



Accountable Care Organizations

12/16/19

Accountable Care Organizations (ACO)

An ACO is a group of health care providers, including primary care physicians, specialists, and hospitals, that is held accountable for the cost and quality of care delivered to a defined subset of traditional Medicare program beneficiaries.

Reimbursements are tied to achieving quality goals and outcomes that produce cost savings. If the ACO's cost of care is below the anticipated spend for the specific patient populations, CMS returns a portion of the savings to the ACO for distribution among the participants (AAFP, 2019).



Beginning January 1, 2020 we will participate in the community-based ACO, AnewCare. There is no downside risk in the distribution model, however, ETSU Health may be able to receive 50% of the upside opportunity.

ETSU Health will submit data in three categories: patient survey, claims, and manual data entry. The following is the breakdown in each category:

Patient Survey

- 1. CAHPS: Timely Care
2. CAHPS: Providers Communication
3. CAHPS: Rating of Provider
4. CAHPS: Access to Specialist
5. CAHPS: Education
6. CAHPS: Shared Decision Making
7. CAHPS: Functional Status
8. CAHPS: Patient Resources
9. CAHPS: Courteous of Office Staff
10. CAHPS: Care Coordination

Claims

- 1. All Condition Readmission
2. All-Cause Unplanned Admissions
3. Acute Composite
4. Skilled Nursing Facility 30-Day Readmission
5. All-Cause Unplanned Admissions Diabetic Patient
6. All-Cause Unplanned Admissions Heart Failure Patient
7. Use of Imaging Studies for Low Back Pain

Manual Data

- 1. Screening for Falls
2. Influenza Vaccination
3. Colorectal Screening
4. Tobacco Use Screening/Cessation
5. Depression Screening/Follow Up
6. Breast Cancer Screening
7. Controlling Blood Pressure
8. Depression Remission
9. A1c Poor Control
10. Statin Therapy for Prevention of Cardiovascular Disease