



Health Information Technology (Health IT) Vendor Global Letters of Support for Track 2 of the Comprehensive Primary Care Plus (CPC+) Model

12/12/2016

Important Notice for Practices:

Please note that the Health IT Vendor Global Letters of Support in this document include all Health IT vendors who voluntarily submitted a global letter to CMS. CMS does not endorse any Health IT vendors, nor does inclusion in this document guarantee that a specific Health IT vendor's products will meet the CPC+ health IT requirements. Practices should reach out to the vendor directly to learn more about their product.



3PHealth.

Global Vendor Letter of Support for CPC+

August 23, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

5o9, Inc. (dba 3PHealth) is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	No
Produce and display eCQM results at the practice level to support continuous feedback	No
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	No
Document and track patient reported outcomes	No
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

A handwritten signature in purple ink that reads "Elizabeth A. Coker". The signature is fluid and cursive, with the first name being the most prominent.

Elizabeth Coker
COO, 3PHealth

509, Inc. PO Box 19439 Boulder, CO 80308 303 938-1769

Global Vendor Letter of Support for CPC+

Date: August 22nd, 2016

Center for Medicare and Medicaid Services
 7500 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Accordion Health, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	-

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: **Accordion Health, Inc.**

Vendor Representative: **Sriram Vishwanath, CEO**

Signature: _____



Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Acupera is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support clinical practices participating in the model to meet one or more of the following health information technology (Health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

Acupera will contract with practices to provide access to our unique population health management functionality for population health. This includes our proprietary risk stratification engine, transitions in care module, chronic care module, embedded chronic care and socio-behavioral pathways and reporting engine.

We further affirm our intention to participate in the following activities over the course of the Model.

- Partner with practices to support the practice in meeting the care delivery objectives for using health IT to delivery comprehensive primary care
- Provide CMS with a contact focused on CPC+ practice needs, a senior clinical expert on coordinated care and population health management and an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If any practices interested in working with Acupera or any of our existing customers are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely

Hans C. Kastensmith

Hans C. Kastensmith
President & COO

Global Vendor Letter of Support for CPC+

Date: August 16, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Amazing Charts is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

The features noted below as Supported are planned for Development, scheduled to be completed before the January 1, 2019 deadline.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	No* (See Below)
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	No

*Practices may utilize the service of ABFM's PRIME Registry to satisfy the CPC+ eCQM reporting requirements. Additional information may be found at:

<https://www.theabfm.org/primeregistry/primeregistry.aspx>

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Amazing Charts

Vendor Representative: Chris Conrad

Signature: *Chris Conrad*



August 8, 2016
 Center for Medicare and Medicaid Services
 7500 Security Boulevard
 Baltimore, MD 21244
 Center for Medicare and Medicaid Services:

Aprima Medical Software, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

Sincerely,

Cornell Hardman

Cornell Hardman
 EHR Product Manager

Global Vendor Letter of Support for CPC+

August 29, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Aver Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	No
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

A handwritten signature in blue ink, appearing to read "Nick Augustinos".

Nick Augustinos
President & CEO

Vendor Name: Aver, Inc.
Vendor Representative: Brad Coutts
(brad.coutts@aver.io)

June 22, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Caravan Health is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Caravan Health

Vendor Representative: Susan Deitz

Signature: Digitally signed by Susan Deitz
DN: cn=Susan Deitz, o, ou, email=suefox@sandpoint.net, c=US
Date: 2016.06.22 17:44:37 -0700



Global Vendor Letter of Support for CPC+

September 14, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

CareCloud is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

CareCloud can support for participating practices for the following items:

- Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"
- Produce and display eCQM results at the practice level to support continuous feedback
- Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs
- Document and track patient reported outcomes
- Empanel patients to the practice site care team
- Establish a patient focused care plan to guide care management
- Optional: CPC+ practice site care delivery and documentation of the care touch documentation

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center)
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: CareCloud
Vendor Representative: Laurie Hart
Signature: Laurie Hart



2800 Rockcreek Parkway
Kansas City, MO 64117
816.201.1024 ^{Tel}
816.474.1742 ^{Fax}

June 21, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Cerner Corporation is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (Health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

Cerner Corporation will provide participating providers guidance on the licensing necessary to have access to the supported functionality. This includes certified EHR technology (CEHRT) 2015 edition products, certified Health IT (CHIT) 2015 edition products and additional non-certified Health IT solutions. Track 2 practices are encouraged to work directly with Cerner Corporation to review their existing agreements to determine what additional solution licenses may be required to meet each of the supported Health IT Functionality they are looking for Cerner to support.

We further affirm our intention to participate in the following activities over the course of the Model.

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.



2800 Rockcreek Parkway
Kansas City, MO 64117
816.201.1024 ^{Tel}
816.474.1742 ^{Fax}

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to delivery comprehensive primary care, and ensure timely license availability of products. A list of required licenses will be made available to practices for review.
 - Support availability of certified EHR technology (CEHRT) 2015 edition products required by the Medicare EHR Incentive program 42 CFR 495.4 prior to January 1, 2018.
 - Support availability of certified health IT (CHIT) 2015 edition products for criteria 45 CFR 170.315(c)(1)-(3) to support of all electronic clinical quality measures prior to January 1, 2017 and 45 CFR 170.315(c)(4) which allows filtering of data by at least practice site address and TIN/NPI prior to January 1, 2018.
 - Support availability of certified health IT (CHIT) 2015 edition products for criteria 45 CFR 170.315(a)(15) capturing social, behavioral and psychological data and 45 CFR 170.315(b)(9) support of the Care Plan prior to January 1, 2019.
 - Support additional non-certified health IT solutions outlined as “Supported” in the Health IT Functionality list above prior to January 1, 2019.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

Clients are encouraged to submit questions to Cerner’s CPC+ program at CPCPLUS@cerner.com. This inbox is managed by Alissa Walters, Director, Client Experience, 816-201-3442.

Sincerely,

A handwritten signature in black ink that reads 'Kim Hlobik'.

Kim Hlobik
Vice President, Cerner Ambulatory

Global Vendor Letter of Support for CPC+

Date: August 30, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Chartlogic is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	No/TBD

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with **1)** a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: **Chartlogic**

Vendor Representative: **Chris Langehaug, Senior Vice President, Operations**

Signature:

A handwritten signature in black ink, appearing to read 'Chris Langehaug', is written over a horizontal line. The signature is fluid and cursive, with a long horizontal stroke at the end.

Global Vendor Letter of Support for CPC+

Date: September 7, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Chronic Care Management, LLC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes, our platform supports all 6 domains, reported via a practice’s certified EHR
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

Innovation (CMS Innovation Center).

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Chronic Care Management, LLC

Vendor Representative: William Mills, MD

Signature: William Mills

Global Vendor Letter of Support for CPC+

Date: 7/7/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Citra Health Solutions is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delis cry and documentation of the care touch documentation ¹	

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Citra Health Solutions

Vendor Representative: Lauren Dean

Signature: 

Global Vendor Letter of Support for CPC+

Date: September 12, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Clinigence is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes*
Document and track patient reported outcomes	Yes*
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes*

* Clinigence plans to support this functionality only as needed to complement the capabilities of the practice's certified EHR system.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

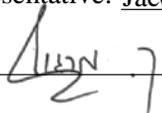
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Clinigence, LLC

Vendor Representative: Jacob Margolin

Signature:  _____

Global Vendor Letter of Support for CPC+

Date: 7/11/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

CMS Gateways, LLC DBA CPCplustools.com is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	No/TBD

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: CMS GATEWAYS, LLC DBA 10CPCPLUSTOOLS.COM

Vendor Representative: NICK BOOTH

Signature: 

Global Vendor Letter of Support for CPC+

Date: August 15, 2016

Center for Medicare and
 Medicaid Services 7500
 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Cozeva is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Cozeva www.Cozeva.com

Vendor Representative: Jordan Michael Hall, VP

Signature:  _____

Global Vendor Letter of Support for CPC+

Date: August 8, 2016

To:
Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

DigiDMS, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

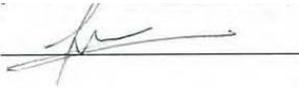
If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: DigiDMS, Inc.

Vendor Representative: Tushar Desai (C.T.O)

Signature: _____

A handwritten signature in black ink, appearing to read 'Tushar Desai', is written over a horizontal line. The signature is fluid and cursive.

Global Vendor Letter of Support for CPC+

August 11, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Elation Health is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	To be determined

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center)
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Elation Health

Vendor Representative: Kyna Fong

Signature: _____

A handwritten signature in blue ink, appearing to be 'Kyna Fong', written over a horizontal line.



e-MDs Global Vendor Letter of Support for CPC+

Date: Friday, August 12, 2016

Center for Medicare and Medicaid Services 7500
Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services (CMS):

e-MDs is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support our customers’ clinical practices participating in the model to meet one or more of the following health information technology (health IT) identified listed below that are required for Track 2 participation. We are committed to working with CMS to ensure our customers’ success.

We are dedicated to either directly supply the Health IT Functionality below or offer customers a path to successfully navigate it via vendor partners, complying with the January 1, 2019 deadline:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population ; identify and flag “Patient with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patient’s psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	To be determined

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If e-MDs clinical practice customers are selected to participate in Track 2 and sign the CPC+ Participation Agreement with CMS, our signature on the Memorandum of Understanding with CMS will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: e-MDs

Email contact: cpcplus@emds.com

CPC + Contact: Pamela Chapman

Signature: *Pamela Chapman*



Health Intelligence

503.858.6040

www.enli.net

1920 NW Amberglen Pkwy, Suite 200
Beaverton, OR 97006 United States

Global Vendor Letter of Support for CPC+

Date: 10 August 2016

Center for Medicare and Medicaid
Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Enli Health Intelligence is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	YES
Produce and display eCQM results at the practice level to support continuous feedback	YES
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	YES
Document and track patient reported outcomes	YES
Empanel patients to the practice site care team	YES
Establish a patient focused care plan to guide care management	YES
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	YES

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Enli Health Intelligence
1920 NW Amberglen Pkwy., STE. 200
Beaverton, OR 97006

Vendor Representative: Joseph Siemienczuk, MD
Chief Medical Officer
jsiemienczuk@enli.net

A rectangular box containing a handwritten signature in blue ink. The signature is cursive and appears to read 'Joseph Siemienczuk, MD'.

Signature: _____

Global Vendor Letter of Support for CPC+

Date: July 6, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

eQHealth Solutions is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag “Patients with Complex Needs”	YES
Produce and display eCQM results at the practice level to support continuous feedback	YES
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	YES
Document and track patient reported outcomes	YES
Empanel patients to the practice site care team	YES
Establish a patient focused care plan to guide care management	YES
Optional: CPC+ practice site care delis cry and documentation of the care touch documentation ¹	YES

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: eQHealth Solutions

Vendor Representative: Mayur Yermaneni

Signature: _____





August 19, 2016

Center for Medicare and
Medicaid Services 7500
Security Boulevard
Baltimore, MD 21244

Center for Medicare and
Medicaid Services:

eTransX is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

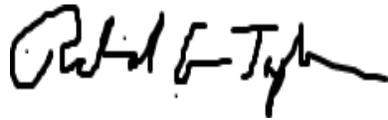
This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

A handwritten signature in black ink, appearing to read "Richard Taylor". The signature is stylized and cursive, with a long horizontal stroke at the end.

Richard Taylor

Director of Business Development

eTransX, Inc.



Global Vendor Letter of Support for CPC+

Date: September 9, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Evolent Health LLC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet all of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality Supported:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.

- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Evolut Health LLC

Vendor Representative: Lisa Shah, MD – SVP of Practice Optimization

Signature:

A handwritten signature in black ink that reads "Lisa M. Shah". The signature is written in a cursive style and is enclosed within a rectangular box that has a soft, grey drop shadow.



Global Vendor Letter of Support for CPC+

Date: 26 August 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

FIGmd is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model. We are committed to working with CMS to ensure our customers' success.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices by January 1, 2019. FIGmd intends to directly supply all of the Health IT Functionality mentioned below or offer a path to practices to successfully comply with requirements via vendor partners.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQOM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.



We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, FIGmd intends to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: FIGmd, Inc. (<http://www.figmd.com/>)

Vendor Representative: Mr. Sanket Baralay, President and CEO

Signature:

A handwritten signature in black ink that reads "Sanket Baralay". The signature is written in a cursive style with a large initial "S".

Participating Practices are encouraged to submit queries and their interests at cpcp@figmd.com. This Inbox is managed by CPC+ experts at FIGmd.



Global Vendor Letter of Support for CPC+

Date: September 13, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Forward Health Group, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes

Health IT Functionality	Supported (Yes/No)
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

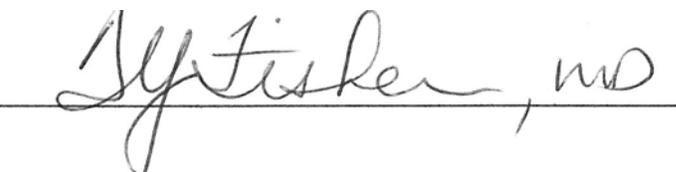
We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Vendor Name: Forward Health Group, Inc.

Vendor Representative: Dorothy Fisher, Chief Clinical Officer, MD, MGH

Signature: 

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

Global Vendor Letter of Support for CPC+: GE Healthcare IT

Date: July 15, 2016
Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

GE Healthcare IT is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019 using the most current versions of Centricity Practice Solution and Centricity EMR or successor products.

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delis cry and documentation of the care touch documentation ¹	To be determined

We further affirm our intention to participate in the following activities over the course of the model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: GE Healthcare IT

Vendor Representative: Chad Dodd, General Manager, Ambulatory Practice Solutions

Signature:  _____



Date: 8/15/2016

Center for Medicare and Medicaid Services

7500 Security Boulevard

Baltimore, MD 21244

Center for Medicare and Medicaid Services:

HC360 Technologies, LLC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

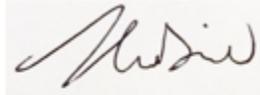
- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: HC360 Technologies, LLC

Vendor Representative: Thanh "Tino" Dinh, tdinh@hc360technologies.com, m: 202-294-8580

A handwritten signature in black ink, appearing to read "Tino", is centered on a light gray rectangular background.

Vendor Signature: _____

Global Vendor Letter of Support for CPC+

Date: July 26, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

The Health Collaborative is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	YES
Produce and display eQIM results at the practice level to support continuous feedback	YES
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	NO
Document and track patient reported outcomes	NO
Empanel patients to the practice site care team	YES
Establish a patient focused care plan to guide care management	YES
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	NO

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: The Health Collaborative

Vendor Representative: Jason Buckner

Signature: 

Global Vendor Letter of Support for CPC+

Date: August 6, 2016

Center for Medicare and Medicaid
Services 7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

HealthEC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an

executive contact to manage the relationship with CMS.

- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: HealthEC

Vendor Representative: Dr. Sanjay Seth, Executive Vice President, Population Health Solutions

Signature: _____

Sanjay Seth

Date: _____

8.6.16

Global Vendor Letter of Support for CPC+

Date: 08/30/2016

Center for Medicare and Medicaid Services
 7500 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Health Endeavors is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch	Yes

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Health Endeavors

Vendor Representative: Kris Gates

Signature: 

Date: August 18, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Inxite Health Systems is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model. This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation that meets “Care Plan” criterion found at 45 CFR 170.315(b)(9) as well as “Social, Behavioral and Psychological Data” criterion found at 45 CFR 170.315(a)(15)	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

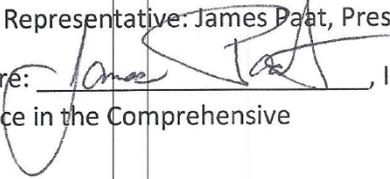
- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Inxite Health Systems

Vendor Representative: James Paat, President and CEO

Signature:  Inxite Health Systems, which is applying to participate as a Track 2 practice in the Comprehensive

Global Vendor Letter of Support for CPC+

Date: 8/4/2016

Center for Medicare and Medicaid
 Services 7500 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Lightbeam Health Solutions, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	<u>Yes</u>
Produce and display eCQM results at the practice level to support continuous feedback	<u>Yes</u>
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	<u>Yes</u>
Document and track patient reported outcomes	<u>Yes</u>
Empanel patients to the practice site care team	<u>Yes</u>
Establish a patient focused care plan to guide care management	<u>Yes</u>
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	<u>Yes</u>

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Lightbeam Health Solutions, Inc.

Vendor Representative: Paul Bergeson, SVP Sales & Marketing

Signature: 



Global Vendor Letter of Support for CPC+

Date: 8/1/2016

Center for Medicare and Medicaid Services
 7500 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

MDDOIT LLC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	YES
Produce and display eCQM results at the practice level to support continuous feedback	YES
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	YES
Document and track patient reported outcomes	YES
Empanel patients to the practice site care team	YES
Establish a patient focused care plan to guide care management	YES
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	YES

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Interested providers and practices should contact MDDOIT LLC's managing director with any inquiries: Robert E. Hillegass, info@mddoit.com, 732-595-9433

Sincerely,

Vendor Name: MDDOIT LLC

Vendor Representative: Robert E. Hillegass

Signature:|



Global Vendor Letter of Support for CPC+

Date: July 25, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

MD Revolution is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delis cry and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: MD Revolution

Vendor Representative: Steven Lash

Contact: steven@mdrevolution.com

Signature: *Steven Lash*

Global Vendor Letter of Support for CPC+

Date: 6/23/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

MEDENT is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delis cry and documentation of the care touch documentation ¹	No

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: MEDENT

Vendor Representative: Bridget M. Gary

Signature: A handwritten signature in black ink that reads "Bridget M. Gary". The signature is written in a cursive style and is positioned to the right of the printed word "Signature:".

Global Vendor Letter of Support for CPC+

Date: 09/12/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Meditab Software Inc., is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional" CPC+ practice site care delivery and documentation of the care touch documentation	Yes

We further affirm our intention to participate on the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Meditab Software Inc.,

Vendor Representative: Paragi Patel
Signature: 



Date: September 14, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Medocity, Inc. (Medocity) is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identity and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

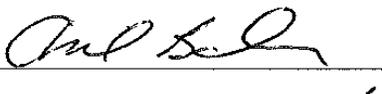
If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

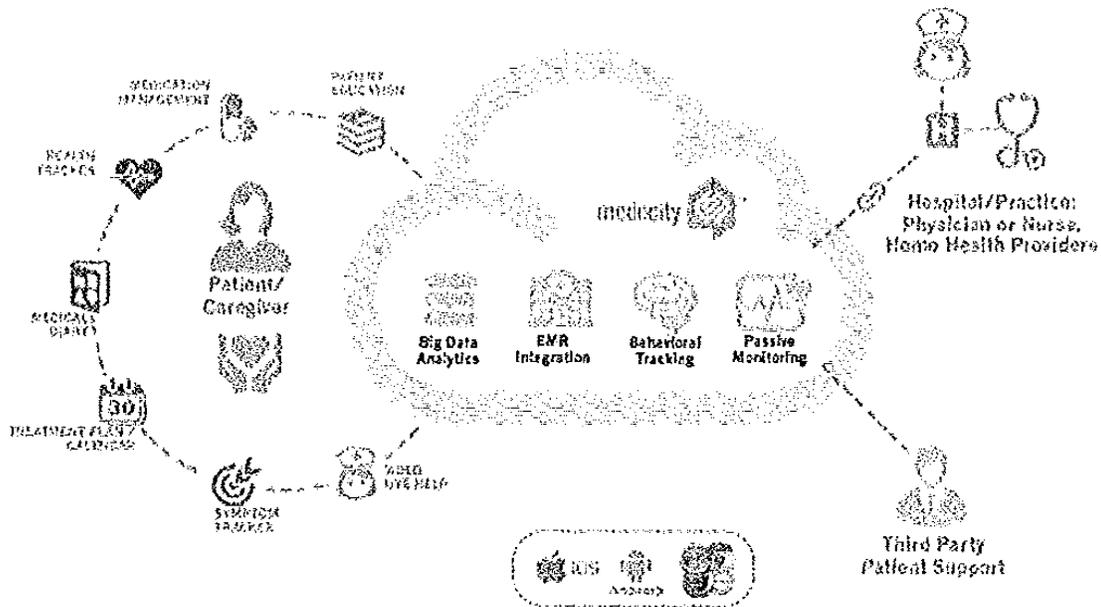
Sincerely,

Vendor Name: Medocity, Inc.

Vendor Representative: Anil Balani- Chief Technology Officer (CTO)

Contact info: abalani@medocity.com or 973-679-8242 (o), 917-373-9852 (c)

Signature: 



Medocity's Care Platform includes the following features shown below.

- Patient and Family Caregiver Engagement:** Medocity's platform provides the ability for patient and caregiver to actively engage with their provider with secure messaging. The caregiver is able to track the progress of the patient progress on care plan goals, medication adherence and review charts that track symptoms and side effects.
- Comprehensive and Coordination:** Medocity Platform's educational resource capability provides the ability to view key information regarding the social service needs available including transportation & food, advocacy groups, financial support, clinical trials, and other medical and non-medical related information. In addition, Medocity's social community module provides access for peer support and guidance.
- Patient Reported Outcome Measures (PROMs):** Medocity platform supports the ability to measure patient reported outcomes to track experience, identify gaps in care and focus on quality improvement activities. Information is collected directly from Medocity's Health Tracker feature or through customized surveys available via the Care Plan or Resource section. The Clinician and Group (CG) CAHPS survey can be administered via the Medocity platform to capture the patient's experience of care.
- Care Plan Management:** Medocity platform provides the ability to administer care plans customized for the patient and deliver electronically to the patient and caregiver. Tracking towards goals and tasks with due dates is provided via the platform with ability for caregivers and providers to view the progress at any time.
- 24x7 Access:** Medocity provides the ability for patient's, providers and caregivers to access patient information in real-time via web or mobile device.

About Medocity

Medocity is a leading company that provides virtual patient care management support and care coordination in order to bridge the gap between the clinic and home. The company uniquely combines the following service offerings into one comprehensive suite of cloud-based, SaaS model, enterprise-level mobile and web-based solutions:

- Proactive management of chronic conditions
- Interactive care

- coordination
- Patient-centered engagement and support
- Seamless tele-visits and secure communications (ONC Certified)
- Remote patient monitoring for early interventions
- Clinical rules-based alerts and notifications

Medocity Value Proposition

Medocity's target markets include healthcare stakeholder segments in 1) Cancer care, 2) Highly prevalent chronic conditions (COPD, CHF, RA, CKD, Diabetes), 3) Home Health, and 4) Senior Living. The company's platform and solutions generate significant cost savings opportunities, quality improvement and revenue driving potential:

- **Cost Management:** Reduces adverse events (readmissions, complications, emergency room visits) and associated avoidable healthcare costs and improves operational efficiencies.
- **Quality Improvement:** Promotes greater patient adherence to medication regimens and treatment/care plans while in the home setting. Positively impacts patient experience quality scores (Improved satisfaction and access to care providers).
- **Revenue / Margin:** Increases reimbursement opportunities and new patient referrals by supporting value based contracting, requirements and outcomes measures.

By design, the company's end-user products and clinical algorithms are modularly architected and readily configurable to meet the specific, nuanced needs of Providers (Hospitals, ACOs, Group Practices), Payers (Employers, Health Plans, Government), Home Health Agencies, and Senior Living Facilities (CCRCs).

The Medocity platform is a unique, comprehensive Connected Health ecosystem enabling clinically driven, patient-centric care management.

- Ability to simultaneously manage multiple diseases and abnormalities (fully integrated and coordinated care plan management)
- Early detection and real-time alerts (Intelligent rules engine and customizable protocols) Highly versatile, configurable and scalable technology
- Proprietary embedded communications (secure video, voice and messaging)
- Multi-channel access with real time sync across iOS, Android and Web
- Highly intuitive design of all customer interfaces (patient, care provider, administrator)

Global Vendor Letter of Support for CPC+

Date:

Center for Medicare and Medicaid Services
7500 Security Boulevard Baltimore,
MD 21244

Center for Medicare and Medicaid Services:

Henry Schein Medical Systems - MicroMD is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

CPC+ functions that we intent to support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Henry Schein Medical Systems, Inc. – MicroMD

Vendor Representative: Heather Ansell, General Manager

Signature: Heather Ansell
Digitally signed by Heather Ansell
DN: cn=Heather Ansell, o=HSMS, ou,
email=heather.ansell@henryschein.com,
c=US
Date: 2016.09.01 08:57:26 -05'00'

Global Vendor Letter of Support for CPC+

Date: 7/15/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Microwize Technology, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag “Patients with Complex Needs”	YES
Produce and display eCQM results at the practice level to support continuous feedback	YES
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	YES
Document and track patient reported outcomes	YES
Empanel patients to the practice site care team	YES
Establish a patient focused care plan to guide care management	YES
Optional: CPC+ practice site care delis cry and documentation of the care touch documentation ¹	-

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

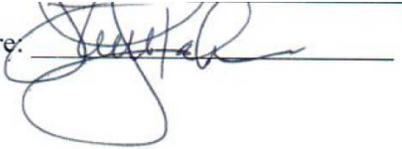
If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Microwize Technology, Inc.

Vendor Representative: Steve Baker

Signature: _____

A handwritten signature in blue ink, appearing to read "Steve Baker", is written over a horizontal line. The signature is stylized and includes a large loop at the end.



Providing solutions....not just software

September 8, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

ModuleMD is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intent to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Trace 2 practices in the Request for Application by January 1, 2019.

Please check all CPC+ functions that you can support for participating practices:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag “Patients with Complex Needs”	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	No

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of

the Model:

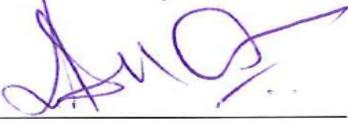
- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contract focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: ModuleMD

Vendor Representative: Lloyd Williams

Signature:  _____

ModuleM D LLC.



8359 Office Park Dr, Grand Blanc, MI 48439



248-434-0444



www.modulemd.com



Global Vendor Letter of Support for CPC+

July 1, 2016

Center for Medicare and Medicaid Services
 7500 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

MyHealth Access Network (MyHealth) is a non-profit health information exchange organization in Oklahoma with more than 400 participating organizations, including dozens of hospitals, pharmacies, long term care facilities and thousands of providers. MyHealth is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support MyHealth member practices in good standing who participate in the model to meet the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients"	Yes
Produce and display eCQM results at the practice level to support	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes, MyHealth is the bridging organization for Oklahoma's Accountable Health Communities program and accepts needs assessments from all CEHRT's and maintains an inventory of resources to address these needs.
Document and track patient reported outcomes	Yes, MyHealth enables storage and transmission of PRO's and awaits CMMI's guidance about which specific PRO's and instruments are to be used.

Health IT Functionality	Supported (Yes/No)
Empanel patients to the practice site care team	Yes, MyHealth provides PCP attribution logic at the individual provider level and accepts attribution logic from participating payers as well.
Establish a patient focused care plan to guide care management	Yes, MyHealth accepts patient-focused care plans from CEHRT and assembles care plans from multiple providers into a single catalog of each patient's overall plan.
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes, MyHealth gathers data from CEHRT and many other sources that track care touches. MyHealth's attribution logic is built on these touches, rather than billing events.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Signature: 

Vendor Name: MyHealth Access Network

Vendor Representative: David C. Kendrick, MD, MPH, FACP

VISIT US ONLINE AT MYHEALTHACCESS.NET

MyHealth Access Network
16 East 16th St, Suite 405, Tulsa, Oklahoma 74119
Phone 918-236-3434, Fax 918-236-3435

Date: August 24, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

NextGen Healthcare Information Systems, LLC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and support to meet those needs	Yes—A number of the tools necessary to support this are currently in our product to support this requirement and we fully intend to support this for the 2018 reporting year
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	Yes, this requirement will be fulfilled with an add-on template available for purchase

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: NextGen Healthcare Information Systems

Vendor Representative: Sarah Corley, MD, FACP _____

A handwritten signature in cursive script that reads "Sarah C. Corley MD, FACP". The signature is written in dark ink and is positioned above a horizontal line.

Signature: _____



Global Letter of Support for CPC+

Date: 08/09/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

nThrive (formerly known as MedAssets) is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes (as measures available in claim data)
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	
Document and track patient reported outcomes	
Empanel patients to the practice site care team	
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation	

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.



nThrive.com

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: nThrive
Vendor Representative: M. SOORADJ, SUP
Signature: _____

A handwritten signature in black ink, appearing to be 'M. Sooradj', written over a horizontal line.

From patient



August 16, 2016

Center for Medicare and Medicaid Services 7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

The Ohio Health Information Partnership, which manages Ohio's statewide CliniSync Health Information Exchange (HIE), is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to assist in supporting practices participating in the CPC+ model. CliniSync will supplement health information technology (HIT) capabilities offered by certified electronic health record (EHR) systems in individual practices.

CliniSync's broad footprint in Ohio includes 148 hospitals, more than 6,000 primary care clinicians and specialists, 400 long-term and post-acute care facilities, and other key members of the care continuum such as payers, accountable care organizations, behavioral health, social service organizations. Our extensive range of exchange and consulting services noted below enhances a provider's ability to achieve the HIT functionality identified for Track 2 practices in the Request for Application by January 1, 2019.

HIE Services to Supplement CPC+ Track 2 Practices

- **Results Delivery** - Practices can receive patient lab results, radiology and transcribed reports directly into their EHR, such as care summaries, history & physicals, and progress notes.
- **Community Health Record** – Practices can access a single community record for patient encounters with other CliniSync hospitals and providers, including related results and reports.
- **Contribute** - Practices can contribute care summary documents or care plans to CliniSync for other providers to access.
- **Referrals** – Practices can electronically send and receive patient referrals with confirmation and tracking in real time, which is especially helpful when coordinating with social service organizations.
- **Notify** - By uploading patient panels, practices can receive a notification when one of their patients goes to the ER or is admitted to or discharged from the hospital.
- **CliniSyncPLUS** – Practices can sign up for consulting services to help them prepare to meet the requirements of the CPC+ program including but not limited to

assistance with risk-stratification, documentation requirements, ensuring required EHR interoperability functions are enabled, workflow analysis and re-engineering.

HIT Requirements Supplemented by CliniSync

Health IT Functionality	Results	Community Health Record	Contribute	Referrals	Notify	CliniSyncPLUS
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"		Yes			Yes	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes					Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs		Yes		Yes		Yes
Document and track patient reported outcomes	Yes	Yes				Yes
Empanel patients to the practice site care team					Yes	Yes
Establish a patient focused care plan to guide care management			Yes			Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of

CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation {CMS Innovation Center}.

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

A handwritten signature in blue ink, appearing to read "Scott Mash", with a long horizontal flourish extending to the right.

Scott Mash, Director of Operations and HIE Consulting
Ohio Health Information Partnership/CliniSync HIE

Global Vendor Letter of Support for CPC+

Date: 16-Aug-2016

Center for Medicare and Medicaid
Services 7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

PAYODA is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feed back	No
Systematically assess patients ' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support/or this functionality.

CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).

- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

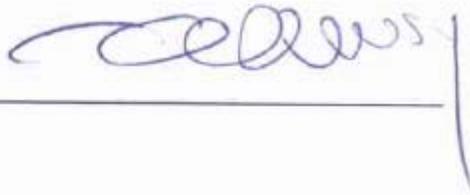
If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: PAYODA TECHNOLOGY, Inc.

Vendor Representative: Kamaraj.K

Signature: _____

A handwritten signature in blue ink, appearing to read 'Kamaraj.K', is written over a horizontal line. A vertical line extends downwards from the end of the signature.

Global Vendor Letter of Support for CPC+ For Native American Health Care Facilities

Date: 8/5/16

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Pieran is writing to express our commitment to partnering with **Native American Healthcare practices** that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

Pieran Health Technologies (Pieran) is committed to helping Native American/Alaskan Native Healthcare facilities excel in providing the best possible care to their patients. **We will work exclusively with Native American Healthcare facilities that are using RPMS to meet their needs for CPC+.**

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality ¹	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	This will be handled by RPMS/EHR
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ²	Yes

¹ In addition to Empanelment...Pieran may utilize the existing functionality of RPMS/EHR to meet the Health IT Functionalities we support.

² Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center)
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Clients may contact Pieran by email at info@pieran.com, or by phone at 520-431-4646 for Tracy Witt (Senior Healthcare Business Analyst/Product Manager), or 240-793-4235 for Jim Pietila (President).

Sincerely,

Vendor Name: Pieran Health Technologies

Vendor Representative: Tracy Witt

Signature:

A handwritten signature in blue ink, appearing to read "Tracy Witt", is written over a light blue horizontal line.



Global Vendor Letter of Support for CPC+

Date: 09/13/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

ReportingMD is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

ReportingMD, a CMS qualified registry and a QCDR with a certified EHR product, is a national leader in quality reporting. Our products lead the industry in clinical quality reporting, delivering 100% reporting success, without fail, for the past 9 years. ReportingMD can submit performance data to meet all pay-for-performance program requirements, including the new Merit-Based Incentive Payment System (MIPS) and Comprehensive Primary Care Plus (CPC+), both of which will begin in 2017.

Under MACRA, we support both APM and MIPS programs, which are multifaceted and require experience to navigate their complex frameworks. ReportingMD's products are ready to support all new reporting requirements under MACRA. Through powerful patient care gap analysis and patient severity identification, ReportingMD will highlight care deficiencies transforming value-based care that can earn up to 12% of Medicare bonus dollars. ReportingMD's powerful reporting engines and support have successfully managed quality outcomes data for thousands of providers under various quality programs including APM, CPC+, PQRS, VBM, HEDIS (STARS), and MU. ReportingMD is devoted to helping clients excel in an increasingly data-centric and value-focused environment.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes

Health IT Functionality	Supported (Yes/No)
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

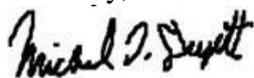
We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Interested providers and practices should contact ReportingMD's Executive Director of Sales with any inquiries: Mike Crider, MCrider@ReportingMD.com, (888) 783-5280.

Sincerely,



Michael T. Deyett, President
ReportingMD

1294 Route 11, Unit 3, PO Box 1014, Georges Mills, NH 03751 p. 888-783-5280 f. 888-428-3413
www.ReportingMD.com

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

Global Vendor Letter of Support for CPC+

Date: August 5, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

RISARC Consulting, LLC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQIM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

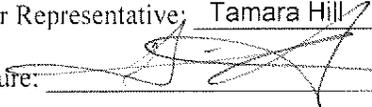
¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: RISARC Consulting, L L C

Vendor Representative: Tamara Hill

Signature: 

Global Vendor Letter of Support for CPC+

Date: July 6, 2016

Center for Medicare and Medicaid Services
 7500 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Saturn Care is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population identify and flag “Patients with Complex Needs”	Yes
Produce and display eQOM results at the practice level to support continuous feedback	Yes
Systematically assess patients’ psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
CPC+ practice site care delis cry and documentation of the care touch documentation	No

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS’s Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Saturn Care

Vendor Representative: Richard Kedziora

Signature: 

Date: 07-JUL-2016



Stratagem Health™

Global Vendor Letter of Support for CPC+

Date: August 17, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:
Stratagem Health, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eQOM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics. If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely, Vendor Name: **Stratagem Health, Inc.**

Vendor Representative: **Vikram Kumar MD MBA**
CEO
Email: vikram@stratagemhealth.com



Signature:

Mailing Address: 751 S Weir Canyon Rd #157, Anaheim, CA 92808 Phone: (530) 426-2273



Global Vendor Letter of Support for CPC+

September 14, 2016

Center for Medicare and Medicaid Services
 7500 Security Boulevard
 Baltimore, MD 21244

Center for Medicare and Medicaid Services:

TechSoft, Inc. is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	-

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If TechSoft, Inc. is selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: TechSoft, Inc.

Vendor Representative: Navin K. Gupta

Signature: 

8/1/2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Verinovum LLC is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participation in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019.

Please check all CPC+ functions that you can support for the participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

We further affirm our intention to participate in the following activities over the course of the model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS
- Participate alongside practice, payers and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives and payers), and/or representative of ONC, to discuss CPC+ requirement and other related topics.

¹ Please note: this functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Verinovum LLC

Vendor Representative: Ryan Campbell

Signature:

A handwritten signature in black ink, appearing to read "Ryan Campbell", written over the printed name.



Global Vendor Letter of Support for CPC+

Date: August 8, 2016

Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Center for Medicare and Medicaid Services:

Wellcentive is writing to express our commitment to partnering with practices that participate in Track 2 of the Comprehensive Primary Care Plus (CPC+) Model.

This letter affirms our intention to support practices participating in the model to meet one or more of the following health information technology (health IT) capabilities identified for Track 2 practices in the Request for Application by January 1, 2019:

Please check all CPC+ functions that you can support for participating practices.

Health IT Functionality	Supported (Yes/No)
Risk-stratify practice site patient population; identify and flag "Patients with Complex Needs"	Yes
Produce and display eCQM results at the practice level to support continuous feedback	Yes
Systematically assess patients' psychosocial needs and inventory resources and supports to meet those needs	Yes
Document and track patient reported outcomes	Yes
Empanel patients to the practice site care team	Yes
Establish a patient focused care plan to guide care management	Yes
Optional: CPC+ practice site care delivery and documentation of the care touch documentation ¹	Yes

¹ Please note: This functionality is not mandatory. Practices may still qualify for Track 2 without obtaining vendor support for this functionality.

We further affirm our intention to participate in the following activities over the course of the Model:

- Partner with CPC+ practices to support the practice in meeting the care delivery objectives for using health IT to deliver comprehensive primary care.
- Provide CMS with 1) a contact focused on CPC+ practice needs and 2) an executive contact to manage the relationship with CMS.
- Participate alongside practices, payers, and other stakeholders in a wide range of CPC+ national learning activities facilitated by CMS's Center for Medicare and Medicaid Innovation (CMS Innovation Center).
- Participate in virtual meetings at least quarterly with representatives of CMS, other CPC+ stakeholders (including other health IT vendors, practice representatives, and payers), and/or representatives of ONC, to discuss CPC+ requirements and other related topics.

If practice partners are selected to participate in Track 2 and sign the CPC+ Participation Agreement, we intend to sign a Memorandum of Understanding with CMS that will serve as an agreement to pursue the activities described above.

Sincerely,

Vendor Name: Wellcentive

Vendor Representative: Mason Beard, Chief Product Officer

Signature: _____

