

2023 All-Payer Eligibility Decision Tree

Don't Know? See list below:

- Accountable Care Organization Realizing Equity, Access, and Community Health (ACO REACH) Model
- Bundled Payments for Care Improvement Advanced (BPCI Advanced) Model
- Comprehensive Care for Joint Replacement (CJR) Payment Model Track 1-CEHRT
- Comprehensive Kidney Care Contracting (CKCC) – Global
- Comprehensive Kidney Care Contracting (CKCC) – Graduated Option Level 2
- Comprehensive Kidney Care Contracting (CKCC) – Professional
- Kidney Care Choices: Kidney Care First (KCF)
- Maryland All-Payer Model – Care Redesign Program
- Medicare Shared Savings Program Accountable Care Organizations – Basic Track E
- Medicare Shared Savings Program Accountable Care Organizations – Enhanced Track
- Oncology Care Model (OCM) – Two-Sided Risk Arrangement
- Primary Care First (PCF) Model
- Vermont Medicare ACO Initiative (as part of the Vermont All-Payer ACO Model)

Are You a Medicare Advanced Alternative Payment Model Participant?

YES | NO ► **Not Eligible**

Participate in Value Based Payment Arrangement with Other Payers?

YES | NO ► **Not Eligible**

In a CMS-Approved Value Based Payment Arrangement? (Other Payer Advanced APM)

YES | NO ► **No, but I want to know if the arrangement I am in qualifies as an Other Payer Advanced APM.**

Please go to the All-Payer Data Submission Form to submit payment and/or patient count data for your payment arrangements.

1. You must complete the Clinician Initiated Other Payer Advanced APM Determination process in order for CMS to determine whether the payment arrangement qualifies as an Other Payer Advanced APM. Please go to the [Eligible Clinician Arrangement Form](#) to submit your payment arrangement information.
2. You may also submit your payment or patient participation data at this time (i.e. prior to receiving a determination from CMS). However, note that submission of participation information does not guarantee approval of the payment arrangement as an Other Payer Advanced APM. Please go to the [All-Payer Data Submission Form](#) to submit your participation data.
3. We will post an updated list after the end of the QP Performance Period (except for Medicaid payment arrangements).