

January 26, 2023, Town Hall Follow-Up Questions

Is sequestration waived for Accountable Care Organization (ACO) Participants?

No, ACO Participants are not excluded from sequestration. Sequestration was waived for all providers due to Public Health Emergency but has since been reinstated. NW Momentum Health Partners (NWMHP) ACO Participant Providers that receive monthly fee reduction reports through Box.com can see the sequestration amount on the reduced claims.

How does CMS use claims to identify conditions to be included in the Timely Follow-Up Measure?

Timely Follow-Up is defined as a claim for the same patient after the discharge date of the acute event that is a non-emergency outpatient visit and has a CPT or HCPCS code indicating a visit that constitutes appropriate follow-up, as defined by clinical guidelines and clinical coding experts. The follow-up visit may be a general office visit or telehealth visit and can take place in certain chronic care or transitional care management settings. The follow-up visit must occur within the condition-specific timeframe to be considered timely.

If the acute event has more than one of the possible conditions listed, then CMS will assign the condition with the shortest follow-up timeframe to be included in the measure. CMS will determine the Numerator event as a single event even if the beneficiary discharges from inpatient to long-term care. However, if a beneficiary discharges to a Skilled Nursing Facility, hospice, or non-acute care facility, then the entire event is not included in this measure.

For a list of condition codes, please see the "Final Condition Codes" tab here: <u>https://nwmomentumhealthaco.com/wp-content/uploads/2023/01/ACO-REACH-Timely-Follow-Up-codes.xlsx</u>

What if the acute event does have the condition-specific code documented?

The Timely Follow-Up Measure is looking to identify follow up for an exacerbation of a chronic condition. An exacerbation of a chronic condition would be indicated by the condition-specific code being documented during the acute event. If the condition-specific code is not documented, then the visit would not be included in the Timely-Follow Up denominator.

What codes will be used to identify a Timely Follow-Up? Can any E&M code be used, or does it need to be a TCM code?

CMS has released the set of codes that will be used to determine a follow-up. To view the codes, please see the "Follow-Up" tab here: <u>https://nwmomentumhealthaco.com/wp-</u> content/uploads/2023/01/ACO-REACH-Timely-Follow-Up-codes.xlsx