking information on file with CMS for the Shared Savings Program is current.  Note: See the <a href="#">Application Reference Manual</a> for instructions on contacting CMS to confirm what is currently on file for your ACO.	<input type="radio"/> <b>Yes</b> <input type="radio"/> <b>No</b>
Section 6 - Your ACO participants		
9	Submit your ACO Participant List and ACO Provider/Supplier List by confirming through HPMS	

# Enter Attestation Data (cont.)

- All attestations must be completed.
  - Attestation answers are evaluated electronically and edits exist to ensure that conflicting answers are flagged.
  - One answer may be limited by another answer.
  - Once you click “Final Submit”, you will receive an error message, if any attestation answers are conflicting. You must correct your responses in order to submit your application.
- Attestations that include an asterisk (\*) in the “Upload May Be Required” column, indicate that you may be required to upload supporting documentation based on your response.

# Upload Application Files

Home » SSP ACO Application Submission » PY 2017

## SSP ACO Application Submission Start Page, PY 2017



The SSP ACO Application Submission module supports the electronic view and submission of application data and documents to participate in the Shared Savings Program.

- ACO
  - PY 2017
    - Select Agreement
    - Attestation Data
    - Upload Application Files
    - Participant List
    - SNF Affiliate List
    - Download Application Toolkit
    - Final Submit
  - PY 2016
  - PY 2015
  - PY 2014
  - PY 2013
  - PY 2012

CV: 1.23.0.0



# Upload Application Files (cont.)

ACO Management

Home » SSP ACO Application Submission » PY 2017 » Upload Application Files

## Upload Application Files

ACO +

**Upload for Z0001, PY 2017, Initial (for 2017)**

Application section(s) that may require an upload:

Section	Description	Last Uploaded File	Last Upload Date	Upload History	File to Upload
4	Section 4 - Tell us about your ACO's legal entity				<input type="text" value="Browse..."/>
5	Section 5 - Tell us about your ACO's governing body				<input type="text" value="Browse..."/>
6	Section 6 - Tell us about your ACO's leadership and management				<input type="text" value="Browse..."/>
7	Section 7 - Tell us about your participants in other Medicare initiatives involving shared savings				<input type="text" value="Browse..."/>
8	Section 8 - Tell us how you plan to manage shared savings				<input type="text" value="Browse..."/>
9	Section 9 - Tell us about your ACO Participants				<input type="text" value="Browse..."/>
10	Section 10 - Tell us about data sharing				<input type="text" value="Browse..."/>
11	Section 11 - Tell us about your clinical processes and patient centeredness				<input type="text" value="Browse..."/>

Back
Submit

# Upload Application Files (cont.)

- Select the “Upload Application Files” link from the right navigation options on the “SSP ACO Application Submission Start Page”.
- Upload each required document by section.
  - Use the templates and file naming conventions provided in the Application Reference Manual.
  - For each response, all supporting files must be zipped into one upload file.
- Once you click “Final Submit”, you will receive an error message, if you are missing a zip file in any required section of the application. You must upload the required zip file in order to submit your application.

# HPMS ACO Participant List Management Module Training

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Jennifer Bates

Division of Applications, Compliance, and Outreach  
Performance-Based Payment Policy Group  
Centers for Medicare & Medicaid Services



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# Agenda

- Getting Started in SSP ACO Participant List Management Module
- Entering ACO Participant List Information Into HPMS
  - Initial Applicants
  - Renewal Applicants
- Editing Change Requests
- Generating reports and views

# Application: SSP ACO Participant List Management

- In SSP ACO Management, select SSP ACO Participant List Management Module from the drop down list options.

The screenshot displays the 'ACO Management' application interface. A green dropdown menu is open, listing several options: 'SSP ACO Agreement Management', 'SSP ACO Application Submission', 'SSP ACO Participant List Management' (highlighted with a yellow arrow), 'SSP ACO SNF Affiliate List Management', 'SSP ACO Electronic Signature Management', and 'SSP ACO Reports'. Below the dropdown, the main content area is partially visible, showing a blue header and a white body with a 'More »' link. To the right, there is a photograph of a doctor and a nurse reviewing documents, and a section titled 'Announcements' and 'My Favorites' with a message: 'There are no active announcements. Select the more link to view archived announcements.' and a 'More »' link.

# SSP ACO Participant List Management Module

- SSP ACO Participant List Management Start Page
- Menu on right-hand side of page

ACO Management

Home > SSP ACO Participant List Management

**SSP ACO Participant List Management Start Page**

**ACO Participant List**

- Manage Change Requests**
  - Download Current Participant List Data
  - Submit Change Requests
  - Edit Change Requests
  - Renewal Applicant- Select Participant List
  - Confirm CMS Change Requests
  - Withdraw Change Request
  - Undo Withdrawn Change Requests
- View Requests**
  - View Change Requests
  - Participant List Reports
- User Manual**
  - ACO Participant List User Manual

The SSP ACO Participant List Management module supports the electronic submission, review, and adjudication of the ACO Participant List data and change requests.

CV: 1.23.0.0

# Submit Change Requests

ACO Management

Home > SSP ACO Participant List Management > Submit Change Requests

Submit Change Requests ACO Participant List +

Enter Change Request

Search ACO:

Select an Agreement:

- Z0001 - EXAMPLE CONTRACT 1
- Z0002 - EXAMPLE CONTRACT 2
- Z0003 - EXAMPLE CONTRACT 3
- Z0004 - EXAMPLE CONTRACT 4
- Z0005 - EXAMPLE CONTRACT 5
- Z0006 - EXAMPLE CONTRACT 6

\* - New Add Request Pending

Select a TIN:  Select a CCN:  Select an Organizational NPI:

- 111111111 - EX TIN 1
- 222222222 - EX TIN 2
- 333333333 - EX TIN 3
- 444444444 - EX TIN 4
- \* 464444179 - EX TIN 5
- 555555555 - EX TIN 6

Select an Action:

Add:  (Number of records)

- New TIN
- New TIN+CCN (CAH, ETA Hospital)
- New TIN+CCN+NPI (FQHC, RHC)
- New CCN (to selected TIN)
- New Organizational NPI (to selected CCN)
- New Individual NPI (to selected Organizational NPI)

Modify:

- TIN Authorized Signatory Name & Merged or Acquired TIN Flag
- Individual NPI Name

Upload Documentation:

- Upload New Executed Participant Agreement (to selected TIN)

Upload Data: [Template](#)

- Upload New TIN+CCN+NPI (FQHC, IRHC)
- Upload New CCN+NPI (to selected TIN)

Delete

- Submit Change Requests to add TINs for an initial applicant or for new TINs not on a renewing applicant's current certified ACO Participant List

# Add ACO Participant

- Enter the ACO Participant List Data for the new TIN

## Submit Change Requests

ACO Participant List +

### Enter Change Request

Action: Add New TIN  
Agreement: Z0001

If this TIN belongs to a sole proprietor, verify whether the individual submits Medicare claims with their social security number (SSN) or an employer identification number (EIN). Submit a CR for their SSN. If they bill Medicare using an EIN, create a second CR to also provide their EIN.

Locked Records: If a change request is pending for the selection, the existing record is locked.

#	Locked	TIN	TIN Legal Name	TIN Merged or Acquired Flag
1		123456789	EXAMPLE TIN NAM	Yes <input type="checkbox"/>

Back Next

# Supporting Documentation & Certification

- Upload supporting documentation and certify the request.

**Action:** Add New TIN

**Agreement:** Z0001

#	Locked	TIN	TIN Legal Name	TIN Merged or Acquired Flag
1		123456789	EXAMPLE TIN NAME	Y

To ensure your request to CMS is complete, you must upload the required supporting documentation. Place all required supporting documents into one zipped file, and upload the file. Do not encrypt the documents or the zip file with a password.

To upload your supporting documentation, select the Browse button and choose the file to upload. You must upload a valid zip file.

 Browse...

## ACO Participant List Change Request Certification:

By submitting this change request, I certify that the information contained herein is true, correct, and complete, and I authorize the Centers for Medicare & Medicaid Services (CMS) to verify this information. If I become aware that any information in this request is not true, correct, or complete, I agree to notify CMS of this fact immediately and to provide the correct and/or complete information.

Change Request submission: By selecting the check box below, you are certifying the request.

Note: We will not process your request if this selection is not complete.

I agree.

# Adding CCNs and NPIs

- Add TIN + CCN for CAHs and ETAs
- Add TIN + CCN +NPIs for FQHCs and RHCs

ACO Management

Home » SSP ACO Participant List Management » Submit Change Requests

Submit Change Requests

ACO Participant List +

Enter Change Request

Search ACO:

Select an Agreement:

- Z0001 - EXAMPLE CONTRACT 1
- Z0002 - EXAMPLE CONTRACT 2
- Z0003 - EXAMPLE CONTRACT 3
- Z0004 - EXAMPLE CONTRACT 4
- Z0005 - EXAMPLE CONTRACT 5
- Z0006 - EXAMPLE CONTRACT 6

\* - New Add Request Pending

Select a TIN:

- 111111111 - EX TIN 1
- 222222222 - EX TIN 2
- 333333333 - EX TIN 3
- 444444444 - EX TIN 4
- \* 484444179 - EX TIN 5
- 555555555 - EX TIN 6

Select a CCN:

Select an Organizational NPI:

Select an Action:

Add:

3 (Number of records)

- New TIN
- New TIN+CCN (CAH, ETA Hospital)
- New TIN+CCN+NPI (FQHC, RHC)

Modify:

- TIN Authorized Signatory Name & I
- Individual NPI Name

Upload Documentation:

- Upload New Executed Participant Agreement (to selected TIN)

Upload Data: [Template](#)

- Upload New TIN+CCN+NPI (FQHC, RHC)
- Upload New CCN+NPI (to selected TIN)

Delete

Back Next

# Adding CCNs and NPIs

- Add TIN + CCN + NPI for FQHCs and RHCs
- Use Participant List Template for 50+ rows

## Submit Change Requests

ACO Participant List +

### Enter Change Request

**Action:** Add New TIN+CCN+NPI (FQHC, RHC)  
**Agreement:** Z0001

Enter an individual NPI for each physician who directly provides primary care services in the FQHC or RHC.

**Locked Records:** If a change request is pending for the selection, the existing record is locked.

Modify Number of Rows

Use this option to add or delete the number of rows entered to the table below. Enter a negative number to delete rows. A maximum of 50 rows is allowed.

#	Locked	TIN	TIN Legal Name	TIN Merged or Acquired Flag	CCN	CCN Legal Name	CCN ID Code	Organization NPI
1		123456789	EXAMPLE TIN NAM	Yes <input type="checkbox"/>	111111	EXAMPLE LEGAL N	F <input type="checkbox"/>	1111111111
2		234567891	EXAMPLE TIN NAM	No <input type="checkbox"/>	222222	EXAMPLE LEGAL N	R <input type="checkbox"/>	2222222222
3		345678912	EXAMPLE TIN NAM	Yes <input type="checkbox"/>	333333	EXAMPLE LEGAL N	C <input type="checkbox"/>	3333333333

Back Next

# Renewal Applicant-Select Participant List

- Streamlined ACO Participant List entry for renewal applicants

ACO Management

Home » SSP ACO Participant List Management

## SSP ACO Participant List Management Start Page



The SSP ACO Participant List Management module supports the electronic submission, review, and adjudication of the ACO Participant List data and change requests.

### ACO Participant List

- Manage Change Requests**
  - Download Current Participant List Data
  - Submit Change Requests
  - Edit Change Requests
  - Renewal Applicant- Select Participant List
  - Confirm CMS Change Requests
  - Withdraw Change Request
  - Undo Withdrawn Change Requests
- View Requests**
  - View Change Requests
  - Participant List Reports
- User Manual**
  - ACO Participant List User Manual

CV: 1.23.0.0

# Renewal Applicant-Select Participant List, cont.

- Select your ACO and then select each TIN one at a time.

ACO Management

Home » SSP ACO Participant List Management » *Renewal Applicant- Select Participant List*

## Renewal Applicant- Select Participant List

ACO Participant List +

**Update for Renewal Applicants**

Your ACO is required to confirm which TIN records in your current ACO Participant List will be active in the next agreement period. In addition, if you choose to include an existing TIN in your next agreement period, a new Executed Participant Agreement upload will be required (if the ACO user has not already uploaded a new agreement under the Submit Change Requests link).

**Search ACO:**

**Select an Agreement:**

Z0001-EXAMPLE CONTRACT 1

Z0002-EXAMPLE CONTRACT 2

Z0003-EXAMPLE CONTRACT 3

Z0004-EXAMPLE CONTRACT 4

Z0005-EXAMPLE CONTRACT 5

Z0006-EXAMPLE CONTRACT 6

Z0007-EXAMPLE CONTRACT 7

Select	TIN	TIN Legal Business Name	Confirm Status	Uploaded File	Upload CR #
<input type="radio"/>	111111111	Example TIN Legal Name	Confirmed	<a href="#">File Uploaded: April 1, 2016 12:51:11 PM</a>	49220 (Pending)
<input type="radio"/>	123456788	Example TIN Legal Name	Deleted		
<input type="radio"/>	666666666	Example TIN Legal Name	Confirmed	<a href="#">File Uploaded: April 7, 2016 12:13:46 PM</a>	49223 (Pending)
<input type="radio"/>	678910123	Example TIN Legal Name	Not Done		
<input type="radio"/>	777777777	Example TIN Legal Name	Not Done		
<input type="radio"/>	888888888	Example TIN Legal Name	Not Done		

Back
Next

# Renewal Applicant-Select Participant List, cont.

- Select delete in the Delete column to remove the TIN for the next performance year.



Home » SSP ACO Participant List Management » Renewal Applicant- Select Participant List

## Renewal Applicant- Select Participant List

ACO Participant List +

Update for Renewal Applicants

Agreement: Z0001

You must confirm the ACO Participant List data you wish to include in your next agreement period. By default, we have prepopulated the confirm column. To delete a record, select the radio button in the delete column. When you delete a record, a pending Delete change request is created. You will be able to withdraw a change request during certain Request for Information (RFI) windows, if you wish to change your selection.

Confirm	Delete	#	TIN	TIN Legal Name	TIN Authorized Signatory First Name	TIN Authorized Signatory Last Name	TIN Merged or Acquired Flag	CCN	CCN Legal Name	CCN ID Code	Organization NPI	Organization NPI Name	Individual NPI	Individual First Name
<input type="radio"/>	<input checked="" type="radio"/>	1	123456789	Example TIN Legal Name	John	Test	N	101101	Example CCN Legal Name	C				

Back Next

# Renewal Applicant-Select Participant List, cont.

- By default confirm is selected.
- Keep confirm selected for all TINs to submit for consideration for 2017.

**Confirm Updates for Renewal Applicants**

Please confirm that the following Participant List records will be effective in the next performance year. A TIN record marked as Delete will create a Pending Change Request (CR). You will be able to Withdraw this later if the window to Withdraw is Open. You will also be able to use the Submit Change Request link to delete a TIN record later if needed (if the Delete window is open).

Agreement: Z0001

Confirm	Delete	#	TIN	TIN Legal Name	TIN Authorized Signatory First Name	TIN Authorized Signatory Last Name	TIN Merged or Acquired Flag	CCN	CCN Legal Name	CCN ID Code	Organization NPI	Organization NPI Name
Yes	No	1	111111111	TIN Name 1	Y							

To ensure your confirmation is complete, you must upload a new Executed Participant Agreement for the TIN. You must place all required supporting documents into one zipped file, and then upload that zipped file. Do not encrypt any of the documents or the zip file with a password.

To upload your new Executed Participant Agreement, select the Browse button and choose the file to upload. You must upload a valid zip file.

**ACO Participant List Confirmation Certification:**

By confirming, I certify that the information contained herein is true, correct, and complete, and I authorize the Centers for Medicare & Medicaid Services (CMS) to verify this information. If I become aware that any information in this confirmation is not true, correct, or complete, I agree to notify CMS of this fact immediately and to provide the correct and/or complete information.

Confirmation: By selecting the check box below, you are certifying the confirmation.

Note: We will not process your request if this selection is not complete.

 I agree.

# Renewal Applicant-Select Participant List, cont.

- Confirm deletion of TIN for the next performance year.

ACO Management

Home » SSP ACO Participant List Management » Renewal Applicant- Select Participant List

ACO Participant List +

**Confirm Updates for Renewal Applicants**

Please confirm that the following Participant List records will be effective in the next performance year. A TIN record marked as Delete will create a Pending Change Request (CR). You will be able to Withdraw this later if the window to Withdraw is Open. You will also be able to use the Submit Change Request link to delete a TIN record later if needed (if the Delete window is open).

Agreement: Z0001

Confirm	Delete	#	TIN	TIN Legal Name	TIN Authorized Signatory First Name	TIN Authorized Signatory Last Name	TIN Merged or Acquired Flag	CCN	CCN Legal Name	CCN ID Code	Organization NPI	Organization NPI Name	Individual NPI	Individual First Name
No	Yes (A new Delete CR will be created).	1	123456789	Example TIN Legal Name	John	Test	N	101101	Example CCN Legal Name	C				

**ACO Participant List Confirmation Certification:**

By confirming, I certify that the information contained herein is true, correct, and complete, and I authorize the Centers for Medicare & Medicaid Services (CMS) to verify this information. If I become aware that any information in this confirmation is not true, correct, or complete, I agree to notify CMS of this fact immediately and to provide the correct and/or complete information.

Confirmation: By selecting the check box below, you are certifying the confirmation.

Note: We will not process your request if this selection is not complete.

I agree.

# Edit Change Requests

- To edit change requests select Edit Change Requests from the main ACO Participant List Management screen
- Select a change request to edit (only available during the RFI periods)

ACO Management

Home » SSP ACO Participant List Management » Edit Change Requests

**Edit Change Requests** ACO Participant List +

Select Agreement and Change Request to Edit

Search ACO:

Select an Agreement:

- Z0001-EXAMPLE CONTRACT 1
- Z0002-EXAMPLE CONTRACT 2
- Z0003-EXAMPLE CONTRACT 3
- Z0004-EXAMPLE CONTRACT 4
- Z0005-EXAMPLE CONTRACT 5
- Z0006-EXAMPLE CONTRACT 6
- Z0007-EXAMPLE CONTRACT 7

Select Change Request(s) (CR) to Edit:

Edit Agreement	Request ID (s)	Request Description	Last uploaded file (Select to Download)	Last Upload Date	
<input type="radio"/>	Z0001	34813	Upload New Executed Participant Agreement for TIN 111111111	<a href="#">View File</a>	June 2, 2016 10:30:12 AM
<input type="radio"/>	Z0001	34706	<a href="#">Add New TIN 465465122</a>	<a href="#">View File</a>	March 7, 2016 12:43:23 PM
<input type="radio"/>	Z0001	34812	<a href="#">Add New TIN 646846546</a>	<a href="#">View File</a>	June 2, 2016 10:29:39 AM
<input type="radio"/>	Z0001	34699	<a href="#">Add New TIN 799998797</a>	<a href="#">View File</a>	March 1, 2016 02:41:15 PM

Back Next

# Edit Change Requests

- Update participant TIN information in this screen

ACO Management

Home » SSP ACO Participant List Management » Edit Change Requests

## Edit Change Requests

ACO Participant List +

Enter Update

Action: Add New TIN  
Agreement: Z0001

Locked Records: If a change request is pending for selection, existing record is locked.

#	Locked	TIN	TIN Legal Name	TIN Merged or Acquired Flag	CCN	CCN Legal Name	CCN ID Code	Organization NPI	Organization NPI Name	Individual NPI	Individual First Name	Individual Last Name
1		123456789	test	Yes <input type="button" value="v"/>								

Back Next

# Withdraw Change Requests

- Select Withdraw Change Request from the main SSP ACO Participant List Management screen
- Then select the withdraw button next to any change request

**HPMS**  
Health Plan Management System

TEST USER | User Resources | Log Out | A A A  
Last logged in at 12:13 PM on March 16, 2016

ACO Management

Home » SSP ACO Participant List Management » Withdraw Change Request

**Withdraw Change Requests** ACO Participant List +

Select Withdrawals

**Select Pending Participant List Change Reqs below to Withdraw:**

Withdraw	Agreement	Request #	TIN	Request Detail	Request Date	Effective Date	Termination Date	Request Status
<input type="checkbox"/>	Z0001	55557	111111111	<a href="#">Add CCN 111199, Org. NPI 0711111111, Ind. NPI 1111123333 to TIN</a>	November 28, 2015 08:51:39 AM	January 1, 2017		Pending
<input type="checkbox"/>	Z0001	55565	111111111	<a href="#">Add New TIN</a>	November 28, 2015 09:51:57 AM	January 1, 2017		Pending
<input type="checkbox"/>	Z0001	55566	111111111	<a href="#">Add CCN 111199, Org. NPI 1111122341, Ind. NPI 1111132123 to TIN</a>	November 28, 2015 11:29:38 AM	January 1, 2017		Pending
<input type="checkbox"/>	Z0001	55567	111111111	<a href="#">Add CCN 111199, Org. NPI 1111122341, Ind. NPI 6111112341 to TIN</a>	November 28, 2015 11:29:38 AM	January 1, 2017		Pending
<input type="checkbox"/>	Z0001	55568	111111111	<a href="#">Add CCN 111119, Org. NPI 1111122341, Ind. NPI 5111141234 to TIN</a>	November 28, 2015 11:29:38 AM	January 1, 2017		Pending
<input type="checkbox"/>	Z0001	55569	111111111	<a href="#">Add Org. NPI 6111143222, Ind. NPI 2112341342 to TIN, CCN 131019</a>	November 28, 2015 11:29:38 AM	January 1, 2017		Pending

# Undo Withdraw Change Requests

- Select Undo Withdraw Change Request from the main SSP ACO Participant List Management screen
- Then select the undo withdraw button next to any change request

ACO Management

Home » SSP ACO Participant List Management » Undo Withdrawn Change Requests

## Undo Withdrawn Change Requests

ACO Participant List
+

**Make Selection**

Select withdrawn Participant List change requests to undo:  
**Note: Only withdrawn change requests with an effective date in the future can be undone.**

Undo Withdrawal	Agreement #	Request #	TIN	Request Detail	Request Date	Effective Date	Termination Date	Request Status
<input type="radio"/>	Z0001	34556	123456789	<a href="#">Add New TIN</a>	November 28, 2015 08:25:07 AM	January 1, 2017		Withdrawn by ACO
<input type="radio"/>	Z0001	34558	123456789	<a href="#">Add Individual NPI=1222222222 Name s 4 to TIN CCN=131199_ Org. NPI=0711111111</a>	November 28, 2015 08:56:47 AM	January 1, 2017		Withdrawn by ACO
<input type="radio"/>	Z0001	34559	123456789	<a href="#">Add Individual NPI=1333333333 Name n 4 to TIN CCN=131199_ Org. NPI=0711111111</a>	November 28, 2015 08:56:47 AM	January 1, 2017		Withdrawn by ACO

# View Change Requests

- Select View Change Requests from the main SSP ACO Participant List Management page.

The screenshot shows the 'View Change Requests' interface. At the top, there is a green header bar with 'ACO Management'. Below it, a breadcrumb trail reads 'Home » SSP ACO Participant List Management » View Change Requests'. A blue button labeled 'View Change Requests' is on the left, and a blue button labeled 'ACO Participant List' with a plus sign is on the right. Under 'View Change Requests', there is a 'Selection Criteria' section. It includes a 'Requests made in year:' dropdown menu set to 'All'. Below that is a 'Search ACO:' text input field. To its right is a 'Select one or more Request IDs:' dropdown menu set to 'All'. Under 'Search ACO:', there is a 'Select one or more Agreements:' dropdown menu. This menu is open, showing a list of agreements: 'All Agreements', 'Z0001 - EXAMPLE CONTRACT 1', 'Z0002 - EXAMPLE CONTRACT 2', 'Z0003 - EXAMPLE CONTRACT 3', 'Z0004 - EXAMPLE CONTRACT 4', 'Z0005 - EXAMPLE CONTRACT 5', and 'Z0006 - EXAMPLE CONTRACT 6'. Below the agreement list is a 'Request Type:' dropdown menu set to 'All'. Underneath is a 'Request Status:' dropdown menu set to 'Pending'. At the bottom left of the form area are 'Back' and 'Submit' buttons. The footer contains a navigation menu with links: 'Home | About HPMS | Website Accessibility | Web Policies | File Formats and Plug-ins | Rules Of Behavior | System Requirements | FAQ'. Below the navigation menu is the text 'This is a U.S. Government computer system subject to Federal law.' and the CMS logo.

# Participant List Count Report

- Select Participant List Count Report from the main SSP ACO Participant List Management page.

## View Participant List Count

Agreement:

Current Participant List Data

TIN	TIN Legal Business Name	Medicare Enrolled TIN	Merged or Acquired TIN	First Name of Person Authorized to Sign ACO Participant Agreement (TIN)	Last Name of Person Authorized to Sign ACO Participant Agreement (TIN)	CCN	CCN Legal Name	CCN Identification Code	Organizational NPI	Organizational NPI Name	Individual NPI	Individual NPI First Name	Individual NPI Last Name	Effective Date
111111111	tin upload test	Y	Y											July 1, 2012
333333789	TestTIN	Y	N	Test	Test									January 1, 2016

[Download to Excel](#)

10 = Total Number of Participants

6 = Total Number of Unique TINs

4 = Total Number of Unique CCNs

3 = Total Number of Unique Organization NPIs

7 = Total Number of Unique Individual NPIs

# Download Current Participant List

- Select Download Current Participant List Data from the main SSP ACO Participant List Management page

Download Current Participant List Data ACO Participant List +

View Data

Agreement: Z0001

Performance Year: 2017

Current Participant List Data

TIN	TIN Legal Business Name	Medicare Enrolled TIN	Merged or Acquired TIN	First Name of Person Authorized to Sign ACO Participant (TIN) Agreement	Last Name of Person Authorized to Sign ACO Participant (TIN) Agreement	CCN	CCN Legal Name	CCN Identification Code	Organizational NPI
111111111	TIN Name	Y	N	a	a				
222222222	TIN Name	Y	Y						
333333333	TIN Name	Y	Y						
444444444	TIN Name	Y	Y			441111	TIN Name	F	5444444444
444444444	TIN Name	Y	Y			441111	TIN Name	F	5444444444
555555555	TIN Name	Y	Y			441111	TIN Name	F	5444444444
555555555	TIN Name	Y	Y			441111	TIN Name	F	5444444444

Download to Excel    Create PDF

# Download Pending Participant List

- Select Download Pending Participant List Change Request Additions from the main SSP ACO Participant List Management page

**Pending Participant List Change Request Additions**

TIN	TIN Legal Business Name	Medicare Enrolled TIN	Merged or Acquired TIN	First Name of Person Authorized to Sign ACO Participant (TIN) Agreement	Last Name of Person Authorized to Sign ACO Participant (TIN) Agreement	CCN	CCN Legal Name	CCN Identification Code	Organization NPI
230014001	TIN Business	N/A	Y			253449	Legal 1	R	9000000001
230014001	TIN Business	N/A	Y			253449	Legal 1	R	9000000002
230014001	TIN Business	N/A	Y			253449	Legal 1	R	9000000003

Download to Excel | Create PDF

3 = Total Number of Pending Add Requests  
 1 = Total Number of Pending Unique TINs Added  
 1 = Total Number of Pending Unique CCNs Added  
 3 = Total Number of Pending Unique Organization NPIs Added  
 3 = Total Number of Pending Unique Individual NPIs Added

Back



# HPMS ACO SNF Affiliate List Management Module Training

---

**Kari Vandegrift**

**Division of Shared Savings Program  
Performance-Based Payment Policy Group  
Centers for Medicare & Medicaid Services**



For Official Federal Government Use Only

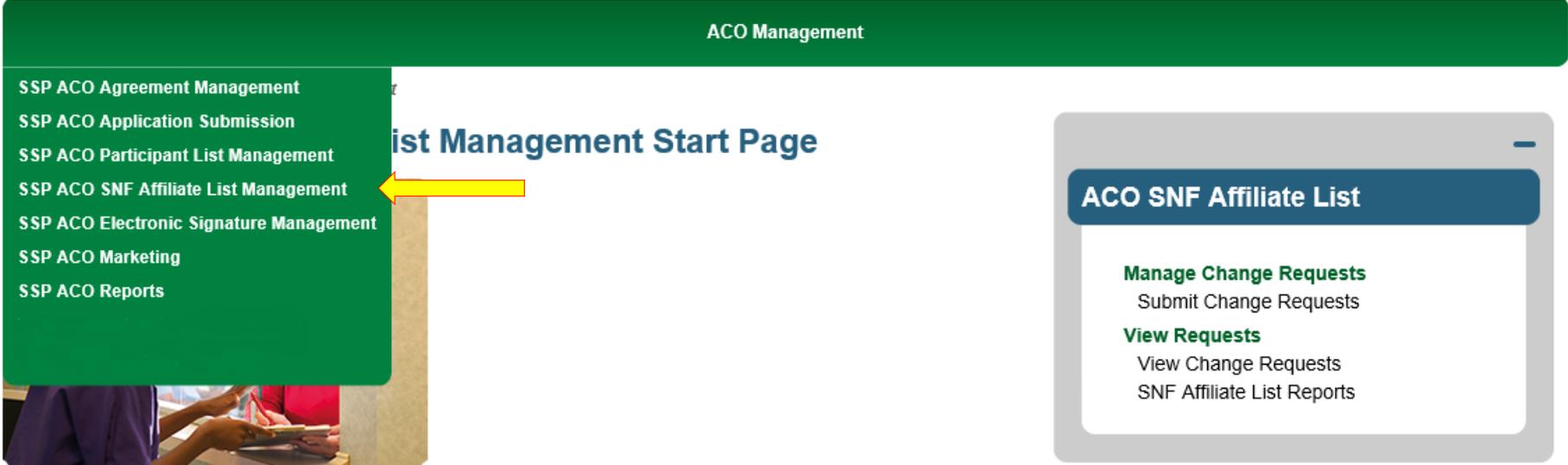
This pre-decisional, privileged, and confidential information is for internal government use only, and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law

# Agenda

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- Getting Started in SSP ACO SNF Affiliate List Management Module (only for SNF 3-Day Waiver Applicants)
- Entering SNF Affiliate List Information Into HPMS
- SNF Affiliate List Special Consideration

# Application: SSP ACO SNF Affiliate List Management



The SSP ACO SNF Affiliate List Management module supports the electronic submission, review, and adjudication of the ACO SNF Affiliate List data and change requests.

CV: 1.23.0.0

# SNF Submit Change Requests

ACO Management

Home » SSI ACO SNF Affiliate List Management » Submit Change Requests

ACO SNF Affiliate List +

## Submit Change Requests

Enter Change Request

**Search ACO:**

**Select an Agreement:**

Z0001-EXAMPLE CONTRACT 1  
 Z0002-EXAMPLE CONTRACT 2  
 Z0003-EXAMPLE CONTRACT 3  
 Z0004-EXAMPLE CONTRACT 4  
 Z0005-EXAMPLE CONTRACT 5  
 Z0006-EXAMPLE CONTRACT 6

**^ - New Add Request Pending**

**Select a TIN:**

111111111 - a  
 ^ 222222222 - b  
 ^ 333333333 - b

**Select a CCN:**

All CCNs  
 ^ 44401 - ccm 2

**Add:**  (Number of records)

New TIN+CCN

New CCN (to selected TIN)

**Upload Documentation:**

Upload New Executed SNF Affiliate Agreement & Star Rating Document (to selected TIN)

**Upload Data:** [\(Template\)](#)

Upload New TIN+CCN

Upload New CCN (to selected TIN)

Delete

# Add ACO SNF Affiliate

## Submit Change Requests

### Enter Change Request

**Action:** Add New TIN+CCN

**Agreement:**

**Locked Records:** If a change request is pending for the selection, the existing record is locked.

Modify Number of Rows  Use this option to add or delete the number of rows entered to the table below. Enter a negative number to delete rows. A maximum of 50 rows is allowed.

#	Locked	TIN	TIN Legal Name	CCN	CCN Legal Name
1		<input type="text" value="111111111"/>	<input type="text" value="TIN Name"/>	<input type="text" value="005000"/>	<input type="text" value="CCN Name"/> x

# SNF 3-Day Waiver Supporting Documentation & Certification

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Home » SSP ACO SNF Affiliate List Management » Submit Change Requests

## Submit Change Requests

ACO SNF Affiliate List



### Confirm Change Request

Action: Add New TIN+CCN

Agreement:

#	Locked	TIN	TIN Legal Name	CCN	CCN Legal Name
1		777777777	Test LBN	115000	Test LBN

To ensure your request to CMS is complete, you must upload the required supporting documentation. Place all required supporting documents into one zipped file, and upload the file. Do not encrypt the documents or the zip file with a password.

To upload your supporting documentation, select the Browse button and choose the file to upload. You must upload a valid zip file.

Browse...

### SNF Affiliate List Change Request Certification:

By submitting this change request, I certify that the information contained herein is true, correct, and complete, and I authorize the Centers for Medicare & Medicaid Services (CMS) to verify this information. If I become aware that any information in this request is not true, correct, or complete, I agree to notify CMS of this fact immediately and to provide the correct and/or complete information.

Change Request submission: By selecting the check box below, you are certifying the request.

Note: We will not process your request if this selection is not complete.

I agree.

Back

Submit

# SNF Affiliate List View Change Requests

## View Change Requests

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### Selection Criteria

Requests made in year:

All

Search ACO:

Select one or more Agreements:

- All Agreements
- Z0001-EXAMPLE CONTRACT 1
- Z0002-EXAMPLE CONTRACT 2
- Z0003-EXAMPLE CONTRACT 3
- Z0004-EXAMPLE CONTRACT 4
- Z0005-EXAMPLE CONTRACT 5
- Z0006-EXAMPLE CONTRACT 6

Select one or more Request IDs:

All

Request Type:

All

Request Status:

Pending

# SNF Affiliate List View Change Requests Cont.

ACO Management

Home » SSP ACO SNF Affiliate List Management » View Change Requests

## View Change Requests

ACO SNF Affiliate List +

Requests made in year: All

Request Type: All

Request Status: Pending

Order by:

ACO ID, TIN, Request #, Request Date	Request Detail	Supporting Documentation	Effective Date, Termination Date	Data Integrity Review Detail	Request Status
Z1234 654654654 35 June 14, 2016 11:01:30 AM	<a href="#">Add New TIN, CCN=155000</a>	<a href="#">File Uploaded: June 14, 2016 11:01:30 AM</a>	January 1, 2017		Pending

1 = Total Number of Requests

1 = Total Number of Adds

1 = Total Number of Unique TINs Added

1 = Total Number of Unique CCNs Added

# SNF Affiliate List Special Considerations

- Email your application reviewer if you want to withdraw a SNF Affiliate List change request.
- Upload your 5-star Quality Rating System documentation with the corresponding SNF Affiliate Agreements.
- All files (SNF Affiliate Agreements and star rating documentation) must be zipped into one zip file and uploaded for each CR.

# Submitting Your Completed Application(s)

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**Karmin Jones**

**Division of Application, Compliance & Outreach  
Performance-Based Payment Policy Group  
Centers for Medicare & Medicaid Services**



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# Final Submit

Home » SSP ACO Application Submission » PY 2017

## SSP ACO Application Submission Start Page, PY 2017



The SSP ACO Application Submission module supports the electronic view and submission of application data and documents to participate in the Shared Savings Program.

**ACO**

- PY 2017**
  - Select Agreement
  - Attestation Data
  - Upload Application Files
  - Participant List
  - SNF Affiliate List
  - Download Application Toolkit
  - Final Submit
- PY 2016**
- PY 2015**
- PY 2014**
- PY 2013**
- PY 2012**



CV: 1.23.0.0

# Final Submit (cont.)

- Prior to submitting your application, review and confirm the following:
  - Agreement Data is updated (if necessary),
  - Contact Data is updated with required contacts,
  - Attestations are completed in the SSP ACO Application Submission module,
  - Required documents are uploaded,
  - ACO Participants were submitted and were successfully validated in the “SSP ACO Participant List Management Module”, and/or
  - SNF Affiliates were submitted and were successfully validated in the SSP “SNF Affiliate List Management module” (SNF 3-Day Waiver applicants only)
- From the “SSP ACO Application Submission Start Page”, select your ACO ID and the appropriate application for which you are applying to.
  - Click the “Final Submit” link on the right hand side of the page.
  - You must check the “I Agree” checkbox and click “Submit”.
- Errors will appear on the “Final Submit Confirmation Page”, if there are any discrepancies with your attestation responses, missing required upload zip files, or any issues with the validation of the ACO Participant List, or SNF Affiliate List. Once you’ve corrected all errors, you may click “Final Submit” again.

# Final Submit (cont.)

- You will receive a confirmation page with a confirmation number indicating that you have successfully submitted your application. Your ACO Executive, Application (primary and secondary), and Authorized to Sign (primary and secondary) contacts will also receive a receipt email confirming your submission.
- Please be mindful that if you are submitting more than one application, you must click “Final Submit” for each application.
  - For example, if you are an ACO who is renewing its agreement with CMS and is also applying to the SNF 3-Day Rule Waiver, you must click “Final Submit” separately for both the Renewal Application, and the SNF 3-Day Waiver Application.
- Please do not wait until the deadline to click final submit, to allow you time to correct unforeseen error.

# Final Submit

ACO Management

Home » SSP ACO Application Submission » PY 2017 » Final Submit

## Final Submit

ACO +

### Final Submit for Z0001, PY 2017, Initial (for 2017)

**To ensure your application to CMS is complete, you must have answered all questions and uploaded the required supporting documentation. For detailed guidance on submitting your supporting documentation, refer to the file located in the ACO download templates link entitled 'Download Application Toolkit.'**

**Once you select the Submit button, you will not be able to modify your responses or upload additional supporting documentation.**

**Application Certification:**

I have read the contents of this application. I certify that I am legally authorized to execute this document and to bind my ACO to comply with the applicable laws and regulations of the Medicare program. By my signature, I certify that the information contained herein is true, accurate, and complete, and I authorize the Centers for Medicare & Medicaid Services (CMS) to verify this information. If I become aware that any information in this application is not true, accurate, or complete, I agree to notify CMS of this fact immediately and provide the correct and/or complete information. If my ACO is newly formed according to the definition in the Antitrust Policy Statement, I understand and agree that CMS will share the content of this application, including all information and documents submitted with this application, with the Federal Trade Commission and the Department of Justice.

Electronic submissions: By selecting the check box below, you are certifying the application.

Note: We will not process your application if this certification is not complete.

I agree. ←

←

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CENTERS FOR MEDICARE & MEDICAID SERVICES

# Final Submit: Errors

ACO Management

Home » SSP ACO Application Submission » PY 2017 » Final Submit

## Final Submit

ACO +

### Final Submit for Z0001, PY 2017, Initial (for 2017)

**Error: The Application Attestations data has not been completed. Go to the Attestation Data link, click Next to view the confirmation screen, and complete the required data entry (where entry says Not Answered).**  
**Error: For the Application Attestations, question 20 must be N/A if question 19 is No. Go to the Attestation Data link to complete the required data entry.**  
**Error: For the Application Attestations, question 26 must have a value of N/A when question 4 or question 6 is Yes. Go to the Attestation Data link to complete the required data entry.**  
**Error: For the Application Attestations, question 28 must have a value of N/A when question 26 is Yes. Go to the Attestation Data link to complete the required data entry.**  
**Error: The Application upload file is missing. Go to the Upload Application Files link to upload the required file.**  
**Error: You must check the Final Submit attestation check box to Final Submit your application.**

To ensure your application to CMS is complete, you must have answered all questions and uploaded the required supporting documentation. For detailed guidance on submitting your supporting documentation, refer to the file located in the ACO download templates link entitled 'Download Application Toolkit.'

Once you select the Submit button, you will not be able to modify your responses or upload additional supporting documentation.

**Application Certification:**

I have read the contents of this application. I certify that I am legally authorized to execute this document and to bind my ACO to comply with the applicable laws and regulations of the Medicare program. By my signature, I certify that the information contained herein is true, accurate, and complete, and I authorize the Centers for Medicare & Medicaid Services (CMS) to verify this information. If I become aware that any information in this application is not true, accurate, or complete, I agree to notify CMS of this fact immediately and provide the correct and/or complete information. If my ACO is newly formed according to the definition in the Antitrust Policy Statement, I understand and agree that CMS will share the content of this application, including all information and documents submitted with this application, with the Federal Trade Commission and the Department of Justice.

Electronic submissions: By selecting the check box below, you are certifying the application.

Note: We will not process your application if this certification is not complete.

I agree.

# Additional Information and Guidance

- Read the 2017 Application Reference Manual for step-by-step instructions on how to respond to each question in the application, submission examples, instructions on how to submit your supporting documentation, and how to respond to requests from CMS.
- Follow the instructions provided in the Application Toolkit to avoid errors with your submission.
- Submit your application timely. **Late submissions are not accepted.**

# Upcoming Application Webinars

## Upcoming calls for pending applicants (invitation only):

- July 14: ACO Application Question & Answer Session
- Aug 25: How to Respond to Your First Request for Information
- Sept 29: How to Respond to Your Second Request for Information
- Nov 7: 2017 Initial and Renewal Application Training on the HPMS Electronic Signature Management Module

Dates are subject to change. We will send direct emails through HPMS to announce the details of these calls.

For more information, go to our [Teleconference and Event Page](#).

# Contacts for Assistance

- Shared Savings Program Application How to Apply page
  - Includes Application Deadlines and link to the 2017 Application Toolkit
- Application Mailbox
  - For questions related to the application process and obtaining your CMS User ID
    - Email: [SSPACO\\_Applications@cms.hhs.gov](mailto:SSPACO_Applications@cms.hhs.gov)
- Health Plan Management System (HPMS)
  - For technical assistance submitting your application online through HPMS
    - Email: [HPMS@cms.hhs.gov](mailto:HPMS@cms.hhs.gov)
  - For inquiries related to User issues with accessing HPMS
    - Email: [HPMS\\_access@cms.hhs.gov](mailto:HPMS_access@cms.hhs.gov)
- CMS User ID Password Reset
  - Email: [CMS\\_IT\\_SERVICE\\_DESK@cms.hhs.gov](mailto:CMS_IT_SERVICE_DESK@cms.hhs.gov)
  - Call: 1-(800)-562-1963

# Question and Answer Session

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