

Sixth National ACO Summit

Wednesday, June 17, 2015

Preconference

4:05–4:50 PM Current State of ACO Analysis

S. Lawrence Kocot, JD, LL.M., MPA, Visiting Fellow, Economic Studies, The Brookings Institution, Principal and National Leader, Center for Healthcare Regulatory Insight, KPMG, Former Senior Advisor to the Administrator, CMS (Moderator)

1. **Michael E. Chernew, PhD**, Leonard D. Schaeffer Professor of Health Care Policy, Director of the Healthcare Markets and Regulation (HMR) Lab, Department of Health Care Policy, Harvard Medical School
2. **David B. Muhlestein, PhD, JD**, Senior Director of Research and Development, Leavitt Partners, LLC
3. **Michael Taggart, FSA**, Actuary, Standard & Poors Indices

Panel Overview

Over 750 accountable care organizations (ACOs), including both public and private payer arrangements exist, span the majority of states and cover a population of over 23.5 million. While there has been significant interest and activity in ACOs reflected in increased payer participation and covered lives, ACOs have shown mixed early results in improving quality while lowering costs. To date, the Medicare Shared Savings (MSSP) and Pioneer ACO Programs have generated a total of \$817 million (\$372 million saved by Medicare and another \$445 in shared savings to ACOs.) Approximately one-quarter of MSSP participants qualified for shared savings with significant variance in performance on quality as measured by scores ranging from the 30th percentile to as high as the 90th percentile. While many of those earning shared savings were physician-led ACOs, more insight can be gained with the release of second year results. As for the Pioneer program, ACOs achieved about a one percent lower spending trend overall during the first two years for their Medicare population compared to those in fee-for-service. Interestingly, MSSP participants, on average, improved quality of care to a greater degree than Pioneer ACOs. Variance in savings and quality improvement is even more pronounced among commercial ACOs. This panel will explore the current state of analysis as it relates to various types of ACOs, insights gained and how current trends may foreshadow future results.

Core Questions

- What types of methods and tools are being used to track and analyze ACO activity?
- What are current research gaps and how can those be addressed?
- How do trends in cost savings and quality improvement for commercial ACOs differ from those observed in Medicare and Medicaid ACOs?
- How do emerging Medicaid ACOs differ from Medicare and Commercial ACOs?
- What are possible reasons for why the majority of Medicare Shared Savings Program participants have not qualified for shared savings?
- How do emerging Medicaid ACOs differ from Medicare and Commercial ACOs?

- 4:15 PM**
Focus **S. Lawrence Kocot, Brookings (Moderator)**
Larry will provide brief introductions and opening remarks.
- 4:20 PM**
Focus **Michael Chernew, Harvard Medical School**
Michael will discuss his recent analysis of Pioneer ACO program performance.
- 4:25 PM**
Focus **David B. Muhlestein, Leavitt Partners**
David will discuss his work with Leavitt Partners on tracking ACO activity. He will discuss use of qualitative methods, including surveys as well as mixed methods research to identify opportunities for ACOs to obtain savings while improving quality.
- 4:30 PM**
Focus **Michael Taggart, Standard & Poors Indices**
Michael will discuss the suite of tools available to track current market trends and how insight gained can be used to strategically draft risk contracts.
- 4:35 PM** **Q&A**