

The federal Centers for Medicare and Medicaid Services (CMS) has recently announced the grantees for the Accountable Health Communities (AHC) program. AHC program grantees must select one of several different approaches to documenting participant data, with a particular focus on identifying social needs and referring individuals to community resources.

CMS has made it clear that grantees may use third-party data systems, but they must be compatible with the data collection requirements and business logic identified by CMS. Although certain details of the program requirements have not yet been communicated, Aunt Bertha is committed to developing the necessary functionality to comply with CMS requirements as they become available. The table below shows how Aunt Bertha complies with the data collection requirements and business logic identified by CMS.

Data Requirements	Supports	Committed*
Generate Registration File (see: 04_Non-CMS-System-Data-Submission-To-CMS.pdf)		✓
Generate Screening File (see: 04_Non-CMS-System-Data-Submission-To-CMS.pdf)	✓	
Generate Navigation File (see: 04_Non-CMS-System-Data-Submission-To-CMS.pdf)		✓
Generate Community Resource Inventory File (see: 04_Non-CMS-System-Data-Submission-To-CMS.pdf)	✓	
Generate Community Referral Summary File (see: 04_Non-CMS-System-Data-Submission-To-CMS.pdf)	✓	
Business Logic - Beneficiary Registration		
The system must indicate that an offer to screen has been made to a beneficiary when it has recorded all of the following information about the beneficiary: <ul style="list-style-type: none"> • Name: First • Name: Last • Address: Line 1 • Address: ZIP code • Demographics: Birthdate • Benefits program: ID (current) (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 1)		✓
The system must accommodate the Social Security Number Removal Initiative (SSNRI) by allowing beneficiaries to		✓

<p>provide either a Health Insurance Claim Number (HICN) or Medicare Beneficiary Identifier (MBI) during the transition phase of the initiative, which will begin no earlier than April 1, 2018 and run through December 31, 2019. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 2)</p>		
<p>Business Logic - Screening</p>	<p>Supports</p>	<p>Committed*</p>
<p>The system must be able to identify each health-related social need (HRSN) based on a beneficiary's responses to screening questions in the CMMI HRSN Screening Tool as determined by CMS. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 7)</p>	<p>✓</p>	
<p>The system must supply the screening questions in the CMMI HRSN Screening Tool in the order determined by CMS. However, it should allow a beneficiary to skip ahead and return to previous questions during screening. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 8)</p>	<p>✓</p>	
<p>The system must allow rescreening of beneficiaries over the course of the model. Rescreens will be counted towards the annual screening milestones. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 9)</p>	<p>✓</p>	
<p>Business Logic - Community Referral Summary (CRS)</p>	<p>Supports</p>	<p>Committed*</p>
<p>The system must record a beneficiary as eligible for a Community Referral Summary (CRS) if the beneficiary meets all of the following criteria:</p> <ul style="list-style-type: none"> • The beneficiary answered the three information questions: <ul style="list-style-type: none"> ○ Who is providing the information? ○ How many times have you received care in an emergency department over the last 12 months? ○ Do you live in any of the following locations? • The beneficiary's responses to the core HRSN screening questions identified at least one core HRSN. 	<p>✓</p>	

<p>(see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 13)</p>		
<p>The system must document a beneficiary's refusal to accept a CRS. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 14)</p>	✓	
<p>In the event that a beneficiary is rescreened, the system must not allow the resources in the beneficiary's CRS to be altered or changed, except for the following situations:</p> <ul style="list-style-type: none"> • If the beneficiary is rescreened more than 365 days after their last screening, the system must allow for a new CRS with all new resources to be generated. • If a rescreening results in the identification of a new HRSN, the system must allow the beneficiary's most recent CRS to be updated to include resources for the newly identified HRSN(s). All other resources in the updated CRS should otherwise be unaltered or unchanged from the resources in the beneficiary's most recent CRS. • If a resource in the beneficiary's most recent CRS is inactive, as determined by the bridge organization, the system must allow a system user to update the beneficiary's most recent CRS to include new resources for the HRSN(s) for which resources were inactivated. • If beneficiary is in an open navigation period, the system must allow the navigator to update resources at any time without restriction, as CRS is a tool to support navigation. <p>(see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 15)</p>		✓
Business Logic - Risk Stratification	Supports	Committed*
<p>Unless the beneficiary is in an open navigation period, the system must assign a beneficiary to the high risk group only if all of the following criteria are met:</p> <ul style="list-style-type: none"> • The beneficiary self-reports 2 or more ED visits in the previous 12 months. • At least one core HRSN is identified during screening. <p>(see:</p>	✓	

<p>03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 16)</p>		
<p>During an open navigation period, the system must record the beneficiary’s self-reported ED visits at every rescreening. Notwithstanding the beneficiary’s self-reported ED visits at the time of rescreening, the system must maintain the risk stratification assignment for each beneficiary within an open navigation period. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 17))</p>	✓	
<p>Business Logic - Navigation</p>	Supports	Committed*
<p>The system must indicate that a beneficiary is eligible for navigation services only if the beneficiary has been risk stratified to the high-risk group. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 18))</p>	✓	
<p>If a beneficiary that is eligible to receive navigation services consents to receiving such services, the system must open a navigation case for a period of 12 months (navigation period). (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 19))</p>		✓
<p>The system must document and report whether a beneficiary has refused navigation services. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 20))</p>	✓	
<p>The system must allow navigators to add additional HRSN(s) to the beneficiary’s record during the navigation period. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0, Business Rule 21))</p>	✓	
<p>The system must allow navigators to update the status (open/closed) and results (resolved/unresolved) of a HRSN during the navigation period. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0,</p>		✓

Aunt Bertha Features & AHC Data System Requirements



<i>Business Rule 22)</i>		
The system must differentiate between a HRSN identified through screening and a HRSN identified through navigation. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0 , Business Rule 23)		✓
Business Logic - Community Resource Inventory (CRI)	Supports	Committed*
They system must allow the CRI to be updated at least every 6 months. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0 , Business Rule 32)	✓	
Business Logic - Merging Beneficiary Records	Supports	Committed*
If the system merges partially complete beneficiary records it must follow the same business rules as the AHC Data System. CMS will provide these business rules to bridge organizations that choose to collect data in a non-CMS data system. (see: 03_AHC-Model-Data-System-Logic-Alignment-Track-v1.0 , Business Rule 38)		✓

**Based on all published materials from CMMI we have read, we are fully committed to supporting these features.*