

2022 HOSPITAL OUTPATIENT PROSPECTIVE PAYMENT SYSTEM (HOPPS) AND AMBULATORY SURGICAL CENTER SYSTEM (ASC) FINAL RULE INCLUDES FINALIZED MODIFICATIONS RELATED TO THE RO MODEL

On November 2, 2021, the Centers for Medicare and Medicaid Services (CMS) displayed the 2022 Hospital Outpatient Prospective Payment System (HOPPS) and Ambulatory Surgical Center System (ASC) final rule, which includes finalized modifications related to the Radiation Oncology (RO) Model.

The RO Model tests whether prospective, site neutral, modality agnostic, episode-based payments to physician group practices (including freestanding radiation therapy centers), and hospital outpatient departments for radiotherapy (RT) episodes of care reduces Medicare expenditures while preserving or enhancing the quality of care for Medicare beneficiaries.

The CY 2022 HOPPS and ASC Payment System final rule includes the following modifications to the RO Model's timing and design:

- The RO Model will begin on January 1, 2022, with a five-year model performance period ending December 31, 2026.
- The baseline period is 2017-2019 rather than 2016-2018.
- The discounts are 3.5 percent Professional Component and 4.5 percent Technical Component.
- Brachytherapy is not included on the list of included modalities under the RO Model; it will continue to be paid fee-for-service.
- Liver cancer will no longer be included in the RO Model as it does not satisfy the model's cancer inclusion criteria.
- The RO Model will include an extreme and uncontrollable (EUC) circumstances policy. This policy will provide CMS with flexibility to delay the model performance period, reduce the

administrative burden of RO Model participation, including reporting requirements, and adjust the pricing methodology. If and when CMS invokes any of the EUC provisions, they will communicate this decision via the RO Model website and written correspondence to RO participants.

- There are three tracks related to status under the Quality Payment Program (QPP), based on RO participant type and compliance with RO Model requirements. CMS is finalizing with modification to define a Track Three for the RO Model, where Track One would be the same: it would include those Professional participants and Dual participants who follow all RO Model requirements, including Certified Electronic Health Records Technology (CEHRT), and that CMS expects will qualify as an Advanced Alternative Payment Model (APM) and a Merit-Based Incentive Program (MIPS) APM. Track Two would be for those Professional participants and Dual participants who follow all RO Model requirements except for CEHRT, and that CMS expects would qualify as a MIPS APM only. Track Three would be for all other RO Model participants and would not be a MIPS APM or Advanced APM.

For more information on the RO Model, visit <https://innovation.cms.gov/innovation-models/radiation-oncology-model>

For questions on the RO Model or for RO participants seeking to attain their RO Model ID, please contact RadiationTherapy@cms.hhs.gov.