

CMS-Required Notice for Participant Clinician

You, and the TIN through which you bill Medicare, will be identified on Accountable Care Organization of Advocate Aurora Health's (ACOAA) *Proposed Revised Participant Clinician List* for the ACO REACH Model in PY2024.

Please note that participating in the ACO REACH Model may preclude you or your entity from participating in the Medicare Shared Savings Program, another REACH ACO in the Model, the Vermont Medicare ACO Initiative, the Kidney Care Choices Model, any other Medicare initiative that involves shared savings (except as otherwise specified by CMS), the Primary Care First Model, the Maryland Total Cost of Care Model, and the Independence at Home Demonstration.

ACOAA has selected to participate in the Total Cost of Care (TCC) Payment for the Performance Year as described in ACOAA's Participation Agreement with CMS ("Participation Agreement"), therefore you or your entity must agree to participate in TCC Payment in accordance with the requirements of Section 12.02.E of the Participation Agreement for the full Performance Year in order for you or your entity to participate as a Participant Provider for that Performance Year, and you or your entity's agreement to participate in TCC Payment must be renewed annually prior to the start of the next Performance Year in order for you or your entity to participate as a Participant Clinician for that Performance Year.

Note that when we send these to individuals, it will say, "You, and the TIN through which you bill Medicare"

Appear to be small differences between model language and this text - e.g., Model describes Vermont program as "Vermont Medicare ACO Initiative"



Advocate Health Care



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