

Policy Title: Public Reporting Requirements			
Department Responsible: THN Compliance & Integrity	Policy Number: CMR-002	THN's Effective Date: January 1, 2022	Next Review/Revision Date: September 30, 2024
Title of Person Responsible: THN Director of Compliance	THN Approval Council: THN Compliance and Privacy Committee	Date Approved: June 9, 2023	Date Approved by THN Board of Managers: August 15, 2023

I. **Purpose.** The purpose of CMR-002 is to (1) outline and define Triad HealthCare Network's (THN's) Public Reporting Requirements as defined by the ACO REACH PA and (2) procedures to ensure that THN's practices are consistent with its stated policies.

II. **Policy.** THN shall promote transparency within the ACO REACH Model by ensuring compliance with all Public Reporting requirements put in place by CMS.

III. **Procedures.**

- A. THN shall, at all times, be a legal entity identified by a Tax Identification Number (TIN) formed under applicable law and separate from the legal entity of any of its Participants or Preferred Providers.
 - 1. THN shall, at all times, maintain compliance with applicable state licensure requirements in each state in which it operates regarding risk-bearing entities.
- B. THN shall maintain an identifiable governing body with sole and exclusive authority to execute the functions of THN and make final decisions on behalf of THN. This governing body shall have responsibility for oversight and strategic direction of THN and is responsible for holding THN management accountable for THN's activities. This governing body must:
 - 1. Ensure at least 75 percent control of the ACO's Governing Board is held by ACO Participants, or their Designated Representatives
 - a. Designated Representatives are defined as individuals employed by or under contract with the Participant Provider entity that designates the representative.
 - 2. Include a Medicare Beneficiary served by the ACO, who meets the requirements of section 3.0B.1 of the PA, is not the same as the individual identified to serve as the Consumer Advocate and has voting authority.
 - 3. Include an individual with experience or training as a Consumer Advocate, who meets the requirements of Section 2.B.1 of the PA, is not the same individual identified to serve as the Medicare Beneficiary and has voting authority on the Governing Board.
 - 4. Be responsible for the oversight and strategic direction of the ACO and for holding THN management accountable for the ACO's activities.

5. Have a transparent governing process including implementation of a process for documenting Governing Board composition, meetings, and decisions, and retaining records of these items in accordance with THN's Record Retention policy.
 - a. At a minimum, this includes keeping minutes for all meetings of the Governing Board and any subcommittee thereof.
 6. Ensure that when acting as a member of the Governing Board, each member of the Governing Board has a fiduciary duty to THN and acts consistent with that duty.
 7. Not include a Prohibited Participant, or an owner, employee, or agent of a Prohibited Participant
 8. Each member of the governing body is given a copy of the ACO REACH PA signed by THN, and any amendments thereto, within 60 days of signature or onboarding.
- C. THN will maintain a publicly accessible website. The website will be reviewed and updated as necessary to ensure all information posted on the website is current. The website will include reporting of, at a minimum, the following:
1. Organizational information, including:
 - i. Name and location of THN;
 - ii. Primary contact information for THN;
 - iii. Identification of all Participants and Preferred Providers;
 - iv. Identification of all joint ventures between or among THN and any of Participants and Preferred Providers;
 - v. Identification of THN's key clinical and administrative leaders and the name of any company by which they are employed; and
 - vi. Identification of members of THN's Board of Managers employed.
 2. Shared Savings and Shared Losses information, including:
 - i. The amount of any Shared Savings or Shared Losses for any Performance Year
 - ii. The proportion of Shared Savings invested in infrastructure, redesigned care processes, and other resources necessary to improve outcomes and reduce Medicare costs of beneficiaries; and
 - iii. The proportion of Shared Savings distributed to Participant Providers and Preferred Providers
 3. THN's performance on the quality measures described in Section 9.02 of the ACO REACH PA
- D. THN's website will be considered Marketing Material. All changes must be submitted to THN Marketing Manager for review and approval prior to use on the website in accordance with OP-002, except:
1. THN Data Base Contract Administrator may update the list of Participants or Preferred Providers as needed without submitting those changes for approval.
- E. All updates to required public reporting shall be made within 30 days of the effective date of the change. For purposes of:
1. Adding a Participant or Preferred Provider, the effective date will be the date the notice is received from CMS;

- 2. Removing a Participant, the effective date will be the date when the individual's agreement with THN to participate in the ACO REACH Model terminates.
- F. Participants are responsible for ensuring that CMS is notified when an individual is no longer billing under the Practice TIN, or when a new individual is added to the practice. Such notification shall be submitted to CMS within 30 days of the notification to THN.

Date	Reviewed	Revised	Notes
January 1, 2022			Originally Published
August 2022	X		No changes
May 2023		X	Converted to REACH