

# Innovative Health Alliance of New York

**Policy No. 06**

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**EFFECTIVE DATE: 9/21/15**

**POLICY TITLE:**

***Data Submission, Quality Reporting and Certifications***

**REVIEW BY: 9/21/17**

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**POLICY**

Innovative Health Alliance of New York (IHANY) and all ACO Participants and ACO Providers/Suppliers will comply with requirements established by the Centers for Medicare and Medicaid Services ("CMS") for the submission of quality data, certifications, and other information required of participants in the Medicare Shared Savings Program ("MSSP").

**PROCEDURE**

1. CMS establishes quality performance measures to assess the quality of care furnished by ACOs participating in the Medicare Shared Savings Program. CMS requires ACOs to submit quality data on these measures. All IHANY quality data will be collected and reported in accordance with technical specifications and methods established by CMS which are subject to periodic change. Please see the CMS webpages listed below for current requirements and other information:
  - a. ACO Quality Measures and Performance Standards - [http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Quality\\_Measures\\_Standards.html](http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Quality_Measures_Standards.html)
  - b. GPRO Web Interface - [http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO\\_Web\\_Interface.html](http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html)
2. All ACO Participants and ACO Providers/Suppliers will cooperate in the gathering, recording, and submission of complete and accurate quality data, certifications, and other information required by CMS, including providing IHANY access to Medicare beneficiary medical records data as applicable.
3. IHANY data and other information will be submitted through CMS's Group Practice Reporting Option ("GPRO") Web Interface (a website designed for clinical quality measure reporting) or as otherwise directed by CMS.

4. IHANY data, certifications and other information will be submitted by the due dates established by CMS.
5. All certifications and other reports submitted to CMS and other government agencies will be made by an individual with authority to legally bind IHANY and the ability to certify the accuracy and completeness of the data and information to the best of his or her knowledge and belief.

## DEFINITIONS

**Accountable Care Organization ("ACO")** means a legal entity that is recognized and authorized under applicable State, Federal, or Tribal law, is identified by a Taxpayer Identification Number (TIN), and is formed by one or more ACO participants.

**ACO Participant(s)** means an individual or group of ACO provider(s)/supplier(s) that is identified by a Medicare-enrolled Tax Identification Number (TIN), that alone or together with one or more other ACO participants comprise(s) and ACO, and that is included on the required list of ACO participants.

**ACO Provider(s)/Supplier(s)** means an individual or entity that is a provider or a supplier, that is enrolled in Medicare, that bills for items or services it furnishes to Medicare fee-for-service beneficiaries under a Medicare billing number assigned to the TIN of an ACO participant, and that is included on the required list of ACO providers/suppliers.

## POLICY CONTACT

For questions regarding this policy, please contact the Chief Executive Officer (CEO).

## RELATED PROCEDURES AND OTHER MATERIALS

- 42 C.F.R. § 425, Subpart F - Quality Performance Standards and Reporting
- 42 C.F.R § 425.302(a). *Requirements for data submission*
- ACO Quality Measures and Performance Standards - [http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Quality\\_Measures\\_Standards.html](http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Quality_Measures_Standards.html)
- GPRO Web Interface Webpage - [http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO\\_Web\\_Interface.html](http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html)

## APPROVALS

**Initial Approval:** Board of Directors 9/21/15

**Subsequent Review/Revision(s):**