

ACO DEVELOPMENT CONSIDERATIONS

ACO Board Membership

- ACO Professionals
- Suppliers
- Medicare Beneficiaries

GOVERNANCE

Tax Payer ID No (TIM)
Claim submissions
Redistribution
EHR Capability
Data Collection

INFRASTRUCTURE

3 Year Agreements

Hospitals
Physician groups
Specialists
Home Health Agencies
Hospice
Pharmacies
Ancillary Services

PROVIDER GROUPS

Shared savings
data submissions

PSA Primary Service Area =
MCARE Beneficiaries

- contiguous zip code areas
- assignment retrospectively by MCARE

PATIENT POPULATIONS

Quality Measures (65) Chronic Diseases (5)
Tools

- Physician Quality Reporting System (GPRO)
- Patient Surveys
- ICD -9 claim coding

INCENTIVES

Investment Costs

Tax Payer ID No (TIM)
Claim submissions
Redistributions
EHR Capability
Data Collection

Payer Contracts re ACO Specialist

- bundled payment vs capitation vs shared saving payment
- Value Based payment schemes built in to payer contracts

Compensation Plan Configuration

Software Applications

- Electronic Health Record
- Real time data transmission

Shared saving Payments routed to ACO via TIN identity

Provider Integration Issues

Hospitals
Physician groups
Specialists
Home Health Agencies
Hospice
Pharmacies
Ancillary Services

Process Realignment among Providers

- balance interests of hospitals, Primary Care MDs and Specialists

Software interoperability = exchanging data between shared savings providers

Specialists Recruitment

- cost effective protocols

Caseload Issues

PSA Primary Service Area = MCARE Beneficiaries

- contiguous zip code areas
- assignment retrospectively by MCARE
- 75% threshold re enrollees

Reporting Performance Measures

Patient MCO Attribution

Quality

Quality Measures (65) Chronic Diseases (5)

Tools

Physician Quality Reporting System (GPRO)

Patient Surveys

ICD -9 claim coding

Software Implementation

- patient attribution issues
- ICD-10 implementation plan
- Clinical Decision Support Systems
- transactional system upgrades

Risk Management - Value of Care-Care Coordination

- Clinical Pathways
- Improved Patient Safety Systems
- 400+ beneficiaries per measurement domain

EHR COMPLIANCE

- plug & play capability with regional networks

Clinical operations improvements

- standardized care management protocols
- pharmacy review

ACO DEVELOPMENT CONSIDERATIONS

Observations

- The ACO model, integrating care services across the continuum of care, is here to stay; avoid the confusion of strategy vs tactics re ACO development issues
- Future insurance contracting will partner provider types for integrated care delivery
- Provider focus (business model) will shift to Primary Care orientation and away from specialized care routines
- Payment methodologies (e.g. bundled payments, capitations) of all types will center on hybrid accountability payments
- Cautionary Note: participation during early years may lead to higher costs rather than lower costs.
- Applications investments are a key enabler for care giver communication across the spectrum of care



Brian Rucco collaborates with healthcare providers, insurers and industry watchdog organizations producing fact based insights about rapidly changing local healthcare environments. Business Intelligence analyses have helped clients better *manage risk*, understand *disruptive innovation* and locate *root cause* issues through data driven analyses.
