



November 18, 2020

Mr. David Seltz
Executive Director
Health Policy Commission
50 Milk Street, 8th Floor
Boston, MA 02109

Submitted Electronically

RE: Proposed 2022-2023 Accountable Care Organization (ACO) Certification Standards

Dear Mr. Seltz:

Beth Israel Lahey Health Performance Network (BILHPN) appreciates the Health Policy Commission's (HPC) opportunity to provide comments on the Proposed 2022-2023 Accountable Care Organization (ACO) Certification Standards. BILHPN, a part of Beth Israel Lahey Health, is clinically integrated network of physicians, clinicians, and hospitals in Eastern Massachusetts committed to providing high quality, cost-effective care to the patients and communities they serve, while effectively managing medical expense. Leveraging best practices in population health management and data analytics, BILHPN improves care quality and patient health outcomes through joint contracting and population health initiatives.

BILHPN offers the following comments to the questions specified in the Public Comment document:

1. The proposed assessment criteria for the 2022-2023 application align with BILHPN's strategic priorities and we support the addition of the new "Whole Person Care Criterion." As an ACO, integrating behavioral health into primary care settings to enhance our care delivery model is an important goal for our organization. However, we do not use "bi-directional referral platforms" for social determinants of health (SDH) referrals. This endeavor is too costly given our limited funding and not currently feasible from a technological perspective. We encourage the HPC to modify Criterion #5 and remove this requirement.
2. The proposed documentation requirements options for the Assessment Criteria provides sufficient opportunities for BILHPN to demonstrate adherence to the standards.
3. BILHPN recommends prioritizing the following questions within each category:
 - Approaches to Improving Health Equity:
 - What steps has the ACO taken to prioritize improving health equity in its organization, including in its governance and care delivery?
 - What types of data does the ACO collect to assess health equity among its patient population?

- Use of Innovative Care Models
 - What supports are in place within the ACO to support telehealth services and what impact has COVID-19 had on the ACO's telehealth strategy?
 - How are newer provider types, such as recovery coaches and community health workers, being incorporated into ACO care models and/or population health management programs?
 - Does the ACO have a process in place to identify patients for palliative care?
- Strategies to control TME Growth
 - What are the ACO's strategies for reducing leakage and managing referrals?
 - How does the ACO redirect community appropriate care to high-value community settings and support patients to make high-value choices?
 - What are the ACO's protocols or guidelines to encourage appropriate use of lower cost drugs and imaging?
 - What strategies has the ACO implemented to shift spending toward primary care and/or reduce utilization of inpatient and post-acute care?

BILHPN appreciates the HPC's opportunity to comment on this important program. We look forward to continue our work with the HPC in future proposals to the ACO Certification Program.

Sincerely,

A handwritten signature in cursive script, appearing to read "Nicole DeVita".

Nicole DeVita,
Chief Operating Office