

## A Message from Our President

I hope your 2023 is off to a fantastic start.

This year marks another extraordinary growth period for LTC ACO and we are excited to welcome 20 new partner practices to the organization. They join the 18 participants who share our mission. We greatly appreciate the trust you place in LTC ACO as we work together to transition care for approximately 37,000 potentially assignable long term care resident Medicare beneficiaries from volume to value. This represents the opportunity to manage more than \$600m in annual Medicare spend.

This month, our focus shifts from flagging potentially attributable beneficiaries in your respective medical records systems to tracking progress towards key ACO attribution activities such as physician visits, which signal CMS to share total cost of care data with LTC ACO and monitoring plurality of primary care services billed via an LTC ACO affiliated tax identification number (TIN).

This issue highlights important ACO concepts related to **attribution** and Part B physician visits in the long term care setting. As always, we are your partner in providing insights to assist your practice in realizing optimal attribution yield and continued positive quality, utilization, and financial performance. The next LTC ACO News will focus on the concepts of **plurality** and **interference**.

Thank you all again for your engagement in our shared mission. If you have any questions, please feel free to reach out to your LTC ACO Partner Engagement Manager (PEM) or me directly at [Jason.feuerman@ltcaco.com](mailto:Jason.feuerman@ltcaco.com).

Stay safe and be well.

Best,



Jason Feuerman  
President



### LTC ACO leadership welcomes the following new provider groups:

- ◆ Care2You, LLC
- ◆ Central Ohio Hospitalists
- ◆ Charter LTC, LLC
- ◆ Generation Clinical Partners, LLC
- ◆ Haverhill Family Care, LLC
- ◆ MediTelecare
- ◆ PCMA Palliative Division, LLC
- ◆ Pembroke Medical Associates, Inc.
- ◆ PMC Long Term Care, LLC
- ◆ Post Acute Care Leaders
- ◆ Premier Geriatric Solutions, PLLC
- ◆ QuestCare Matrix and QuestCare Hospitalists, PLLC
- ◆ Radu Ciubuc, MD PA
- ◆ Total Care Family Practice
- ◆ S Kapoor, PLLC
- ◆ Sadiq and Rainosek, PLLC
- ◆ Universal Complete Care
- ◆ University Physicians & Surgeons, Inc.
- ◆ Vantage Healthcare, LLC
- ◆ Vision Medical Consulting, PC

## Attribution: The Necessity of Physician Visits and PART A v PART B Stays

Physician visits are required to “anchor” beneficiary attribution to LTC ACO and prompt CMS to release total cost of care data to LTC ACO.

**For 2023, there are 3 provider-facing measures:**

- ◆ Only a physician visit rendered in a Part B setting will contribute to attribution
- ◆ Physician visits during a Part A stay does NOT contribute to attribution
- ◆ A practice may not know whether the beneficiary is accessing Part A benefits until the EOP is received, as the facility activates a Part A stay

This means that some beneficiaries may require a second physician visit in the Part B or long term care setting (when clinically appropriate) to create attribution if the first visit was rendered during a Part A stay.

LTC ACO monitors physician billing to track overall physician visit completion for flagged beneficiaries. We also compare cumulative physician visits to what is received in the CCLF and share beneficiaries without attribution generating Part B physician visits on a monthly basis.



## APM Bonus – EXTENDED!!

On December 23, 2022, Congress passed the omnibus funding bill that included a one-year extension of the advanced Alternative Payment Model (APM) bonus. Qualifying Advanced APM Participants (QPs) in Performance Year 2023 are eligible to receive a 3.5% incentive payment on all original Medicare paid claims in 2024, payable in Payment Year 2025.



## 2023 Quality Assurance and Improvement Program

The 2023 Quality Improvement Work Plan has been reviewed and approved by the Quality Assurance and Improvement Committee and the Board of Directors. The 2023 Work Plan will be discussed at the upcoming Clinical Roundtable and can be viewed via the Clinical Resources Portal on [www.ltcaco.com/clinical-resources](http://www.ltcaco.com/clinical-resources) (Password: LTCACO).

## 2023 Work Plan Initiatives

INITIATIVE	GOAL
#1 Improve Advance Care Planning (ACP) Performance Rate	Achieve a 20% increase in ACP performance by year end (YE) 2023, based on final 2022 rates at the practice and ACO level.
#2 Improve Annual Wellness Visit (AWV) Performance Rate	Achieve a 10% increase in AWV performance by year end (YE) 2023, based on final 2022 rates at the practice and ACO level.
#3 Reduce Polypharmacy/Medication Burden	Achieve a decrease the number of medications per patient by year end (YE) 2023, based on final 2022 rates at the practice and ACO level.
#4 Encourage Clinically Appropriate Use of Palliative Care and Hospice Services	Achieve a 10% decrease in long-term hospice enrollment (>6 months) by year end (YE) 2023, based on final 2022 rates at the practice and ACO level.
#5 Reduce Potentially Avoidable Hospitalization Rate	Achieve a decrease in the rate of All-Cause Unplanned Admissions for beneficiaries with Multiple Chronic Conditions (MCC1) (YE) 2023, based on final 2022 rates at the practice and ACO level.

**SAVE  
THE  
DATE!**

Please join us for the upcoming quarterly LTC ACO Clinical Roundtable on **January 23, 2023 at 11am ET**.

Please [click here](#) to register to join our first Roundtable of 2023.

*All are welcome!*



THE LATEST

## DISCOVER KEY RESOURCES

LTC ACO is pleased to offer our Clinical Resources portal, exclusively for LTC ACO Participants.

Access the portal by visiting [ltcaco.com/clinical-resources](https://ltcaco.com/clinical-resources), using the password LTCACO.