



**May 23, 2021 | KPN Health, Inc.’s Comments | CMS 2021 Medicare Physician Fee Schedule
Re: CMS | Proposed “Quality Overhaul Challenge” for MSSP ACOs**

Title: “KPN Health’s Solution to CMS Quality Overhaul Challenge”

Amid a time of disarray, the Centers for Medicare & Medicaid Services (“CMS”) has unessentially changed ACOs current quality measurement and reporting mechanism, replacing the current approach with a new structure that includes higher performance standards. The new regulations force ACOs to evaluate and implement new reporting, IT, and interoperability strategies with minimal notice. It is a considerable undertaking for some ACOs to move to electronic clinical quality measures for reporting, requiring the aggregation of quality data from disparate electronic health records (“EHR”) systems and reporting quality data on all patients regardless of their payers. Most of the EHRs are not interoperable, causing interoperability anxieties. The changes have significant implications, in 2021 and 2022, with the most notable modifications mandated in 2022. KPN Health, Inc. (“KPN”) believes the rules could significantly impact health information technology costs and expertise related to collecting and reporting data from multiple EHRs. Additionally, these new regulations may lead to the burnout of clinicians, specialists, and small practices because of additional reporting burdens and associated IT costs.

For many reasons, ACOs should not wait to begin preparing for the new regulations. The new rules, when implemented, will be a significant demand on your ACO. KPN can help with advising on a successful methodology and strategy to tackle the changes with ease and success.

KPN has a proven toolkit that includes the following:

1. Planning, processing, and aggregation of data from disparate sources.
2. Implementation of documentation standards across all entities, PCPs, and specialists.
3. Identify an attribution method that works for your ACO payor at-risk contracts.
4. Install a robust eMPI process.
5. Invest in a partner that can deliver aggregated data that can provide actionable information for every encounter.
6. Implement an automated Interactive patient engagement strategy outside of Encounters.
7. Stress patient adherence and compliance by identifying and addressing non-clinical, social determinants of health.

For example, KPN provides its propriety **Point of Care Report** delivered through the **KPN Optimize® Platform** daily to every provider at every encounter at Triad Healthcare Network (“THN”) located in Greensboro, NC. **KPN's Point of Care** displays specific quality, cost, and utilization gaps in care directly correlated with metrics for GPRO, MA, and Commercial payors. THN achieved a 99.1% quality score in the NexGen program in 2019, placing THN #2 in the country for quality for all NexGen ACOs.

“THN could not have achieved these results without KPN Optimize® Point of Care Report, and the support of KPN”, states Elissa Langley, MHA, Triad Healthcare Network, VP, Chief Operating Officer.

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