LifeBridge Health Medicare Shared Savings Program ACO

Key Points

LifeBridge Health registered with CMS to form a “Medicare Shared Savings Program” Accountable Care Organization (ACO) beginning in January 2015. In doing so, LifeBridge sought to ensure we can maximize the potential benefits associated with high quality, efficient care delivered to our Medicare beneficiaries, while minimizing potential risks and reporting burden in the context of a rapidly evolving health care payment and delivery environment.

What is a Medicare Shared Savings Program/ACO?

- The Centers for Medicare & Medicaid Services established the Medicare Shared Savings Program ACO model under the Affordable Care Act. An ACO refers to a group of hospitals, physicians, and others involved in patient care that work together to coordinate care for the Medicare Fee-For-Service patients they serve.
- The goal of an ACO is to deliver seamless, high-quality care for Medicare beneficiaries, instead of the fragmented care that can result from a Fee-For-Service payment system. CMS will reward ACOs that lower their growth in health care costs while demonstrating performance on nationally accepted quality measures focused on preventive health and chronic disease management.
- 433 Shared Savings Program ACOs are in place nationally, accounting for 7.7 million assigned beneficiaries in 49 states and the District of Columbia.
- LifeBridge participates in the “Track One” type of Medicare Shared Savings Program in which participating providers and suppliers can benefit from any shared savings achieved with CMS, yet are not at risk for any shared losses.

Benefits of ACO Participation and Successful ACO Quality Reporting

- Potential for shared savings from CMS when the ACO can demonstrate lower growth in health care costs and quality measure performance.
- Removes provider/practice-level reporting burden associated with PQRS and MIPS (Merit-based Incentive Payment System) quality reporting requirements. PQRS and MIPS quality requirements are satisfied as a group when the LBH ACO successfully reports its 18 ACO quality measures annually.
- Providers in the LifeBridge ACO avoid the potential PQRS 2% penalty and the additional 4% Value Based Modifier penalty for not successfully reporting quality measures.
- ACO participation automatically satisfies a portion of the Clinical Performance Improvement category of MIPS.
- ACO quality measures are nationally accepted indicators related to preventive care and screening for and management of chronic conditions. Improvement on ACO measures can serve double-duty in achieving goals for other payers and among other existing and upcoming provider-based quality measurement initiatives.
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LifeBridge’s Medicare Shared Savings Program/ACO – Current Status

**Calendar Year 2015**

- 2015 was LifeBridge’s first year in the Medicare Shared Savings Program. Our ACO encompassed most LifeBridge-employed providers and over 15,000 CMS-attributed Medicare beneficiaries who received the bulk of primary care services from one or more of LifeBridge providers.
- LifeBridge successfully met its ACO quality measure reporting requirement for 2015. Performance on 17 clinical quality measures for a CMS-selected sample of attributed beneficiaries—approximately 2,300 cases—was abstracted by manual chart review and submitted to CMS.
- The ACO quality requirement in Year 1 (2015) was for reporting only. In Years 2 and 3, CMS will assess our performance on quality measures compared to national benchmarks.

**Calendar Year 2016**

- In 2016, LifeBridge’s ACO includes all LifeBridge-employed providers and over 24,000 CMS-attributed Medicare beneficiaries (note: does not include Carroll, which has its own ACO).
- Focus areas for quality measure performance improvement include:
  - Depression Screening and Follow Up - PHQ 2/9 (ACO #18)
  - Documentation of Current Medications in Medical Record (ACO #39)
  - Screening for Future Falls Risk (ACO #13)
  - Diabetes Eye Exam (ACO #41)
  - Influenza Vaccination (ACO #14)

**Going Forward**

We aim to further engage you and provide regular communications about priorities, best practices, our progress, and how we can work together to ensure the best care for our patients.

**For Additional Information**

- CMS Medicare Shared Savings Program – “Fact Sheet” for ACO Providers
  [https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Downloads/ACO_Providers_Factsheet_ICN907406.pdf](https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Downloads/ACO_Providers_Factsheet_ICN907406.pdf)

- CMS Medicare Shared Savings Program Main Website
  [https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html?redirect=/sharedsavingsprogram](https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html?redirect=/sharedsavingsprogram)

- LifeBridge ACO Website [http://lifebridgehealthaco.org/ACO/ACO.aspx](http://lifebridgehealthaco.org/ACO/ACO.aspx)