

News Release
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NAACOS Tells Congress to Incentivize ACO Participation in House Hearing *Hearing Gave Opportunity to Share How ACOs Are Improving Patient Care*

WASHINGTON – The National Association of ACOs (NAACOS), represented by Senior Vice President Aisha Pittman, [testified](#) today before the House Energy and Commerce oversight and investigations subcommittee on the ways to bring better value to Medicare through lower costs and higher quality.

The [hearing](#), titled “MACRA Checkup: Assessing Implementation and Challenges That Remain for Patients and Doctors,” provided a chance to speak about how payments to doctors should incentivize providing better quality care that effectively uses taxpayer dollars and makes Medicare more sustainable.

“While MACRA was a step in the right direction, more needs to be done to drive long-term system transformation,” Pittman wrote in her testimony. “Lawmakers must work to stabilize Medicare’s payment system. This means ensuring adequate provider payment is paired with appropriate financial incentives and regulatory flexibility that will encourage more participation in payment models where the value of care provided is rewarded over volume.”

Pittman outlined five ways Congress can help this continued transition:

- Better incentivize participation in alternative payment models (APMs) by extending the annual 5 percent payment offered by Congress in the original Medicare Access and CHIP Reauthorization Act of 2015.
- Develop a long-term approach that provides adequate provider payment and provides incentives to participants in APMs, and Advanced APMs.
- Permanently embed successful aspects of CMS Innovation Center models into Medicare via the Medicare Shared Savings Program. These include a full-risk track, population-based payments for primary care, and waivers.
- Better align the incentives between Medicare Advantage (MA) and APMs in traditional Medicare so that APMs can provide comparable benefits to those offered MA patients, such as telehealth visits, transportation benefits, home visits, etc.
- Ensure that models coming out of the CMS Innovation Center have a more predictable pathway for being implemented and becoming permanent and are not cut short due to overly stringent evaluation criteria.

“When MACRA became law, CMS estimated that the share of Medicare physician dollars in APMs would increase to 60 percent in 2019 and to 100 percent by 2038,” Pittman wrote in her testimony.

“Unfortunately, uptake of these models has been slower than originally projected, but the MACRA incentive has contributed to growth.”

Today, ACOs account for more than 90 percent of Medicare’s advanced APMs. Medicare’s incentive payments have been reinvested in patient care, funded wellness programs, provided patient transportation and meals, and used to hire patient care navigators and retain staff.

ACOs have generated over \$17 billion in gross savings for Medicare over the last decade and improved the quality of care for millions of patients. More than 13 million beneficiaries are cared for by an ACO today, making it far and away the largest APM in Medicare. More than 700,000 physicians and other non-physicians participate in Medicare ACOs.

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About NAACOS. The National Association of ACOs (NAACOS) represents more than 8 million beneficiary lives through Medicare’s population health-focused payment and delivery models. NAACOS is a member-led and member-owned nonprofit of more than 400 ACOs in Medicare, Medicaid, and commercial insurance working on behalf of health systems and physician provider organizations across the nation to improve quality of care for patients and reduce health care cost.