

CMMI Announces Updates to EOM and a New Cohort Opportunity

On May 30, 2024, CMMI released a request for applications (RFA) to solicit applications for a second cohort of participants in the Enhancing Oncology Model (EOM) and to highlight changes to the model.

Second Cohort Participants: RFA

- The RFA is for a second cohort of EOM participants and payers.
- The second cohort will begin participation in EOM on July 1, 2025, and end on June 30, 2030, for a 5-year model performance period.
- The first performance period began on July 1, 2023, and the **model test will end on June 30, 2030, for all participants, which is a two-year extension from the original end date of June 30, 2028.**

Application

- Private payers, Medicare Advantage plans, state Medicaid agencies, and Medicaid MCOs are eligible to apply to partner with CMS in EOM.
- Physician group practices and payers that wish to participate in EOM are required to submit an application using the EOM RFA Application Portal.
 - CMS is not soliciting Letters of Intent from potential applicants.
- An internal committee will review completed applications. Prior to application approval, CMS will also conduct a program integrity screening.
- Applications to participate in EOM will be accepted on the basis of completeness, quality of narratives, and the result of a program integrity screening.
- **The application portal for interested applicants will be open from July 1, 2024, to September 16, 2024.**

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Eligible Participants

- Eligible participants are Medicare-enrolled oncology physician group practices identifiable by a unique federal taxpayer identification number.
- Practices that participate in EOM are required to implement eight Participant Redesign Activities to improve quality of care and will have the option to bill a Monthly Enhanced Oncology Services (MEOS) payment.
 - **MEOS payments will increase from \$70 to \$110 per individual per month (and to \$140 per month for dually eligible individuals).**
- EOM participants are financially responsible for the total cost of care for each attributed episode, which is the six-month period following an eligible Medicare individual's receipt of a qualifying cancer therapy.
- Participants may earn a performance-based payment by meeting a risk-adjusted spending target for their attributed episodes; conversely, they will owe a performance-based recoupment to CMS if total spending in these episodes exceeds a specified percentage of their benchmark amount.
 - **For all participants, this threshold for recoupment will increase from 98% of the benchmark amount to 100% of the benchmark amount, beginning for episodes initiating on or after January 1, 2025.**

ADVI Insights: CMMI's decision to open a second cohort for EOM is an acknowledgement of the relatively small number of practices from the first cohort, and the likely forthcoming decreased number of participants in early 2025 after the performance period 1 reconciliation results are available. Further, the increased MEOS payment reflects provider feedback that the incentive to join EOM was insufficient relative to OCM.