

Medicare Shared Savings Program



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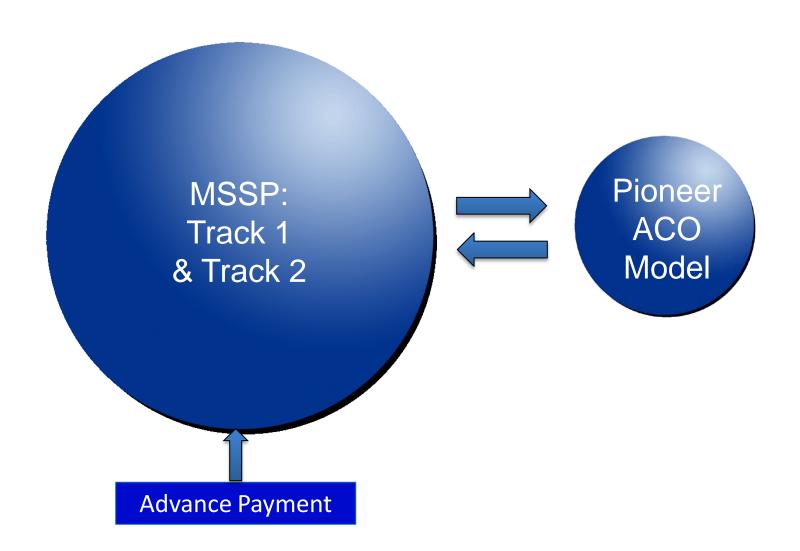
Agenda

- Overview of the Shared Savings Program
- Observations from PY1 results
- Looking ahead

ACO Vision

- An ACO promotes seamless coordinated care
 - Puts the beneficiary and family at the center
 - Remembers patients over time and place
 - Attends carefully to care transitions
 - Manages resources carefully and respectfully
 - Proactively manages the beneficiary's care
 - Evaluates data to improve care and patient outcomes
 - Innovates around better health, better care and lower growth in costs through improvement
 - Invests in team-based care and workforce

CMS's ACO Strategy: Creating Multiple Pathways with Constant Learning and Improving



Interagency Coordination

Antitrust Agencies (FTC/DOJ): Antitrust Policy Statement http://www.ftc.gov/tips-advice/competition-guidance/industry-guidance/health-care/accountable-care-organizations

IRS: http://www.irs.gov/uac/Tax-Exempt-Organizations-Participating-in-the-Medicare-Shared-Savings-Program-through-Accountable-Care-Organizations

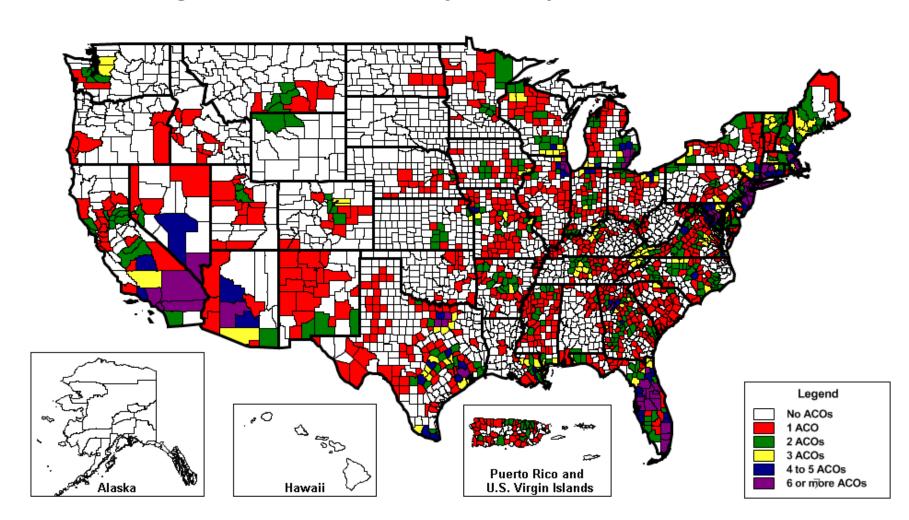
OIG/CMS: Interim Final with Comment http://oig.hhs.gov/compliance/accountable-care-organizations/

Participation is Growing Rapidly

- 405 ACOs have been established, including 89 new Shared Savings ACOs for 2015
- 7.2 million assigned beneficiaries in 47 states, plus DC and PR
- CMS expects continued growth in the Shared Savings Program in 2016 and annually thereafter.

Participation is Growing Rapidly

ACO-Assigned Beneficiaries by County (includes 2012-2014 starters)



Signs of Success - Improving Quality

- Nearly all ACOs successfully reported quality measures and earned PQRS incentives.
- Shared Savings Program ACOs improved on 30 of 33 quality measures. Quality improvement was shown in such measures as patients' ratings of clinicians' communication, beneficiaries' rating of their doctor, health promotion and education, screening for tobacco use and cessation, and screening for high blood pressure.
- Shared Savings Program ACOs achieved higher average performance rates on 17 of the 22 Group Practice Reporting Option Web Interface measures reported by other Medicare FFS providers reporting through this system.
- In 2013 alone, over 125,000 eligible professionals who were ACO providers or suppliers qualified for their incentive payments for reporting their quality of care through the Physician Quality Reporting System (PQRS) These providers will also avoid the PQRS payment adjustment in 2015 because they demonstrated the ability to report quality measures through their ACO.

Signs of Success - Improving Costs

- First year results showed 58 Medicare Shared Savings Program (MSSP) ACOs held spending \$705 million below their targets and earned performance payments of more than \$315 million as their share of savings.
- One ACO in Track 2 overspent its target by \$10 million and owed shared losses of \$4 million.
- An additional 60 ACOs reduced health care costs compared to their benchmark but did not qualify for sharing in savings.

Signs of Success – Improving Care

- ACOs are engaging in a variety of innovative care coordination and practice redesign activities with local providers in their communities.
- ACOs are using medial record and Medicare claims data to assist them in redesigning care and monitoring their performance.
- ACOs identified physician engagement, patient engagement, care transitions, and post-acute care as key issues and are working on strategies to improve in these areas.

Lessons Learned – Medicare Shared Savings Program

- Importance of strong clinical leadership
- Communication and transparency
- Practice redesign
- Innovative care coordination
- The value of data and dashboards
- Pick a few things to improve first, then build on success

Looking Ahead

- New group of Medicare Shared Savings
 Program ACOs started January 1, 2015.
- New groups will start January 1, 2016.
- Seeking comment on proposed rule changes (due Feb 6, 2015)

The CMS Vision

- Retain and increase the number of ACOs operating in the program
- Gradually shift more organizations to higher performance-based risk tracks
- Use CMS Innovation Center authority to test the next generation of ACOs
- Foster environment for providers to work together to improve care through better information and data sharing, and better engagement of physicians and patients
- Provide a forum for sharing learnings to identify strategies that are working well and identify areas for improvement

Resources

- Contact:
 - ACO@cms.hhs.gov
- For more information, visit the Medicare Shared Savings Program website:
 - www.cms.gov/sharedsavingsprogram