



Powered by The Valley Health System and Kindred Hospitals



September 2025

NEWSLETTER

Volume 123

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#VegasStrong



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OUTSTANDING RESULTS!

Silver State ACO Earns Shared Savings for TENTH Consecutive Year

The Centers for Medicare and Medicaid Services (CMS) just released results for the 2024 performance year for the Medicare Shared Savings Program (MSSP).

*Silver State ACO is privileged, proud, and delighted to announce that we have **achieved Shared Savings** for an incredible **TENTH year in a row!** For the 2024 performance year, Silver State ACO saved CMS over **\$28,500,000** and has earned over **\$20,958,000**.*

As these results were unembargoed only moments before we were to publish this newsletter, we have very little additional information regarding the success – or not – of the other 400+ MSSP ACOs that participated in the program for 2024. What we do know is that our success and consistent performance is remarkable.



Earning Shared Savings is a result of hard work and cooperation between the Participating practices, Preferred Providers, and the Silver State ACO Board of Directors, staff, and management team. Each dedicated and skilled group contributes, working together to reach their shared goal. We would like to thank all the providers

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Southern Nevada
Wednesday, Nov. 5, 2025

Northern Nevada:
Thursday, Nov. 6, 2025

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*End of summer; beginning of
autumn*

and staff for helping Silver State ACO achieve these impressive outcomes. Working together as a team, along with our corporate partners, the Valley Health System, Northern Nevada Health System and ScionHealth, we look forward to continued success, delivering great results for our practices, providers, and, most importantly, the patients.

ALERT: Medicare Fraud Scheme

CMS (Centers for Medicare and Medicaid Services) has issued an alert regarding phishing fax requests.

CMS has become aware of a scheme to obtain patient records using fax requests that seem to be authentic by including CMS headers. Some include headers for other government agencies. The requests demand all patient information and medical records for all Medicare patients. They include verbiage that stresses immediate action with threatening language advising that it is a “final demand, no extensions”, and asserting that failure to comply could trigger termination of the practice’s Medicare contract.



CMS reminds all providers that any requests by CMS or their contractors will identify specific Medicare beneficiaries, dates, encounters or events. In addition, Medicare will always allow ample time to comply with the request, generally a minimum of 30 days. Medical reviews will be requested by an ADR (Additional Documentation Review).

Silver State ACO reminds all our practices and providers to remain vigilant. Medicare beneficiary information is extremely valuable to “bad actors” who are very diligent in creating new schemes to gain access to your records. We must all remain at least as diligent as

they are in order to identify these schemes.



Failure to do so can have severe consequences for all involved – the patient and the practice, as well as Silver State ACO. Fallout can include major disruption to the practice as well as substantial fraudulent and unnecessary costs to the Medicare system.

Please remain alert to requests that seem unusual! If you should receive a fax which you suspect could be a phishing attempt, do NOT respond. Notify your Medicare contact immediately.

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Spotlight: Transitional Care Management Visits

Transitional Care Management (TCM) visits are a critical opportunity for our ACO and participating practices to strengthen patient care, improve outcomes, and reduce unnecessary healthcare costs. These visits are designed to support patients during the 30-day period after discharge from a hospital or skilled nursing facility, when they are at highest risk for complications or readmission. The process involves three key steps:



SPOTLIGHT

- Establishing interactive contact with the patient or caregiver within two business days of discharge
- Providing non-face-to-face services such as medication reconciliation and coordination with other providers
- Completing a face-to-face visit within either seven or fourteen days depending on the patient's level of medical complexity

For your practice, TCMs offer both clinical and financial advantages. Clinically, it encourages providers to establish stronger workflows around follow-up care which ensures patients do not fall through the cracks. Financially, the reimbursement rates for TCM services are higher than traditional office visits, meaning practices are compensated appropriately for the additional coordination required.



TCM Reimbursement

7 Days of discharge w. high
level medical decision
making

99496

\$271.47

14 Days of discharge w.
moderate level medical
decision making

99495

\$200.34

Based on CMS 2025 Physician Fee Schedule for Nevada MAC, non-facility price

Many practices discover that they were already providing much of this care but not billing for it, leaving substantial revenue on the table. With intentional workflows and proper documentation,

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practices can capture this revenue while simultaneously improving care quality.

From the patient's perspective, the benefits are significant. Early contact after discharge helps them better understand their medications, recognize warning signs, and connect with resources they may not have known were available. Studies have shown that TCM services can reduce readmission rates by almost 39% (*Journal of the American Geriatrics Society*) and even lower mortality rates, which is particularly impactful for high-risk or medically complex patients.



The national average readmission rate for Medicare patients has varied over the years but has generally been around 15% to 20%. Rates can vary significantly based on the condition for which the patient was initially hospitalized. For example, patients with heart failure, pneumonia, and chronic obstructive pulmonary disease (COPD) often have higher readmission rates compared to other conditions. According to **Medpac**, Medicare spends approximately **\$26 billion** on hospital readmissions annually. Of this, **\$17 billion** is considered potentially avoidable.

From the ACO standpoint, these visits directly support the organization's mission to improve quality outcomes while reducing costs. Reduced readmissions and emergency department utilization translate to lower total cost of care, while improved outcomes and patient satisfaction strengthen quality performance.

To successfully implement TCM visits into day-to-day activities, practices should establish a reliable system for identifying discharged patients, assigning follow-up responsibilities, and documenting all required components of care. Many organizations leverage hospital alerts, care management teams, and even telehealth visits to ensure no patient is missed. Silver State ACO assists with hospital alerts by offering **Experian** at no cost to our participating practices. If you do not have access to this tool, please reach out to your Quality Coordinator.

When implemented correctly, Transitional Care Management visits become more than a billing opportunity - they become an instrument that advances the goals of population health, cost reduction, and patient centered care.

For additional details, the Centers for Medicare & Medicaid Services (CMS) has release guidelines that can be viewed by [clicking here](#).

Please reach out to your Quality Coordinator if you have any further questions.

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JULY Practice Meetings

Silver State ACO sponsors quarterly practice meetings to educate and foster engagement between our Participants. In addition, the meetings give staff the opportunity to ask questions and interact with SSACO staff in a more congenial setting.

Our July meetings accomplished all that and more. With presentations by one of our Preferred wound care specialists, the CEO of Northern Nevada Medical Center, a Participant practice that has achieved great results for their practice using SSACO programs, and Arkos (SSACO care coordination partner) as well as the Silver State ACO CEO and Quality Coordinators, the meetings were enjoyable as well as impactful. Please be sure to join us at the November meetings; the last ones for 2025.

Dr. Ryan Huang,
Advanced Wound
Care



Dineen (SSACO QC), Jessica (SSACO QC), Andriana (Northern Nevada Medical Group), Molly Bottenberg, Terri Kelly (Reno Family Physicians), Richelle (SSACO QC) at the Northern Nevada Practice Meeting

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Dr. Nakeisha Curry,
Paragon Medical Group

Below:
Full house at Northern
Nevada Practice meeting



Left:
Sherri Bodager,
ARKOS HEALTH
Market
President

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LAST Practice Meetings for 2025

Please join us!

(And, for a chance to be entered into a raffle at the next practice meeting, respond to this email with "Congratulations to Silver State ACO – Ten Years of Success" in the subject line.)



SOUTHERN NEVADA

Wednesday, Nov. 5, 2025

The meeting will be held at Summerlin Hospital at 11:30 am. Lunch will be served.

NORTHERN NEVADA

Thursday, Nov. 6, 2025

Northern Nevada Practice Meetings will be held at Northern Nevada Sparks Medical Building, Suite 201. Meet & Greet begins at 5 pm; Meeting begins at 5:30.

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