

What It Means to Patients: Medicare Shared Savings Program

ACOS ARE THE DRIVING FORCE IN THE MOVE TO VALUE-BASED CARE

Medicare's ACO program is the largest value-based payment model in the country and an essential tool in moving the health system toward better value by incentivizing more efficient, higher quality, lower cost care. More than 480 ACOs participate in the <u>Medicare Shared Savings Program (MSSP</u>), nearly 10 million seniors, making ACOs the fastest growing Medicare program in its more than 50-year history.

ACOS OFFER BETTER QUALITY AND OUTCOMES

Several independent evaluations and CMS data show ACOs are helping improve the quality of care Medicare patients receive. In 2016, 99 percent of the 438 Track 1 ACOs **met quality standards**, according to the <u>Medicare Payment</u> <u>Advisory Commission</u>. ACOs **produced lower hospital readmission** rates 90 percent of the time compared to fee-forservice providers outside of ACOs, according to the Department of Health and Human Services <u>Inspector General</u>. ACOs with at least four years of experience **improved their average quality performance** by 15 percent between 2013 and 2016, CMS <u>said in 2018</u>. Even in ACOs with older, sicker patients, quality <u>was still improved</u>.

ACOS FOCUS ON 'PATIENT-CENTEREDNESS' AND PATIENT CHOICE

ACOs must meet criteria for "patient-centeredness" including developing patient care plans, identifying high-risk patients, and establishing care coordination activities. As a result, patient-experience surveys, which ACOs are mandated to administer annually, have proven to **meaningfully improve care**, <u>research</u> has shown. Further, CMS requires ACOs to engage beneficiaries in their leadership to ensure a patient voice is included in each ACO's leadership.

ACOS MAINTAIN PATIENT CHOICE

ACOs also allow seniors to maintain their **choice of provider**. MSSP is the only formal Medicare program outside of Medicare Advantage (MA), where the providers are organized to **coordinate across the whole continuum** of care. Limiting the number of ACOs would leave MA as the only option to have access to these important services. Many seniors do not want the network restrictions that typically come with MA.

NEW CMS 'PATHWAYS TO SUCCESS' PROGRAM

CMS's new structure for the MSSP, entitled "Pathways to Success," contains significant changes for patients. **What's Good:**

- **Offers Seniors Incentives to get the right care:** A new beneficiary incentive program allows certain ACOs to pay seniors up to \$20 for qualifying primary care visits.
- **Removes Telehealth Restrictions:** CMS will allow certain ACOs to offer telehealth services in patient homes, expanding patient choice and access to care.
- **Expands use of the Skilled Nursing Facility (SNF) waiver:** CMS expands the use of a popular waiver that allows beneficiaries to more easily access SNF care without having a hospital stay first.