



**ENHANCING ONCOLOGY**  
MODEL

# ENHANCING ONCOLOGY MODEL (EOM) PAYMENT METHODOLOGY CHANGES

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## **Introduction**

This communication describes updates that the Centers for Medicare & Medicaid Services (CMS) has made to the EOM payment methodology in the area of measuring episode expenditures in the context of overlap with new CMS models.

These design updates will be in effect for episodes initiating on or after January 1, 2025 (i.e., Performance Period 4 and beyond).

# Performance Period Episode Expenditures Updates

## Accounting for Model Overlap During the Performance Periods

### *ACO Primary Care Flex Model (ACO PC Flex Model)*

Overlap between EOM and the ACO PC Flex Model will be permitted and handled consistently with policies for overlap with existing ACO initiatives, including the ACO Realizing Equity, Access, and Community Health (REACH) Model and the Medicare Shared Savings Program.

In alignment with existing policies, in all EOM performance period episode expenditure calculations, CMS will account for any reductions in fee-for-service (FFS) payments for services furnished to EOM beneficiaries who are also aligned to the ACO PC Flex Model. Prospective Primary Care Payments (PPCPs) will not be counted toward episode expenditures, but CMS will include the standardized paid amounts that would have been received for FFS claims in the absence of the PPCP.

Advanced Shared Savings Payments to ACO PC Flex Model participants will not be included in EOM episode expenditures.

### *Increasing Organ Transplant Access (IOTA) Model*

Beneficiary and participant overlap will be permitted between EOM and the IOTA Model. IOTA Model Performance-Based Payments and Performance-Based Recoupments will not be counted toward EOM episode expenditures.