

**COMMUNITY HEALTH NETWORK**  
**PROVIDER/SUPPLIER MSSP ASSURANCE POLICY**

**WHEREAS**, pursuant to CMS guidance, all providers/suppliers who bill through the TIN of an ACO Participant must agree to participate in the Medicare Shared Saving Program (“MSSP”) and follow MSSP requirements;

**WHEREAS**, under the Triple Aim Accountable Care Organization d/b/a Community Health Network Participation Agreement (“CHN Agreement”), an ACO Participant shall ensure that each of its providers/suppliers agrees to be bound by the terms of the CHN Agreement as if the provider/supplier were a party to the CHN Agreement; and

**WHEREAS**, CHN desires to have evidence from each ACO Participant that the ACO Participant has obtained the necessary assurance from each of its providers/suppliers regarding MSSP participation and compliance with MSSP requirements,

**NOW, THEREFORE, BE IT RESOLVED**, by the Board of CHN that each ACO Participant is to provide to CHN one of the following:

1. If ACO Participant’s providers/suppliers are, by the terms of their employment or otherwise, required to follow policies adopted by the ACO Participant, a copy of the policy adopted by the ACO Participant and applicable to all ACO Participant’s providers/suppliers that requires the providers/suppliers to participate in the MSSP and follow MSSP requirements; or
2. A written attestation from each provider/supplier of the ACO Participant that the provider/supplier agrees to participate in the MSSP and follow MSSP requirements; or
3. Other evidence acceptable to the CHN Board of Directors.