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DATE: April 1, 2016

TO: Medicare Shared Savings Program Potential Accountable Care Organization (ACO) Applicants

FROM: Medicare Shared Savings Program

RE: Posting of the 2017 Notice of Intent to Apply to the Medicare Shared Savings Program and/or the Skilled Nursing Facility (SNF) 3-Day Waiver for January 1, 2017 Program Year Start Date

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CMS is pleased to announce the posting of the Notice of Intent to Apply (NOIA) memorandum for (1) participation in the Medicare Shared Savings Program with an effective start date of January 1, 2017, and/or (2) the use of the Skilled Nursing Facility (SNF) 3-Day Waiver (available to Track 3 ACOs only). This NOIA memo applies to:

- ACOs applying to renew their agreement (program year 2014 starters);
- Initial (new) applicants; and/or,
- ACOs currently participating in or applying to the program under Track 3 (two-sided risk model) that wish to apply for the SNF 3-Day Waiver.

The purpose of this memo is to share key webinar dates and deadlines associated with the NOIA and applications, outline the NOIA submission process, and provide a sample of the NOIA questions. A NOIA submission does not bind your organization to submit an application. **However, you must submit a NOIA to be eligible to submit an application for the January 1, 2017 program start date.**

Be aware that the dates below are subject to change. Please visit the Shared Savings Program [How to Apply](#) webpage frequently for updates.

## **PROGRAM YEAR 2017 APPLICATION WEBINAR SCHEDULE & APPLICATION DEADLINES**

To help you prepare for your application submission, we invite you to participate in a series of CMS hosted webinars. The webinar schedule is below. It includes key deadlines in the application cycle. Please visit the [Shared Savings Program Applications Teleconferences and Events webpage](#) frequently for details.

## Webinar Schedule

Webinar Topic	Date	Time
Shared Savings Program ACO: Preparing to Apply to Become an ACO (Audience: initial applicants, <a href="#">registration</a> required)	4/5/16	1:30 p.m.-3:00 p.m. Eastern Time
Shared Savings Program ACO: Application Process - ACO Agreements, Participation List, and Assignment (Audience: initial applicants, <a href="#">registration</a> required)	4/19/16	1:30 p.m.-3:00 p.m. Eastern Time
Shared Savings Program ACO: Renewing Your Agreement for 2017 (Audience: renewal applicants)	5/3/16	1:00 p.m.-3:00 p.m. Eastern Time
Shared Savings Program ACO: Initial Application Submission Review (Audience: initial applicants)	6/7/16	1:00 p.m.-3:00 p.m. Eastern Time
Shared Savings Program ACO: Renewal Application Submission Review (Audience: renewal applicants)	6/9/16	1:00 p.m.-3:00 p.m. Eastern Time
Shared Savings Program ACO: SNF 3-Day Waiver Application Submission Review (Audience: Track 3 SNF 3-Day Waiver applicants)	6/13/16	1:00 p.m.-3:00 p.m. Eastern Time
Shared Savings Program ACO: Training on the Health Plan Management System (HPMS) ACO Application Module (Audience: all applicants)	7/12/16	1:00 p.m.-3:00 p.m. Eastern Time
Shared Savings Program ACO Application Q&A Session (Audience: all applicants)	7/14/16	1:00 p.m.-3:00 p.m. Eastern Time

## Application Cycle: Deadlines to Apply/Renew for January 1, 2017 Program Start Date

Notice of Intent to Apply Process	Deadlines
NOIA Memo Posted to CMS Website	April 1, 2016
NOIA Submission Period	May 2, 2016 – May 31, 2016
<b>NOIA Deadline</b>	<b>May 31, 2016, by 5:00 p.m. Eastern Time</b>
CMS System User ID Forms Submission Period (new users only that need access to CMS systems)	May 5, 2016 – June 3, 2016

Application Process	Deadlines
2017 Application Form Posted to CMS Website (sample only for all applications*)	Spring 2016
Application Submission Period (for all applications*)	July 1, 2016 – July 29, 2016
<b>Application Deadline (for all applications*)</b>	<b>July 29, 2016, by 5:00 p.m. Eastern Time</b>
Application Approval or Denial Decision Sent to Applicants	Fall 2016
Reconsideration review deadline	15 Days from Notice of Denial

\*Note: The SNF 3-Day Waiver application is available to initial applicants, current ACOs requesting to renew their agreement, and current ACOs. Your ACO must be applying for the two-sided risk model under Track 3 or already in Track 3 to be eligible to apply for the SNF 3-Day Waiver.

## **SUBMITTING YOUR NOIA**

You must take the steps outlined below to submit a NOIA for the Shared Savings Program and/or the SNF 3-Day Waiver. There is a section below for:

- Renewal Applicants (current ACOs with a 2014 start date) (Section I)
- Initial (New) Applicants (Section II)
- SNF 3-Day Waiver Applicants (Section III)

**We will only accept NOIAs submitted electronically. Processing time may vary, so please plan to submit your NOIA as early as possible. We will not accept late submissions.**

Once you submit your NOIA, you will receive an email with your ACO Identification Number (ACO ID). This is a unique identifier specific to your ACO. Please include your ACO ID in all correspondence to CMS about your application or questions you may have.

If you choose to apply to the Shared Savings Program, you must include your ACO ID with your application to get a CMS User Identification Number (CMS User ID). You need an active CMS User ID and password to submit your application using CMS' Health Plan Management System ([HPMS](#)). To obtain a CMS User ID or update your CMS User ID, refer to the following:

- New Users: If you do not have a CMS User ID, refer to [Section II, Step 2](#) below.
- Existing Users (non-consultants): If you have a CMS User ID, but need systems access to a specific ACO, an ACO authorized contact must email an access request to [HPMS\\_Access@cms.hhs.gov](mailto:HPMS_Access@cms.hhs.gov). In the email, identify the ACO's legal business name, ACO ID, user's first and last name and CMS User ID. The email must clearly state the ACO is authorizing the existing user to access the ACO's systems.
- Consultants: If you have a CMS User ID, but need systems access to a specific ACO, an ACO authorized contact must email an access request to [HPMSConsultantAccess@cms.hhs.gov](mailto:HPMSConsultantAccess@cms.hhs.gov). Attach to the email a PDF file on the ACO's letterhead that identifies the following: the ACO's legal business name, ACO ID, consultant's first and last name, the state the consultant is performing consulting duties, and their CMS User ID. The PDF file must clearly state the ACO is authorizing the user to access the ACO's systems and it must be signed by the authorizing official. For detailed instructions on requesting consultant access, refer to the "Downloads" section on the "[HPMS User ID Process](#)" webpage.

### **I. Renewal Applicants - Current ACOs with a 2014 Start Date Interested in Renewing their Agreement with CMS for a Subsequent Agreement Period under the Shared Savings Program**

#### **Step 1: Submit a NOIA for a Renewal of your ACO's Agreement**

Each Shared Savings Program ACO wishing to renew its agreement with CMS must submit a short NOIA for the next 3-year agreement period through [HPMS](#). The NOIA will be available on May 2, 2016. We must get your completed NOIA **no later than 5:00 p.m. Eastern Time, Tuesday May 31, 2016.**

See [Renewal Applicant NOIA Questionnaire Sample](#) located at the end of this memo for sample NOIA questions.

- Beginning May 2, 2016, login to [HPMS](#) and complete your NOIA on the “Basic Agreement Data” page. Information on this page is pre-populated with your ACO’s legal entity information from your initial agreement period, ending December 31, 2016.
- Review, update, and confirm your ACO’s legal entity for your next agreement period.
- You will get a confirmation email that your NOIA was processed. This notice will include your ACO ID and instructions on how to get a CMS User ID for logging into CMS systems. .
- You will keep your existing ACO ID.

Note: If your current approved legal entity status has changed, you may not be able to apply as a renewing Shared Savings Program ACO. For example, if your ACO is transitioning from a single TIN ACO (comprised of one ACO participant) into an ACO that is comprised of multiple ACO participants, you must apply as a new applicant. In this instance, we would consider your ACO a new entity, which requires you to apply as an initial (new) applicant. If accepted, you would begin a new agreement period on January 1, 2017.

## **II. Initial (New) Applicants – New ACOs Applying to the Shared Savings Program**

### **Step 1: Submit a NOIA for Initial Applicants**

Each initial applicant must submit a short NOIA using the web-based questionnaire on the Shared Savings Program [How to Apply](#) webpage. The web-based questionnaire will be available on Monday May 2, 2016. We must get your completed NOIA **no later than 5:00 p.m. Eastern Time, Tuesday May 31, 2016.**

See [Initial Applicant NOIA Questionnaire Sample](#) located at the end of this memo for sample NOIA questions.

- Beginning May 2, 2016, access the NOIA Questionnaire on the Shared Savings Program [How to Apply](#) webpage and complete your NOIA. You will get an email confirming that your NOIA was processed. This notice will include your ACO ID and detailed instructions on how to get a CMS User ID for logging into CMS systems.
- You must have an ACO ID to apply to participate in the Shared Savings Program.

### **Step 2: Get a CMS User ID to Submit Your Application**

To submit your application, you need a CMS User ID to access HPMS. To get a CMS User ID, follow these steps:

1. Get an ACO ID through the NOIA process explained in [Step 1](#) above.
2. Complete [CMS Form CMS-20037](#) “Application for Access to CMS Computer

Systems,” using the instructions provided in your NOIA confirmation email. For detailed instructions for requesting a new User ID, refer to the [HPMS User ID Process](#) webpage.

3. Submit (1) form for each individual contact. You’re prohibited from sharing your CMS issued User ID and password with anyone. We strongly encourage you to have separate contacts and obtain CMS User IDs for each contact type listed below:
  - ACO Executive\*
  - Authorized to Sign (primary)\*
  - Authorized to Sign (secondary)\*
  - Application Contact (primary)
  - Application Contact (secondary)
  - IT Contact (primary)
  - Submit (1) form for DUA Custodian\*
  - Submit (1) form for DUA Requestor\*

These contacts will receive communication about application webinars and important information during the application review process.

4. Note: If you are approved to participate in the program, the contacts noted above with an asterisk (\*) are required to electronically sign documents in HPMS on behalf of the ACO. These contacts must have a valid CMS User ID with access to HPMS to complete this task. Submit your completed original (**not a copy**) CMS [Form CMS-20037](#) via tracked mail (e.g. FedEx, UPS.) to:

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

5. Submit your CMS User ID request **no later than Friday, June 3, 2016**. We will only accept requests for CMS User IDs by mail, and not by email or fax.

Since processing times may vary, we strongly encourage you to submit your NOIA and Form CMS-20037 as early as possible. **Do not wait until the deadline.**

### **III. SNF 3-Day Waiver Applicants – Available to Track 3 Medicare Shared Savings Program Applicants and Current Track 3 ACOs**

ACOs who wish to apply for the SNF 3-Day Waiver must plan to participate, or currently be participating in Track 3 (two-sided risk model). This application is only available to the following applicants:

- Initial applicants applying under Track 3;
- ACOs currently participating in the program with a 2014 start date wishing to renew

- their agreement under Track 3; and
- ACOs currently participating in the program with a 2016 start date, participating under Track 3.

### **Step 1: Submit a Notice of Intent to Apply to the SNF 3-Day Waiver**

Each Track 3 ACO that is currently participating in or applying to participate in the program must submit a short NOIA. The NOIA will be available on May 2, 2016. We must get your completed NOIA **no later than 5:00 p.m. Eastern Time, Tuesday May 31, 2016.**

- Initial applicants applying under Track 3 must submit their SNF 3-Day Waiver NOIA using the online questionnaire.
  - Beginning May 2, 2016, access the NOIA Questionnaire on the Shared Savings Program [How to Apply](#) webpage and complete your NOIA.
  - You will get an email confirming that your NOIA was processed.
  - See the [Initial Applicant NOIA Questionnaire Sample](#) at the end of this memo for sample questions.
- Both renewing applicants applying under Track 3 and current Track 3 ACOs participating in the program must submit their SNF 3-Day Waiver NOIA through [HPMS](#).
  - Beginning May 2, 2016, log into HPMS and complete your NOIA on the ‘Basic Agreement Data’ page. Information on this page is pre-populated with your ACO’s legal entity information.
  - You will get an email confirming that your NOIA was processed.
  - See either the [Renewal Application NOIA Questionnaire Sample](#) or the [SNF 3-Day Waiver Applicant - Current ACOs with a 2016 Start Date NOIA Sample Questions](#) at the end of this memo for sample questions.

### **COMPLETE YOUR APPLICATIONS**

Later this spring, a *sample* of the initial, renewal, and SNF 3-Day Waiver applications for the January 1, 2017 Shared Savings Program start date will be available on our [How to Apply](#) webpage. You may use the sample applications to begin compiling your responses. However, all applicants must submit your official application electronically through [HPMS](#) when the system is available Friday, July 1 through Friday, July 29, 2016. **Paper application are not accepted.**

**Applications are due Friday July 29, 2016, by 5:00 p.m. Eastern Time. We will not accept late or incomplete submissions.**

### **WHO TO CONTACT FOR ASSISTANCE**

- For NOIA and application questions: [SSPACO\\_Applications@cms.hhs.gov](mailto:SSPACO_Applications@cms.hhs.gov)
- For help with Form CMS-20037 and CMS User ID: [HPMS\\_Access@cms.hhs.gov](mailto:HPMS_Access@cms.hhs.gov) or (800) 220-2028
- For password resets and if your account is locked: [CMS\\_IT\\_SERVICE\\_DESK@cms.hhs.gov](mailto:CMS_IT_SERVICE_DESK@cms.hhs.gov) or (800) 562-1963
- For help using HPMS and technical assistance: [HPMS@cms.hhs.gov](mailto:HPMS@cms.hhs.gov)

## SAMPLE NOTICE OF INTENT TO APPLY QUESTIONS

We provide the NOIA sample questions below as a reference only. This is not the official NOIA for submission.

### Renewal Applicant NOIA Sample Questions

Note: We will **only** accept NOIAs submitted electronically through [HPMS](#) for renewing ACOs. **Renewal applicants, do not** complete the online NOIA questionnaire. It is for initial applicants only.

- 1) What is your application type for the January 1, 2017 program start date?
  - Renewing Medicare Shared Savings Program Applicant (Shared Savings Program ACO who completed a 3 year agreement period ending December 31, 2016)
- 2) Select the Shared Savings Program track you are applying to. (Only select one)
  - Track 1 (one-sided model: shared savings)
  - Track 2 (two-sided model: shared savings/losses)
  - Track 3 (two-sided model: shared savings/losses)
- 3) Do you intend to apply for the SNF 3-Day Waiver? (Track 3 Applicants only)
  - Yes
  - No
  - N/A
- 4) Review, update, and confirm your ACO legal entity information in HPMS. Some information in this section is pre-populated.
  - ACO Trade Name/DBA (if applicable);
  - ACO Mailing Address;
  - ACO Composition;
  - ACO Contacts; and
  - ACO Public Reporting URL

### Initial Applicant NOIA Sample Questions

Note: We will **only** accept NOIAs submitted through the online questionnaire for initial applicants. **Initial applicants, do not** attempt to submit your NOIA through [HPMS](#). It is for ACOs who are renewing their agreement or currently participating in the program only.

- 1) What is your application type for the January 1, 2017 program start date? (Select one)
  - New Shared Savings Program ACO
  - Re-applicant (Select only if you were terminated from the Shared Savings Program voluntarily or involuntarily and are re-applying).
  - Former Pioneer Accountable Care Organization Model (requesting a condensed application)
  - Former Pioneer Accountable Care Organization Model (not eligible for condensed

application)

- 2) What is your ACO Tax Identification Number (TIN)?
  - This is the TIN established for the ACO, as a legal entity and will also be included on your CMS Form CMS-588 Electronic Funds Transfer (EFT) Authorization Agreement.
  - Shared savings payments will be made to this TIN.
  - You must have a valid TIN to complete your NOIA. We will not accept incomplete or invalid TINs.
- 3) What is the ACO's date of formation (date noted on the Certificate of Incorporation or other formation documentation)?
- 4) What type of ACO are you? (Select all that apply.)
  - ACO professionals in a group practice arrangement
  - Network of individual practices of ACO professionals
  - Partnership or joint venture arrangement between hospitals and ACO professionals
  - Hospital employing ACO professionals
  - Critical Access Hospital (CAH) billing under Method II
  - Federally Qualified Health Center (FQHC)
  - Rural Health Clinic (RHC)
  - Electing Teaching Amendment (ETA ) Hospital
- 5) Select the Shared Savings Program track you are applying to. (Only select one)
  - Track 1 (one-sided model: shared savings)
  - Track 2 (two-sided model: shared savings/losses)
  - Track 3 (two-sided model: shared savings/losses)
- 6) Do you intend to apply for the SNF 3-Day Waiver? (Track 3 Applicants only)
  - Yes
  - No
  - N/A
- 7) What is your ACO's full legal business name and location?
  - Legal business name
  - Trade name/DBA (if applicable)
  - Address
- 8) Who is your primary application contact?
  - Name, Title (e.g. CEO, CFO)
  - Phone Number, Email Address
- 9) Who is your secondary application contact?
  - Name, Title (e.g. CEO, CFO)
  - Phone Number, Email Address
  - Business Address

10) What is your ACO's Type of Legal Entity? (Select one.)

- Sole Proprietorship
- Partnership
- Publicly-Traded Corporation
- Privately-Held Corporation
- Limited Liability Company
- Other (specify)\_\_\_\_\_

11) What is your tax status? (Select one.)

- For Profit
- Not-for-Profit

### **SNF 3-Day Waiver Applicant - Current ACOs with a 2016 Start Date NOIA Sample Questions**

Note: We will **only** accept NOIAs submitted electronically through [HPMS](#) for ACOs currently participating in the program under Track 3. **SNF 3-Day Waiver applicants, do not** complete the online questionnaire. It is for initial applicants only.

- 1) What is your application type for the January 1, 2017 program start date?
  - Skilled Nursing Facility (SNF) 3-Day Waiver
- 2) Confirm the Shared Savings Program track you are currently participating under. (You will not be able to change this selection)
  - Track 3 (two-sided model: shared savings/losses)
- 3) Do you intend to apply for the SNF 3-Day Waiver? (Track 3 Applicants only)
  - Yes
  - No