

CMMI Radiation Oncology Model HFMA Overview

Summary:

On July 10, 2019, The Center for Medicare and Medicaid Innovation (CMMI) proposed a five-year, mandatory episodic payment model for 17 cancer types which make up 84% of cancers (see Appendix I) treated using radiation oncology. The aim of the “Radiation Oncology (RO) Model” is to test whether episode-based payments to physician group practices (PGPs), hospital outpatient departments (HOPD) and freestanding radiation therapy centers for radiotherapy (RT) will reduce Medicare expenditures, while preserving or enhancing the quality of care for Medicare beneficiaries.

The model participants will receive prospective, episode-based payment amounts for RT services furnished during a 90-day episode of care, instead of regular Medicare fee-for-service (FFS) payments throughout the RO model performance period. The RO model would include the following RT modalities: various types of external beam RT, including 3-dimensional conformal radiotherapy (3DCRT), intensity-modulated radiotherapy (IMRT), stereotactic radiosurgery (SRS), stereotactic body radiotherapy (SBRT) and proton beam therapy (PBT); intraoperative radiotherapy (IORT); image-guided radiation therapy (IGRT) and brachytherapy.

The five-year model is currently projected to begin either January 1, 2020, or April 1, 2020, and end December 31, 2024. CMMI estimates the model will save \$260 million dollars over its five-year life by impacting approximately 350,000 episodes.

Participation:

The RO model would require participation from RT providers and suppliers that furnish RT services within selected core-based statistical areas (CBSAs). Using randomly selected stratified CBSAs will ensure that the participant and comparison groups of CBSAs would each contain approximately 40% of all eligible episodes nationally. The proposed rule states the CBSA selected for both the participation and comparison groups will be published on the website when the final rule is published.

Most RT providers and RT suppliers may not know in what CBSA they furnish RT services. In order to simplify the notification process to inform RT providers and RT suppliers whether or not they furnish RT services in a selected CBSA, CMS is proposing to use an RT provider’s or RT supplier’s service location five-digit zip code found on the RT provider’s or RT supplier’s claim submissions to CMS to link them to CBSAs selected under the RO model. The proposed rule defines a process for handling situations where one zip code sits in multiple CBSAs. This issue impacts approximately 15% of all zip codes.

A RO model participant would be a physician group practice (PGP), freestanding radiation therapy center or hospital outpatient department (HOPD), which would participate in the RO model as a professional participant, technical participant, or dual participant as defined below:

- A professional participant is a Medicare-enrolled PGP, identified by a single Taxpayer Identification Number (TIN) that furnishes only the professional component (PC) of RT services at either a freestanding radiation therapy center or a HOPD.

- A technical participant is a HOPD or freestanding radiation therapy center, identified by a single CMS Certification Number (CCN) or TIN, which furnishes only the technical component (TC) of RT services.
- A dual participant furnishes both the PC and TC of an episode for RT services through a freestanding radiation therapy center, identified by a single TIN.

Payment model:

The RO model includes most RT services furnished in HOPDs or freestanding radiation centers that are part of one of the sub-components of RT therapy which include:

- Consultation
- Treatment planning
- Technical preparation services
- Radiation treatment delivery services (including brachytherapy)
- Treatment management

CMS is not proposing to include evaluation and management (E&M) services in the RO Model. E&M services will be billed separately and paid under FFS. Table two in the proposed rule (included in Appendix II) includes the HCPCS codes considered bundled for an RT episode in the RO Model.

Participant-specific payment amounts will be determined based on national base rates, trend factors and adjustments for each participant's case-mix, historical experience and geographic location. CMS would further adjust payment amounts by applying a discount factor. CMMI will create a set of national base rates for the PC and TC of the included cancer types, yielding 34 different national base rates. Each of the national base rates represents the historical average cost for an episode of care for each of the included cancer types. The calculation of these rates would be based on Medicare FFS claims paid during the calendar years (CYs) 2015-2017 that are included under an episode where the initial treatment planning service occurred during the CYs 2015-2017.

In the first two years of the RO model if a participant has fewer than 60 episodes attributed to it during the initial benchmarking period (2015–2017) and subsequent period (2016–2018) then the RO model participant's participant-specific professional episode payment and technical episode payment amounts would equal the trended national base rates in performance year (PY)1 or PY2.

In PY3-PY5, CMS would reevaluate those same RO model participants as it did in PY2 to determine the number of episodes in the rolling three-year period used in the case-mix adjustment for that PY (for example, PY3 would be 2017-2019). RO model participants that continue to have fewer than 60 attributed episodes in the rolling three-year period used in the case-mix adjustment for that performance year would continue to have participant-specific professional episode payment and technical episode payment amounts that equal the trended national base rates, whereas those that have 60 or more attributed episodes would have participant-specific professional episode payment and technical episode payment amounts that equal the trended national base rates with the case-mix adjustment added.

The discount factor, or the set percentage by which CMS reduces an episode payment amount, would reserve savings for Medicare and reduce beneficiary cost-sharing. The discount factor for the PC would be 4%, and the discount factor for the TC would be 5%. The payment amount would also be adjusted for

withholds for incomplete episodes (2% for PC and TC), quality (2% for PC) and beneficiary experience (1% for TC starting in 2022). RO model participants would have the ability to earn back a portion of the quality and patient experience withhold based on clinical data reporting, quality measure reporting and performance, and the beneficiary-reported Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Cancer Care Radiation Therapy Survey.

Episode payments in the RO model would be split into a PC payment, which is meant to represent payment for the included RT services that may only be furnished by a physician, and the TC payment, which is meant to represent payment for the included RT services that are not furnished by a physician, including the provision of equipment, supplies, personnel and costs related to RT services. This division reflects the fact that RT professional and technical services are sometimes furnished by separate providers or suppliers.

Quality measures/impact on payment:

The RO model will calculate an aggregate quality score (AQS) which will impact payment as described above. Starting in PY1 and continuing thereafter, the AQS will be based on quality measures listed in the table below. The AQS starts with three pay-for-performance measures and two pay-for-reporting. Over time, the number of pay-for-performance measures increases. Three of the four measures proposed are National Quality Forum (NQF)-endorsed process measures that are clinically appropriate for RT and are approved for the Merit-based Incentive Payment System (MIPS).

**Radiation Oncology Model Participant Quality Measure,
Clinical Data and Patient Experience Submission Requirements¹**

| RO Participant Data Submission Requirements | Level of Reporting | Pay-for Reporting | Pay-for Performance |
|--|--------------------|-------------------|---------------------|
| Oncology: Medical and Radiation - Plan of Care for Pain-NQF #0383; CMS Quality ID #144 | Aggregate | N/A | PYs 1-5 |
| Preventive Care and Screening: Screening for Depression and Follow-Up Plan- NQF #0418; CMS Quality ID #134 | Aggregate | N/A | PYs 1-5 |
| Advance Care Plan - NQF #0326; CMS Quality ID #047 | Aggregate | N/A | PYs 1-5 |
| Treatment Summary Communication – Radiation Oncology | Aggregate | PYs 1-2 | PYs 3-5 |
| CAHPS Cancer Care Survey | Patient Reported | N/A | PYs 3-5 |
| Clinical Data Elements | Beneficiary Level | PYs 1-5 | N/A |

Quality payment program:

The RO model would be an Advanced Alternative Payment Model (APM) and a Merit-based Incentive Payment System (MIPS) APM for the Quality Payment Program. The RO model would require RO model participants to annually certify their intent to use of Certified Electronic Health Record Technology, include quality measure performance as a factor when determining payments and require RO model participants to bear more than a nominal amount of financial risk. RO model participants who are APM Entities, and eligible clinicians seeking Qualifying APM Participant (QP) status in an Advanced APM, must comply with all RO model requirements in order to be eligible for Advanced APM incentive payments.

¹ Table 7, Proposed Rule, pg 124 - 125; <https://www.hhs.gov/sites/default/files/CMS-5527-P.pdf>

Participants who do not meet the QP threshold would not qualify for the APM incentive payment, and instead would be in a MIPS APM.

Data sharing:

CMS will collect quality, clinical and administrative data for the RO model. CMMI will provide participants the opportunity to request a claims data file that contains patient-identifiable data on the RO Model participant's patient population for clinical treatment, care management and coordination, and quality improvement activities. CMS also proposes to permit the data to be reused by RO model participants for provider incentive design and implementation, and review of CMS's calculation of participant-specific episode payment amounts and reconciliation payment amounts, or recoupment amounts, as applicable.

Beneficiary impact:

Like other CMMI models, the RO model is limited to only Medicare FFS beneficiaries who are eligible for Parts A and B as their primary payer and receive care from a RO Model provider in one of the selected CBSAs. At the time of their initial treatment planning, any beneficiary enrolled in Medicare Advantage, PACE, not in a Medicare hospice benefit period or covered under United Mine Workers will be excluded from the RO model.

Beneficiaries would still be able to receive care from any provider or supplier of their choice. The same cost-sharing requirement as under the traditional payment systems (i.e., typically 20% of the Medicare-approved amount for services) will apply for beneficiaries receiving RO model services from a model participant; because CMS would be applying a discount to each of these components, beneficiary cost-sharing may be, on average, lower relative to what typically would be paid under traditional Medicare FFS.

Additional information:

CMMI is posting additional materials and webinar opportunities on the model's webpage. It can be accessed at: <https://innovation.cms.gov/initiatives/radiation-oncology-model/>

Appendix I: Identified Cancer Types and Corresponding ICD-9 and ICD-10 Codes²

| Cancer Type | ICD-9 | ICD-10 |
|----------------------|---|---|
| Anal Cancer | 154.2x, 154.3x | C21.xx |
| Bladder Cancer | 188.xx | C67.xx |
| Bone Metastases | 198.5x | C79.5x |
| Brain Metastases | 198.3x | C79.3x |
| Breast Cancer | 174.xx, 175.xx, 233.0x | C50.xx, D05.xx |
| Cervical Cancer | 180.xx | C53.xx |
| CNS Tumors | 191.xx, 192.0x, 192.1x, 192.2x, 192.3x, 192.8x, 192.9x | C70.xx, C71.xx, C72.xx |
| Colorectal Cancer | 153.xx, 154.0x, 154.1x, 154.8x | C18.xx, C19.xx, C20.xx |
| Head and Neck Cancer | 140.xx, 141.0x, 141.1x, 141.2x, 141.3x, 141.4x, 141.5x, 141.6x, 141.8x, 141.9x, 142.0x, 142.1x, 142.2x, 142.8x, 142.9x, 143.xx, | C00.xx, C01.xx, C02.xx, C03.xx, C04.xx, C05.xx, C06.xx, C07.xx, C08.xx, C09.xx, C10.xx, C11.xx, |

² Table 1 Proposed Rule, pg 78; <https://www.hhs.gov/sites/default/files/CMS-5527-P.pdf>

| Cancer Type | ICD-9 | ICD-10 |
|-------------------|---|--|
| | 144.xx, 145.0x, 145.1x, 145.2x, 145.3x, 145.4x, 145.5x, 145.6x, 145.8x, 145.9x, 146.0x, 146.1x, 146.2x, 146.3x, 146.4x, 146.5x, 146.6x, 146.7x, 146.8x, 146.9x 147.xx, 148.0x, 148.1x, 148.2x, 148.3x, 148.8x, 148.9x, 149.xx, 160.0x, 160.1x, 160.2x, 160.3x, 160.4x, 160.5x, 160.8x, 160.9x, 161.xx, 195.0x | C12.xx, C13.xx, C14.xx, C30.xx, C31.xx, C32.xx, C76.0x |
| Kidney Cancer | 189.0x | C64.xx |
| Liver Cancer | 155.xx, 156.0x, 156.1x, 156.2x, 156.8x, 156.9x | C22.xx, C23.xx, C24.xx |
| Lung Cancer | 162.0x, 162.2x, 162.3x, 162.4x, 162.5x, 162.8x, 162.9x, 165.xx | C33.xx, C34.xx, C39.xx, C45.xx |
| Lymphoma | 202.80, 202.81, 202.82, 202.83, 202.84, 202.85, 202.86, 202.87, 202.88, 203.80, 203.82, 200.0x, 200.1x, 200.2x, 200.3x, 200.4x, 200.5x, 200.6x, 200.7x, 200.8x, 201.xx, 202.0x, 202.1x, 202.2x, 202.4x, 202.7x, 273.3x | C81.xx, C82.xx, C83.xx, C84.xx, C85.xx, C86.xx, C88.xx, C91.4x |
| Pancreatic Cancer | 157.xx | C25.xx |
| Prostate Cancer | 185.xx | C61.xx |
| Upper GI Cancer | 150.xx, 151.xx, 152.xx | C15.xx, C16.xx, C17.xx |
| Uterine Cancer | 179.xx, 182.xx | C54.xx, C55.xx |

Appendix II: List of RO Model Bundled HCPCS³

| HCPCS | HCPCS Description | Category |
|--------------|---|---|
| 55920 | Placement Pelvic Needles/Catheters, Brachytherapy | Radiation Treatment Delivery (Brachytherapy Surgery) |
| 57155 | Placement Tandem and Opioids, Brachytherapy | Radiation Treatment Delivery (Brachytherapy Surgery) |
| 57156 | Placement Vaginal Cylinder, Brachytherapy | Radiation Treatment Delivery (Brachytherapy Surgery) |
| 58346 | Placement Heyman Capsules, Brachytherapy | Radiation Treatment Delivery (Brachytherapy Surgery) |
| 77014 | Computed tomography guidance for placement of | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77021 | Magnetic resonance guidance for needle placement | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77261 | Radiation therapy planning | Treatment Planning |
| 77262 | Radiation therapy planning | Treatment Planning |
| 77263 | Radiation therapy planning | Treatment Planning |
| 77280 | Set radiation therapy field | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77285 | Set radiation therapy field | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77290 | Set radiation therapy field | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77293 | Respirator motion mgmt simul | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77295 | 3-d radiotherapy plan | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77299 | Radiation therapy planning | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77300 | Radiation therapy dose plan | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77301 | Radiotherapy dose plan imrt | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77306 | Telethx isodose plan simple | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77307 | Telethx isodose plan cplx | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77316 | Brachytx isodose plan simple | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |

³ Table 2 Proposed Rule, pg 85 - 87; <https://www.hhs.gov/sites/default/files/CMS-5527-P.pdf>

| HCPCS | HCPCS Description | Category |
|--------------|------------------------------|---|
| 77317 | Brachytx isodose intermed | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77318 | Brachytx isodose complex | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77321 | Special teletx port plan | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77331 | Special radiation dosimetry | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77332 | Radiation treatment aid(s) | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77333 | Radiation treatment aid(s) | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77334 | Radiation treatment aid(s) | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77336 | Radiation physics consult | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77338 | Design mlc device for imrt | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77370 | Radiation physics consult | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77371 | Srs multisource | Radiation Treatment Delivery |
| 77372 | Srs linear based | Radiation Treatment Delivery |
| 77373 | Sbrt delivery | Radiation Treatment Delivery |
| 77385 | Ntsty modul rad tx dlvr smpl | Radiation Treatment Delivery |
| 77386 | Ntsty modul rad tx dlvr cplx | Radiation Treatment Delivery |
| 77387 | Guidance for radiaj tx dlvr | Radiation Treatment Delivery (Guidance) |
| 77399 | External radiation dosimetry | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77402 | Radiation treatment delivery | Radiation Treatment Delivery |
| 77407 | Radiation treatment delivery | Radiation Treatment Delivery |
| 77412 | Radiation treatment delivery | Radiation Treatment Delivery |
| 77417 | Radiology port images(s) | Radiation Treatment Delivery (Guidance) |
| 77424 | Io rad tx delivery by x-ray | Radiation Treatment Delivery |
| 77425 | Io rad tx deliver by elctrns | Radiation Treatment Delivery |
| 77427 | Radiation tx management x5 | Treatment Management |
| 77431 | Radiation therapy management | Treatment Management |
| 77432 | Stereotactic radiation trmt | Treatment Management |
| 77435 | Sbrt management | Treatment Management |
| 77470 | Special radiation treatment | Treatment Management |
| 77499 | Radiation therapy management | Treatment Management |
| 77520 | Proton trmt simple w/o comp | Radiation Treatment Delivery |
| 77522 | Proton trmt simple w/comp | Radiation Treatment Delivery |
| 77523 | Proton trmt intermediate | Radiation Treatment Delivery |
| 77525 | Proton treatment complex | Radiation Treatment Delivery |
| 77761 | Apply intrcav radiat simple | Radiation Treatment Delivery |

| HCPCS | HCPCS Description | Category |
|--------------|---|---|
| 77762 | Apply intracav radiat interm | Radiation Treatment Delivery |
| 77763 | Apply intracav radiat compl | Radiation Treatment Delivery |
| 77767 | Hdr rdncl skn surf brachytx | Radiation Treatment Delivery |
| 77768 | Hdr rdncl skn surf brachytx | Radiation Treatment Delivery |
| 77770 | Hdr rdncl ntrstl/icav brchtx | Radiation Treatment Delivery |
| 77771 | Hdr rdncl ntrstl/icav brchtx | Radiation Treatment Delivery |
| 77772 | Hdr rdncl ntrstl/icav brchtx | Radiation Treatment Delivery |
| 77778 | Apply interstit radiat compl | Radiation Treatment Delivery |
| 77789 | Apply surf ldr radionuclide | Radiation Treatment Delivery |
| 77790 | Radiation handling | Medical Radiation Physics, Dosimetry, Treatment Devices, Special Services |
| 77799 | Radium/radioisotope therapy | Radiation Treatment Delivery |
| A9527 | Iodine i-125 sodium iodide | Radiation Treatment Delivery (Brachytherapy Materials) |
| C1715 | Brachytherapy needle | Radiation Treatment Delivery (Brachytherapy Materials) |
| C1716 | Brachytx, non-str, gold-198 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C1717 | Brachytx, non-str,hdr ir-192 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C1719 | Brachytx, ns, non-hdrir-192 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C1728 | Catheter, brachytherapy seed administration | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2616 | Brachytx, non-str,yttrium-90 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2634 | Brachytx, non-str, ha, i-125 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2635 | Brachytx, non-str, ha, p-103 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2636 | Brachy linear, non-str,p-103 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2638 | Brachytx, stranded, i-125 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2639 | Brachytx, non-stranded,i-125 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2640 | Brachytx, stranded, p-103 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2641 | Brachytx, non-stranded,p-103 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2642 | Brachytx, stranded, c-131 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2643 | Brachytx, non-stranded,c-131 | Radiation Treatment Delivery (Brachytherapy Materials) |

| HCPCS | HCPCS Description | Category |
|--------------|---|--|
| C2644 | Brachytx cesium-131 chloride | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2645 | Brachytx planar, p-103 | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2698 | Brachytx, stranded, nos | Radiation Treatment Delivery (Brachytherapy Materials) |
| C2699 | Brachytx, non-stranded, nos | Radiation Treatment Delivery (Brachytherapy Materials) |
| G0339 | Robot lin-radsurg com, first | Radiation Treatment Delivery |
| G0340 | Robt lin-radsurg fractx 2-5 | Radiation Treatment Delivery |
| G6001 | Echo guidance radiotherapy | Radiation Treatment Delivery (Guidance) |
| G6002 | Stereoscopic x-ray guidance | Radiation Treatment Delivery (Guidance) |
| G6003 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6004 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6005 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6006 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6007 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6008 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6009 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6010 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6011 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6012 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6013 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6014 | Radiation treatment delivery | Radiation Treatment Delivery |
| G6015 | Radiation tx delivery imrt | Radiation Treatment Delivery |
| G6016 | Delivery comp imrt | Radiation Treatment Delivery |
| G6017 | Intrafraction track motion | Radiation Treatment Delivery (Guidance) |
| Q3001 | Brachytherapy radioelements | Radiation Treatment Delivery (Brachytherapy Materials) |
| 77469 | Intraoperative radiation treatment management | Treatment Management |