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**Health Services Cost Review Commission**

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To: MPA Liaisons  
From: William Henderson, Principal Deputy Director  
Date: June 12, 2019  
Re: MPA Data Sharing Notification Requirements Memo

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Dear MPA Liaisons,

CRISP is on schedule to release an upgrade to MADE in mid-July that will allow you to access all MADE data for beneficiaries attributed to your hospital under the MPA in the MDPCP, ACO, and Employment tiers, as well as those in the Referral tier for which you have asserted a care coordination agreement exists (list due to us by June 15<sup>th</sup>). In order to allow for that PHI release and allow access on an ongoing basis, we need to validate that certain relationships continue to exist between you and your providers. **The memo below discusses two new MPA-attribution notification requirements: (1) an obligation to notify the HSCRC if certain events that impact PHI sharing occur; and (2) the ability to add new HIPAA-compliant care coordination agreements throughout the year** (staff had previously indicated this would be possible on a limited basis, but not the specific process)

*Background:*

While changes in hospital/provider relationships during a performance year do not change the attribution, they do impact HSCRC's ability to share PHI data. Working with our legal counsel, we have determined that the changes listed under *Notification Requirements* below will end the data-sharing relationship between an attributed beneficiary and the hospital and will result in the termination of PHI sharing based under the MPA for any impacted beneficiary. Therefore, we are required to gather data on these events in as timely a fashion as possible. This change only impacts beneficiaries where PHI was shared on the basis of an MPA relationship; if the hospital also has a touch relationship, the PHI will still be shared based on that. These changes **do not** impact the attribution, only PHI sharing; the beneficiary will continue to be attributed to the same hospital.

In addition, since we are required to collect ongoing information from hospitals on these events, we will also allow hospitals to add new HIPAA-compliant care coordination agreements and to grant PHI access on an ongoing basis as well. It is the responsibility of hospitals to arrange for these care coordination agreements.

*Future Development*

HSCRC staff recognizes the administrative burden created by these requirements. We have strived to develop an approach that will minimize the administrative burden without compromising the privacy protection of Maryland's Medicare beneficiaries. We are in the process of developing a tool that will automate and simplify the process of tracking of attribution under the MPA and will let you know when

this tool is available.

*Required Action*

The table below shows the termination and addition events and the notification requirement for each. **Notice of an event is due to the HSCRC at [hscrc.tcoc@maryland.gov](mailto:hscrc.tcoc@maryland.gov) upon the event**, and should be delivered no later than the next occurring 25<sup>th</sup> of the month following the date of the event. Hospitals should strive to be as timely as possible in delivering notice. The related PHI sharing will be terminated/added effective with the CRISP release date in the following month (typically around the 10<sup>th</sup>). As the data is released on a lagged basis, these timelines will be sufficient to prevent inappropriate PHI sharing as long as hospitals notify the HSCRC in a timely fashion.

**The initial due date is June 25<sup>th</sup>, 2019. Please notify us prior to this date if any of the Termination Events have occurred since the attribution data was submitted. You may also add any Addition events between the initial deadline of Jun 15<sup>th</sup> and June 25<sup>th</sup>.**

Please contact [hscrc.tcoc@maryland.gov](mailto:hscrc.tcoc@maryland.gov) with any questions or concerns.

Notification Requirements:

Event Type	Relevant Attribution Tier	Event	Notification Requirement
Termination	ACO	Termination of an ACO or the ACO's relationship with a hospital (applicable only to those hospitals attributing beneficiaries based on an ACO relationship).	Notify HSCRC of the hospital(s) associated with the termination.
Termination	Employed Provider	Termination of a provider's employment by a hospital for a provider on the employed provider list given to the HSCRC as part of MPA attribution.	Notify the HSCRC of the NPIs of any terminated providers and the related hospital.  If the hospital did not give the HSCRC an employed provider list, this requirement is not relevant.
Termination	Referral	Termination of a previously signed care coordination agreement between a hospital and a provider or provider group.	Notify the HSCRC of the NPIs of any terminated providers and the related hospital.
Termination	MDPCP	Termination of a group's participation in MDPCP where the group is associated with a hospital's CTO.	None required. The HSCRC will derive MDPCP information from data received from CMS.
Addition	Referral	Signing of an HIPAA-compliant care coordination agreement between a hospital and a provider or provider group.	Notify the HSCRC of the NPIs of any added providers and the related hospital and submit an updated signed attestation noting the change

Best,  
 William Henderson  
 Principal Deputy Director, Medical Economics and Data Analytics  
 Maryland Health Services Cost Review Commission (HSCRC)