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To: MPA Liaisons

From: Willem Daniel, Deputy Director

Date: January 3, 2020

Re: MPA Attribution Tracking Tool (MATT) for Annual and Monthly Attribution

Dear MPA Liaisons,

Beginning in 2018, the HSCRC worked with hospitals to collect provider lists that are used for the Medicare Performance Adjustment (MPA). The MPA has an annual attribution that occurs in February of each year, with hospitals subsequently responsible for the total cost of care for their MPA population. To date, attribution lists have been shared and reviewed through excel-based tools and email. In mid-January 2020, CRISP is on schedule to release a new tool to collect MPA lists, called the MPA Attribution Tracking Tool (MATT). MATT will replace the excel-based lists used for both the purposes of the annual MPA attribution and the ensuing monthly updates for protected health information (PHI).

MATT will be used to collect information for the CY2020 (MPA Performance Year 3) attribution. Training will be available in January and hospitals will need to designate MATT users by the end of January 2020 (further details below).

MATT Functionality

There are two key functions that MATT provides to help automate and simplify the MPA attribution:

1. Building the annual MPA attribution: MATT follows the MPA tiers, allowing hospitals to provide MDPCP lists, ACO lists, and employed provider lists. Hospitals will be allowed to submit new lists in MATT, or use and edit the prior year's list. **These initial hospital submissions in MATT are due by Friday, February 14, 2020.** From these lists submitted through MATT, the HSCRC will run the MPA algorithm to deal with potential overlap and attribute remaining beneficiaries. Before the MPA lists are finalized, hospitals will be able to **review their attributed providers in MATT from March 9 to March 20, 2020** and provide any necessary corrections to hsrc.tcoc@maryland.gov.
2. Tracking the MPA attribution: In the months following the annual attribution, monthly updates to provider lists are needed to ensure hospitals can access their PHI data in MADE. These updates do not change the annual MPA attribution. Each hospital is required to review their MPA lists monthly and provide any relevant termination, addition, and continuation events (see Appendix). The same requirements as established in the June 2019 memo will be required in MATT, with failure to comply resulting in termination of all the hospital's PHI data access in MADE. **Please**

note: during the months of January and February 2020, hospitals will be able to provide their monthly updates to the HSCRC either in MATT or with the original excel-based methods. Starting in March 2020, the HSCRC will no longer accept the excel-based lists and will require these updates are made in MATT.

MATT Users

MATT will be available for hospitals to access in the CRISP Reporting Services (CRS) dashboard. Each hospital will need to designate their “MATT User(s)”, who will be given the ability to view and modify their MPA lists in MATT. **Each hospital must have at least one MATT user, and no more than three MATT users.** Hospital systems can have MATT Users that are able to access multiple or all of the hospitals in their system. **By Friday, January 31, 2020, a representative from each hospital should email hscrc.tcoc@maryland.gov with the MATT User(s) name, email, and which hospital(s) the user should be able to access.**

MATT Training

CRISP and the HSCRC will be providing two identical trainings to educate hospitals on how to use MATT, with additional details on the two functionalities and timelines. The two dates are only to provide hospitals with additional flexibility for finding a time that is convenient for them, **you should not attend both trainings.** The trainings will be held over Zoom, with no in-person option. The Zoom links below provide the ability to register for the training. We can also send a calendar invitation to interested participants if you reach out to hscrc.tcoc@maryland.gov with the training you would like to attend.

MATT Training 1: Tuesday, January 14th from 12 to 1pm EST

Zoom registration: https://crisphealth.zoom.us/meeting/register/vJQrc-6rrTov-Z_mBC7EN4KUnLQPLQkzxQ

MATT Training 2: Friday, January 24th from 10 to 11 am EST

Zoom registration: https://crisphealth.zoom.us/meeting/register/vJcqd-urqTsoGTR_mhBHSQROyJHbZy3UmA

Please contact hscrc.tcoc@maryland.gov with any questions or concerns.

Best,

Willem Daniel

Deputy Director, Payment Reform and Provider Alignment

Maryland Health Services Cost Review Commission (HSCRC)

Appendix. Required Monthly Action

The table below shows the termination and addition events and the notification requirement for each. **Notice of an event is due in MATT upon the event**, and should be delivered no later than the next occurring 25th 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 10th). 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.

Monthly 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).	Update MATT with 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 in MATT as part of MPA attribution.	Update MATT with the NPIs of any terminated providers and the related hospital. If the hospital did not provide an employed provider list in MATT, this requirement is not relevant.
Termination	Referral	Termination of a previously signed care coordination agreement between a hospital and a provider or provider group.	Update MATT with 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.	Update MATT with the NPIs of any added providers and the related hospital and submit an updated signed attestation noting the change.