

Application Process

Frequently Asked Questions (FAQ) – Update June 2019

Quick Links to Questions

Q1: How can organizations apply to participate in Bundled Payments for Care Improvement Advanced (BPCI Advanced)?	4
Q2: Do current Participants need to submit an application?	4
Q3: Are Applicants obligated to participate in BPCI Advanced?	4
Q4: Can Convener Participants add EIs to applications after the submission deadline?	5
Q5: What is the process for an organization to go from Applicant to Participant once a Participation Agreement is signed and returned to CMS?	5
Q6: Can an Acute Care Hospital (ACH) and a Physician Group Practice (PGP) with overlapping Medicare beneficiaries both apply as Non-Convener Participants or participate as Downstream EIs?	5
Q7: Can EIs appear on multiple applications?	5
Q8: Is there a limit to the number of applications an organization can submit?	5
Q9: What level of commitment do Convener Participants need from potential Downstream EIs or Participating Practitioners prior to applying?	6
Q10: Can CMS explain the difference between a hospital system applying as a "system" versus the individual hospitals within the system?	6
Q11: How many Participating Organizations Attachments should a Convener Participant with multiple Participating Organizations submit with its application?	6
Q12: Does CMS require an Applicant to specify in the application those organizations with which it plans to share any Net Payment Reconciliation Amount (NPRA)?	7
Q13: Do PGPs that have had more than one Taxpayer Identification Number (TIN) in the last four years need to list them all on the application?	7
Q14: Can Applicants include a Skilled Nursing Facility (SNF) or any other type of post-acute care provider (PAC Provider) in the Participating Organizations Attachment?	7
Q15: The Quality Assurance section of the application asks to list "sanctions." How much detail do Applicants need to provide?	7

Q16: What should an Applicant do if they forgot their username and/or password for the Application Portal?..... 7

Q17: CMS excludes Critical Access Hospitals (CAHs) from participating in BPCI Advanced. If a Sole Community Hospital (SCH) with a Rural Referral Center designation owns a CAH that has a separate CMS Certification Number (CCN), can the SCH participate in BPCI Advanced? 7

Q18: Can PGPs not affiliated with a hospital apply? If so, can a small practice participate in BPCI Advanced? 8

Q19: Are providers in the state of Maryland allowed to participate in BPCI Advanced? 8

Q20: Can an organization apply for only a handful of the Clinical Episodes, instead of the entire list of Clinical Episodes? Is it an “all-or-nothing” deal?..... 8

Q21: Will a PGP be able to select which individual physicians want to participate in BPCI Advanced, or will CMS include all the physicians under the TIN? 8

Q22: How does a PGP EI providing services in multiple locations, including a hospital, participate in BPCI Advanced as one Convener Participant?..... 8

Q23: Can a hospital be a Convener Participant for some Medicare Severity-Diagnosis Related Groups (MS-DRGs) and be a Non-Convener Participant and EI for others? 9

Q24: Are preferred networks for SNFs and home health providers encouraged as long as beneficiaries are aware that they have a choice of any provider?..... 9

Q25: Can Applicants see what the Target Price will be for their hospitals to determine if the prices work for them? 9

Q26: How can a current Non-Convener Participant become a Convener Participant for MY3? 9

Q27. How can a current Convener Participant become a Non-Convener Participant for MY3? ... 10

Q28: How can a current Downstream EI become a Participant for MY3? 10

Q29: How can a current Participant become a Downstream EI for MY3? 10

Q30: How can a Downstream EI switch Convener Participants for MY3? 10

Q31: Can a Downstream EI withdraw from their current Convener Participant, prior to the end of Model Year 2 (12/31/2019)?..... 11

Q32: If I am a current participant in BPCI Advanced and do not want to make any changes to my EIs and Clinical Episodes, is there any action I have to take before June 24, 2019? Will I still receive new baseline data for all Clinical Episodes and preliminary Target Prices for MY3? 11

Q33: We are new to BPCI Advanced and are unsure if we want to apply as a Convener Participant or as a Non-Convener Participant. Do we have the ability to submit both types of applications?11

Q34: We were in BPCI Advanced but dropped out of all our Clinical Episodes. Do we have to complete a whole new application to gain access to data for future evaluation? 12

Q35: We are a PGP that recently applied for a new Tax Identification Number. Can we submit an application even if all our providers have not started billing under the new TIN? 12

Q36: As a PGP, are we able to choose the hospitals that we participate with or do we have to participate with all hospitals within our practice area? How does a PGP limit the hospital(s) with which it wants to participate on the application?..... 12

Q37: Is there is a required length for the free text questions on the application? 12

Q38: If I start an application, can I have one of my colleagues finish and submit the application? 12

Q39: Who can sign the BPCI Advanced Application?..... 12

Q40: We applied to BPCI Advanced during the first application period and plan to apply again during this application period. Can you let us know what questions have changed between the previous application and the current one?..... 13

Q41: The application information for existing participants states, "A current Participant cannot submit both an EI Addition Template and an EI Restructure Template under the same BPID." Does this statement refer to the parent BPID of the Convener or the Downstream EI BPID?..... 13

Q42: As a current Participant, do I need to sign a new DRA form if I'm restructuring or adding EIs? 13

Q43: Are there any attachments to the application? 14

Q44: On the Participating Organizations attachment and EI Addition Template there are fields for a physician first name, last name, and National Provider Identifier (NPI). Do we need to list all the physicians in the PGP EI or just one physician?..... 14

Q45: How do I know if CMS has received my application? 14

Q46: I submitted an application and realized I need to change my response for a question. How do I edit a submitted application?..... 14

Q47: Will I be able to access the BPCI Advanced Application Portal after the application window closes? 14

Q48: During the 2018 application cycle, applicants received historical claims data from 2014 to 2016. What is the year range for the historical data provided in this application cycle? 15

Q49: My organization plans to participate as a Downstream EI under a Convener Participant in MY3 (2020). Would we be able to leave that Convener Participant and start participating as a Non-Convener Participant on our own in Model Year 4 (2021)? 15

Q50: Will active Participants in MY3 be able to drop EIs or Clinical Episodes from the Model in future model years? 15

Q1: How can organizations apply to participate in Bundled Payments for Care Improvement Advanced (BPCI Advanced)?

A1: CMS will only accept applications via the BPCI Advanced Application Portal. The Portal is available here: <https://app1.innovation.cms.gov/bpciadvancedapp>.

CMS encourages all Applicants to review the Request for Applications (RFA) and supporting materials offline before logging into the Portal. The Application Template, Application Attachment – Participating Organizations Template, and Application Portal Walkthrough are available for download here: <https://innovation.cms.gov/initiatives/bpci-advanced/applicant-resources.html>.

The second application period opened on April 24, 2019 and closes on June 24, 2019 at 11:59 PM EDT. More details are available on the BPCI Advanced website: <https://innovation.cms.gov/initiatives/bpci-advanced/>.

Q2: Do current Participants need to submit an application?

A2: No. CMS does not require current Participants to submit an application. CMS requires current Participants who wish to continue participating – with or without changes to current Episode Initiator (EI) structure – to sign the Amended and Restated Participation Agreement for Model Year 3 (MY3) (2020) and submit the required deliverables in late 2019.

If current Participants wish to add EIs under an existing bundled payment identifier (BPID), they will need to submit an EI Addition Template via the BPCI Advanced Participant Portal.

Additionally, if current Convener Participants that have multiple active Downstream EIs under a single Participation Agreement wish to separate their EIs into multiple agreements, they will need to submit an EI Restructure Template via the BPCI Advanced Participant Portal.

The Participant Portal will be accepting EI Addition Templates and EI Restructure Templates for submission from April 24, 2019 through June 24, 2019 at 11:59 PM EDT.

A current Participant cannot submit both an EI Addition Template and an EI Restructure Template under the same BPID. If a current Participant wants to add new EI(s) under new agreement(s), then the Participant must submit an application in the BPCI Advanced Application Portal.

Please reference Q26 through Q31 below for greater details on how current Participants can switch roles in MY3.

Q3: Are Applicants obligated to participate in BPCI Advanced?

A3: No. Application submission does not obligate an organization to participate in BPCI Advanced. Likewise, submission of a complete application does not guarantee that CMS will select the Applicant to participate in BPCI Advanced. CMS requires potential Participants to have signed and executed a BPCI Advanced Participation Agreement with CMS to participate in the Model. CMS does not execute Participation Agreements until it has reviewed applications and Applicants have successfully passed a provider vetting by the CMS Center for Program Integrity (CPI) and completed a law enforcement screening process.

Q4: Can Convener Participants add EIs to applications after the submission deadline?

A4: No. Convener Participants must submit the names and details of all potential Downstream EIs with whom they want to participate at the beginning of MY3 (January 1, 2020) with the application by the submission deadline of June 24, 2019 at 11:59 PM EDT.

Q5: What is the process for an organization to go from Applicant to Participant once a Participation Agreement is signed and returned to CMS?

A5: Only after CMS selects the Applicant, the Applicant passes the provider vetting process and law enforcement screenings, and CMS executes the Participation Agreement signed by the organization, does CMS consider an organization to be a Participant in BPCI Advanced. Receipt of preliminary Target Prices and the BPCI Advanced Participation Agreement template does not mean that CMS has approved an application.

Q6: Can an Acute Care Hospital (ACH) and a Physician Group Practice (PGP) with overlapping Medicare beneficiaries both apply as Non-Convener Participants or participate as Downstream EIs?

A6: Yes. ACHs and PGPs that share or have overlapping Medicare beneficiaries can apply as Non-Convener Participants who bear risk and initiate Clinical Episodes themselves. Additionally, a Convener Participant may list both entities as Downstream EIs on its application, even if it has overlapping Medicare beneficiaries.

Q7: Can EIs appear on multiple applications?

A7: Yes. CMS allows potential EIs (e.g., ACHs or PGPs that wish to participate in BPCI Advanced as either a Participant or a Downstream EI) to appear in multiple Participating Organization attachments and/or EI Addition Templates submitted by the application deadline. However, EIs may participate only with a Convener Participant or as a Non-Convener Participant.

The Participant Profile that each Applicant receives from CMS includes all potential EIs in the application. In that document, the Convener Participant identifies its Downstream EIs and their specific Clinical Episode selections for MY3. A Non-Convener Participant identifies its own Clinical Episode selections for MY3.

CMS allows potential EIs, ACHs or PGPs, to appear in multiple EI Addition Templates and BPCI Advanced applications, including Participating Organizations attachments, submitted by the June 24, 2019 deadline.

However, at the time of the Participant Profile submission in November, an EI can only appear in one Participant Profile with the status of "Active." Otherwise that EI will not be eligible to participate in BPCI Advanced.

Q8: Is there a limit to the number of applications an organization can submit?

A8: No. Applicants may submit multiple applications to account for the different types of arrangements.

For example, an Applicant may want to apply as a Convener Participant but may be unsure whether they want to apply with ACHs and PGPs in one application or separately. The Applicant can:

- Submit one Convener Participant application that includes all potential ACHs and PGPs in the Participating Organizations Attachment
- Submit two Convener Participant applications where one application would include all potential PGPs in the Participating Organizations Attachment and the other application would include all potential ACHs in Participating Organizations Attachment
- Submit three applications that account for the above two scenarios

Regardless, each application must list all EIs in the Participating Organizations Attachment at the time of submission. The Application Portal provides the option to “clone” submitted applications. Applicants cannot revise an application after it has been submitted.

Current Participants completing an EI Addition Templates should submit one template. However, if you need to make a revision to your submitted template, you can do so by uploading another version in the Participant Portal by June 24, 2019. Only the latest version of the template will be reviewed by CMS.

Q9: What level of commitment do Convener Participants need from potential Downstream EIs or Participating Practitioners prior to applying?

A9: CMS is not defining the level of commitment that a Convener Participant needs with potential EIs, Participating Practitioners, or partnering entities. However, by the application submission deadline, all potential EIs must appear in the Participating Organizations Attachment. As a reminder, once a Convener Participant applies, CMS does not allow revisions to the application.

Q10: Can CMS explain the difference between a hospital system applying as a "system" versus the individual hospitals within the system?

A10: A hospital system can apply to participate in BPCI Advanced as a Convener Participant, which brings together multiple Downstream EIs. In this case, the EIs would be hospitals within the system. As a Convener Participant, a hospital system would facilitate coordination among its hospitals and would also bear and apportion financial risk.

The individual hospitals within a hospital system also can apply as Non-Convener Participants, which bear financial risk only for themselves and do not bear financial risk on behalf of multiple downstream EIs.

Q11: How many Participating Organizations Attachments should a Convener Participant with multiple Participating Organizations submit with its application?

A11: Convener Participants submitting one application must submit only one Participating Organizations Attachment. Please list all potential EIs in one attachment.

Q12: Does CMS require an Applicant to specify in the application those organizations with which it plans to share any Net Payment Reconciliation Amount (NPRA)?

A12: No. The application asks Applicants to identify the types of organizations with which they intend to share any NPRA, but not the specific name of the ACHs or PGPs. Participants must submit the Financial Arrangement List (FAL) deliverable, which will list all potential NPRA Sharing Partners approximately 60 days before the start of MY3. Participants can update the list quarterly.

Q13: Do PGPs that have had more than one Taxpayer Identification Number (TIN) in the last four years need to list them all on the application?

A13: No. PGPs should include only the TIN they plan to use to initiate Clinical Episodes in BPCI Advanced.

Q14: Can Applicants include a Skilled Nursing Facility (SNF) or any other type of post-acute care provider (PAC Provider) in the Participating Organizations Attachment?

A14: No. SNFs and other PAC Providers can apply to participate as a Convener Participant in BPCI Advanced, but SNFs cannot appear in the Participating Organizations Attachment because that document identifies potential Downstream EIs. Only ACHs and PGPs can participate as EIs and initiate Clinical Episodes in BPCI Advanced. SNFs and other PAC providers can appear in the FAL as an organization with whom the Participant has a Financial Arrangement.

Q15: The Quality Assurance section of the application asks to list “sanctions.” How much detail do Applicants need to provide?

A15: CMS requires Applicants to include any sanctions, investigations, corrective action plans, probations, and/or outstanding Medicare debt within the last five years that involve the Applicant, potential Downstream EIs, and potential participating practitioners. Responses to this question on the application must address all required fields, capturing sufficient detail while maintaining the character limit.

Each sanction, investigation, probation, corrective action plan, or outstanding Medicare debt will need to be entered separately for each application the organization appears on. If none of these issues apply to your organization, its practitioners, and/or participating organizations, then be sure to mark the Not Applicable checkbox.

Q16: What should an Applicant do if they forgot their username and/or password for the Application Portal?

A16: The username for accessing the BPCI Advanced Application Portal is the email used to register, plus the extension “.bpciadv” (e.g., name@gmail.com.bpciadv). Applicants who encounter technical problems with accessing the Application Portal, should contact the help desk at CMMIForceSupport@cms.hhs.gov or call 1-888-734-6433 and select option 5. Applicants should not email the BPCI Advanced Team, as that will only delay action on the inquiry.

Q17: CMS excludes Critical Access Hospitals (CAHs) from participating in BPCI Advanced. If a Sole Community Hospital (SCH) with a Rural Referral Center designation owns a CAH that has a separate CMS Certification Number (CCN), can the SCH participate in BPCI Advanced?

A17: Yes. A SCH that owns a CAH with a separate CCN can participate in BPCI Advanced. CMS considers each hospital with a separate CCN separately.

Q18: Can PGPs not affiliated with a hospital apply? If so, can a small practice participate in BPCI Advanced?

A18: Yes. PGPs not affiliated with a hospital can apply to participate in BPCI Advanced as Non-Convener Participants or as Convener Participants. Small practices can also apply, as there is no restriction on practice size.

Q19: Are providers in the state of Maryland allowed to participate in BPCI Advanced?

A19: CMS previously stated that hospitals in Maryland could not participate in BPCI Advanced. Because Maryland is participating in a separate Centers for Medicare & Medicaid Innovation (CMS Innovation Center) model, the Maryland All-Payer Model, CMS excludes Maryland hospitals from bundled payment initiatives, including BPCI Advanced.

PGPs that only practice in Maryland are also not eligible to participate in BPCI Advanced. If the PGP practices in Maryland, as well as another state and/or the District of Columbia, it is eligible to participate in BPCI Advanced for care provided outside of Maryland.

Q20: Can an organization apply for only a handful of the Clinical Episodes, instead of the entire list of Clinical Episodes? Is it an “all-or-nothing” deal?

A20: Participants must commit to being held accountable for at least one Clinical Episode per EI on the Participant Profile. It is up to the Participant to determine how many and which Clinical Episodes they want CMS to hold them accountable for under BPCI Advanced. It is important to note that the Participant chooses Clinical Episodes for each EI separately.

All Participants will identify the Clinical Episodes for which CMS will hold the Participant accountable when they complete their Participant Profile. Convener Participants will additionally identify the list of the Convener Participant’s Downstream EIs. The Applicant will not select Clinical Episodes when submitting an application.

Q21: Will a PGP be able to select which individual physicians want to participate in BPCI Advanced, or will CMS include all the physicians under the TIN?

A21: In BPCI Advanced, CMS defines a PGP at the TIN level. Therefore, PGPs cannot select which individual physicians are able to participate in the Model. All physicians who have reassigned their rights to receive Medicare payment to the PGP’s TIN can participate, which means those physicians may trigger Clinical Episodes under BPCI Advanced.

Q22: How does a PGP EI providing services in multiple locations, including a hospital, participate in BPCI Advanced as one Convener Participant?

A22: A PGP and a hospital can participate under the same Convener Participant and participate in the same or different Clinical Episodes. However, CMS attributes a Clinical Episode to one EI. Precedence rules, including model overlap rules, dictate which EI CMS attributes to the Clinical Episode.

Q23: Can a hospital be a Convener Participant for some Medicare Severity-Diagnosis Related Groups (MS-DRGs) and be a Non-Convener Participant and EI for others?

A23: No. Clinical Episodes cannot be allocated under multiple Convener Participants or in combination as a Non-Convener Participant. An EI can only trigger episodes as either one Convener Participant or as a Non-Convener Participant.

Q24: Are preferred networks for SNFs and home health providers encouraged as long as beneficiaries are aware that they have a choice of any provider?

A24: Participants can create and/or recommend preferred PAC networks. However, a beneficiary's choice of provider cannot change. Therefore, Participants must notify beneficiaries of their participation in BPCI Advanced and require their Downstream EIs and Participating Practitioners to do the same.

Q25: Can Applicants see what the Target Price will be for their hospitals to determine if the prices work for them?

A25: Yes. To receive preliminary Target Prices, Applicants must complete the Data Request and Attestation Form section of the application.

Update June 2019

Q26: How can a current Non-Convener Participant become a Convener Participant starting MY3?

A26: Current Non-Convener Participants have two options for becoming Convener Participants starting MY3:

- **Option 1:** During the application submission period (April 24, 2019-June 24, 2019), they could submit an EI Addition Template in the Participant Portal that lists all of the potential EIs for their current BPID. This would result in all potential EIs being under one Participation Agreement. Under this option, the Participant would not be able to restructure so as to have its EIs under separate Participation Agreements following the submission of the EI Addition Template.
- **Option 2:** During the application submission period, they could submit a Convener Participant application(s) in the Application Portal that lists all of its potential EIs on the Participating Organizations attachment. The Application Portal gives Applicants and current Participants greater flexibility to apply in different ways and permutations. Therefore, Applicants/Participants can submit separate applications for each of its potential EIs or submit an application containing all potential EIs, or any combination thereof, based on how they would want to structure for MY3. Applicants and Participants should submit an application for each potential Participation Agreement they would like to have if selected for participation starting MY3.
- **Important Note:** Non-Convener Participants seeking to become Convener Participants must have at least one Downstream EI. A Non-Convener Participant cannot simply apply as a Convener Participant and only put itself on the Participating Organizations attachment or submit an EI Addition Template only listing itself. Doing so would not satisfy the definition of a Convener Participant.

Q27: How can a current Convener Participant become a Non-Convener Participant starting MY3?

A27: Current Convener Participants who are EIs, but no longer wish to have any Downstream EIs, have two options for becoming Non-Convener Participants starting MY3:

- **Option 1:** Submit an updated Participant Profile, due in November 2019, indicating only themselves as "Active" with at least one "Active" Clinical Episode, and withdraw all Downstream EIs and their corresponding Clinical Episodes. For this option, no action is required during the application submission period. However, other Model timeline milestones are applicable, including but not limited to execution of a Participation Agreement for participation starting MY3, and submission of Q1 2020 Model deliverables.
- **Option 2:** During the application submission period, submit a Non-Convener Participant application in the Application Portal. When Participation Agreements and Participant Profiles are due in November 2019, the Participant should not execute a Participation Agreement for their existing Convener Participant BPID (for Model Years 1 and 2), and they must submit a Participant Profile withdrawing all EIs (including themselves) and Clinical Episodes. For their new Non-Convener Participant BPID (for MY3), the Participant must execute a Participation Agreement for participation starting MY3 and submit their Participant Profile indicating themselves as an "Active" EI and have at least one "Active" Clinical Episode.

Q28: How can a current Downstream EI become a Convener or Non-Convener Participant starting MY3?

A28: Current Downstream EIs only have one option if they wish to switch roles starting MY3. During the application submission period, the Downstream EI must submit either a Convener or Non-Convener Participant application in the Application Portal. If selected for participation, the Downstream EI will need to ensure their existing Convener Participant (for Model Years 1 and 2) withdraws them as a Downstream EI and all their Clinical Episodes on the Participant Profile due in November 2019.

Q29: How can a current Participant become a Downstream EI for MY3?

A29: Current Convener Participants who themselves are EIs, and no longer wish to have any Downstream EIs, and Non-Convener Participants, only have one option in order to switch roles starting MY3. The Participant must submit an updated Participant Profile, due in November 2019, withdrawing all EIs (including themselves) and Clinical Episodes and not execute a Participation Agreement for participation starting MY3. During the application submission period, the Convener Participant applicant for MY3 must submit either an application listing the Participant on the Participating Organization's attachment in the Application Portal or submit an EI Addition Template listing the Participant in the Participant Portal.

Q30: How can a Downstream EI switch Convener Participants for MY3?

A30: If a Downstream EI would like to switch Convener Participants for MY3, during the application submission period, the new Convener Participant (for MY3) would need to submit either an application listing the Downstream EI on the Participating Organization's attachment in the

Application Portal or an EI Addition Template listing the Downstream EI in the Participant Portal. When Participant Profiles are due in November 2019, the existing Convener Participant (for Model Years 1 and 2) would need to select "withdraw" for the Downstream EI and all their corresponding Clinical Episodes. The new Convener Participant (for MY3) would have to submit their Participant Profile, ensuring to select "Active" for the Downstream EI and "Active" for at least one Clinical Episode.

Q31: Can a Downstream EI withdraw from their current Convener Participant, prior to the end of Model Year 2 (12/31/2019)?

A31: CMS is not privy to the agreement a Participant has with its Downstream EIs. However, a Participant shall not take steps to prohibit Downstream EIs that have formerly participated in BPCI Advanced pursuant to an agreement with the Participant from rejoining BPCI Advanced as a Downstream EI for another Convener Participant or as a Convener Participant or Non-Convener Participant itself. If a Downstream EI withdraws from its agreement with its Convener Participant prior to December 31st, 2019, then the Convener Participant will still be held accountable for that Downstream EI's Clinical Episodes for the remainder of Model Year 2, unless the Convener Participant provides 90-Days advance written notice to CMS to terminate its Participation Agreement with CMS. Further, the Downstream EI may take the steps discussed previously in order to participate under a different Convener Participant or apply to be a Participant itself.

Q32: If I am a current participant in BPCI Advanced and do not want to make any changes to my EIs and Clinical Episodes, is there any action I have to take before June 24, 2019? Will I still receive new baseline data for all Clinical Episodes and preliminary Target Prices for MY3?

A32: Current Participants that would like to continue participating as is for MY3 do not need to take any action by June 24, 2019. These current Participants will still receive:

- Baseline claims data from October 1, 2015 through September 30, 2018; and
- Preliminary Target Prices for all episodes where there was sufficient volume of data in the baseline period

However, these Participants will be required to submit an Amended and Restated Participation Agreement for MY3 and Participant Profile in November 2019 and other Model deliverables for Q1 2020 in December 2019. Current Participants that remain that do not submit an Amended and Restated Participation Agreement for MY3 and the necessary Model deliverables for Q1 2020 will not be able to trigger Clinical Episodes after December 31, 2019.

Q33: We are new to BPCI Advanced and are unsure if we want to apply as a Convener Participant or as a Non-Convener Participant. Do we have the ability to submit both types of applications?

A33: Yes, an Applicant can submit both a Convener Participant application and a Non-Convener Participant Application. In order to submit a Convener Participant application, the applicant will need to list at least one Downstream EI on the Participating Organizations attachment. In order to submit a Non-Convener application, the applicant will need to be either an ACH or a PGP, and will not have any Downstream EIs.

Q34: We were in BPCI Advanced but dropped out of all our Clinical Episodes. Do we have to complete a whole new application to gain access to data for future evaluation?

A34: Yes. Participants who fully terminated their BPCI Advanced participation will be required to submit a new BPCI Advanced application by June 24, 2019 in the Application Portal in order to receive baseline data and preliminary Target Prices in September 2019.

Q35: We are a PGP that recently applied for a new Tax Identification Number. Can we submit an application even if all our providers have not started billing under the new TIN?

A35: Yes, you can submit an application with your new Tax Identification Number (TIN) even if all the providers have not reassigned their rights to receive Medicare payments to the new TIN. At the time of signing the Participation Agreement, you will need to comply with all the conditions and requirements of the agreement.

Since your new TIN will not have any historical claims data during the baseline period, it is imperative that you submit the Participating Organizations attachment in the application portal in order to receive preliminary Target Prices. Specifically, you will need to list all the hospital CMS Certification Numbers (CCNs) where the new PGP's TIN may trigger Clinical Episodes.

Q36: As a PGP, are we able to choose the hospitals that we participate with or do we have to participate with all hospitals within our practice area? How does a PGP limit the hospital(s) with which it wants to participate on the application?

A36: A PGP does not need to participate with all hospitals within its practice area. However, as part of the application it will need to provide hospital CMS Certification Numbers (CCNs) for all of those hospitals where the practice may trigger a Clinical Episode. For example, if the PGP only provides two hospital CCNs but, during the performance period, the practice triggers Clinical Episodes at six hospitals, then the practice would be held accountable for all Clinical Episodes triggered at all six hospitals, regardless of how many CCNs they provided to CMS in the application.

Q37: Is there is a required length for the free text questions on the application?

A37: No, there is no required length. CMS would like Applicants to answer questions to the best of their ability, ensuring responses are complete, and remain within the 4,000 character limit (approximately 500 words). It is not necessary to use all 4,000 characters. We recommend organizations visit the Application Resources page to access templates and other materials to prepare and organize responses needed to complete the application in the Application Portal.

Q38: If I start an application, can I have one of my colleagues finish and submit the application?

A38: No. In the Application Portal, if one user starts an application, only that same user will have the ability to finish and submit the application. Likewise, a user can only clone submitted applications that they submit, as they will not have the ability to clone another user's submitted application.

Q39: Who can sign the BPCI Advanced Application?

A39: The BPCI Advanced application requires a signature prior to application submission. The user filling out the application will be prompted on the last page to mark a checkbox certifying that the information and statements in the application are true, complete, and accurate and also that the authorized signatory is qualified and acting as an agent of the application. On the same page,

applicants will be required to input the authorized signatory's first and last name, which may or may not be the user filling out the application. The user will have to mark the checkbox and then enter the signatory's first and last name before the submit application button will appear.

Q40: We applied to BPCI Advanced during the first application period and plan to apply again during this application period. Can you let us know what questions have changed between the previous application and the current one?

A40: The BPCI Advanced team made some changes to the application for MY3, most notably reducing the number of application attachments and incorporating the DRA into application. We also removed some questions to decrease administrative burden and added logic to the Participating Organizations attachment upload to ensure we received cleaner data.

There are two changes that we would like applicants to know but are not reflected in the application portal. The first is the change in the percentage of eligible clinicians in an entity that must use Certified Electronic Health Record Technology (or CEHRT). For non-hospital Participants, the 50 percent requirement has been updated to 75 percent per the 2019 Quality Payment Program rule. For the attestation response to the first application question, you must meet the current eligible clinician requirement of 75 percent. Likewise, for Question 6 in the Quality Improvement Section of the Application, your response should reference, the current eligible clinician requirement of 75 percent.

The second change is our policy on the 50 percent NPRA Sharing cap. In your response to question 3 in the NPRA Sharing section of the application, you will not need to address how you will ensure NPRA Sharing Payments do not exceed 50 percent of the amount normally paid by Medicare.

Q41: The application information for existing participants states, "A current Participant cannot submit both an EI Addition Template and an EI Restructure Template under the same BPID." Does this statement refer to the parent BPID of the Convener or the Downstream EI BPID?

A41: This statement refers to the parent BPID, which is the current Participant itself. A current Participant cannot submit an EI Addition Template to add EIs to its current Participation Agreement and then submit an EI Restructure Template to break apart each EI into separate agreements.

If a current Participant wants to add new EIs as single Downstream EIs under separate Participation Agreements, then the current Participant must submit an application in the Application Portal for each potential Participation Agreement that they would like to have.

Submission of an EI Restructure Template is limited to current Convener Participants with more than one Downstream EI. Therefore, only Convener Participants eligible to submit an EI Restructure Template will have that template for download/upload in the Participant Portal.

Q42: As a current Participant, do I need to sign a new DRA form if I'm restructuring or adding EIs?

A42: There are two types of Data Request and Attestation (DRA) forms. One is an Applicant DRA and the other one is a Participant DRA. In order to receive baseline data and preliminary Target Prices, CMS needs to have a completed and signed Applicant DRA on file.

Current Participants submitting either an EI Addition Template or an EI Restructure Template do not have to submit an Applicant DRA for MY3 because CMS already has one on file from the first application period in 2018.

In late 2019, we will release the Participant DRA that all new Applicants and current Participants who submitted an EI Restructure Template will need to submit a new Participant DRA for MY3. Current Participants who wish to continue participating as is or who have submitted an EI Addition Template will not be required to submit a Participant DRA for MY3.

Q43: Are there any attachments to the application?

A43: Yes. The BPCI Advanced Application for MY3 has one attachment, the Participating Organizations Attachment. Applicants will download the attachment from the Application Portal, then complete and upload into the Application Portal. Convener Applicants and Non-Convener Applicants who are PGP's will be required to submit this attachment.

Q44: On the Participating Organizations attachment and EI Addition Template there are fields for a physician first name, last name, and National Provider Identifier (NPI). Do we need to list all the physicians in the PGP EI or just one physician?

A44: On both the Participating Organizations attachment and EI Addition Template, we are only asking new Applicants and current Participants to list one physician for the potential PGP EI. This means that each EI in the Participating Organizations attachment or EI Addition Template should only be listed once.

Q45: How do I know if CMS has received my application?

A45: Upon successfully submitting your application in the Application Portal, you will receive an email notification. The message will come from the BPCI Advanced Inbox and include the date and time your application was received along with your application ID. If you have any questions about a submitted application, please email the BPCI Advanced Inbox (BPCIAdvanced@cms.hhs.gov).

Q46: I submitted an application and realized I need to change my response for a question. How do I edit a submitted application?

A46: Applications with a status of "Submitted" in the Application Portal cannot be edited. If you realize you made an error on your submitted application, we recommend using the "clone" feature to clone the submitted application. You will then have the opportunity to edit any response on the "cloned" application before submitting it. Once you have submitted the "cloned" application, you can email the BPCI Advanced inbox your notification to withdrawal your original application submission. Be sure to reference the correct Application ID that wish to withdrawal. Please refer to page 10 of the Request for Application (RFA) on how to withdraw a submitted application.

Q47: Will I be able to access the BPCI Advanced Application Portal after the application window closes?

A47: After the Application Window closes, Applicants will still be able to log into the Application Portal and view both submitted and non-submitted applications. However, you will not be able to amend submitted applications or submit applications still in progress. Applicants will also have the ability to download submitted applications and DRAs for their records.

Q48: During the 2018 application cycle, applicants received historical claims data from 2014 to 2016. What is the year range for the historical data provided in this application cycle?

A48: Baseline data will be provided to both new Applicants and current Participants. The 4-year baseline period used to calculate preliminary Target Prices for MY3 is October 1, 2014 to September 30, 2018.

Due to data restrictions, CMS can only provide new Applicants and current Participants three years' worth of data. Therefore, new Applicants and current Participants will receive baseline data for the period of October 1, 2015 to September 30, 2018.

Applicants that do not complete the DRA section of the application will not be eligible to receive baseline data or preliminary Target Prices.

Q49: My organization plans to participate as a Downstream EI under a Convener Participant in MY3 (2020). Would we be able to leave that Convener Participant and start participating as a Non-Convener Participant on our own in Model Year 4 (2021)?

A49: No. In order to switch roles from a Downstream EI to a Convener Participant or Non-Convener Participant, the Downstream EI must submit a new application to participate in BPCI Advanced. CMS does not plan on having another application period after the MY3 application window closes on June 24, 2019.

Q50: Will active Participants in MY3 be able to add or drop EIs or Clinical Episodes in future model years?

A50: Active Participants during MY3 will not be able to add new EIs in future model years. However, they will be able to drop EIs, and add/drop Clinical Episodes through the Participant Profile process for Model Year 4, which starts January 1, 2021.

BPCI Advanced is a voluntary model, so Participants can fully terminate participation at any time with 90 days advance written notice.