

Medicare ACO  
Beneficiary  
Board Representative  
Orientation Video





# LEARNING OBJECTIVES



## In this video you will learn:

1. What “value-based care” is and how accountable care organizations (ACOs) affect patient care and the health care system.
2. Key concepts about Medicare ACOs, including their history and the current state of the programs.
3. How to be an engaged patient representative and why patient engagement is needed to improve health care.
4. Where to find resources to learn more about ACOs, enhance your participation, and stay connected.

# MEET THE SPEAKERS

These experts will guide you through our topics!



## **Dr. Mark Gwynne**

President, UNC Health Alliance

Associate Professor, Dept of Family Medicine  
University of North Carolina Chapel Hill

President of UNC Health Alliance, University of North Carolina's statewide Clinically Integrated Network, Medicare Accountable Care Organizations and Population Health Services. Dr. Gwynne brings executive experience developing high value clinical integration and data driven, value-based care to complex patients across diverse geographic regions. Dr. Gwynne believes that the foundation for transforming health outcomes lies in the interface between health systems and the patients, families and communities whom they serve. To that end he has developed patient advisory councils, helped craft state policy addressing accountable communities and directly engaged community leaders to deliver appropriate, accessible care. Board-certified in Family Medicine, Dr. Gwynne continues his patient care and serves as an Associate Professor of Family Medicine at the University of North Carolina School of Medicine.



## **Gwen Darien**

EVP, Patient Advocacy, Engagement, and Education  
Patient Advocate Foundation

Gwen Darien is a longtime patient advocate who has played leadership roles in some of the country's preeminent nonprofit organizations. As executive vice president for patient advocacy, engagement and education at Patient Advocate Foundation, Gwen leads programs that link Patient Advocate Foundation's direct patient service programs to system change initiatives, patient education and patient advocacy with the goal of improving access to equitable, affordable, quality health care. As a three-time cancer survivor herself, Gwen came into cancer advocacy expressly to change the experiences and outcomes for the patients who came after her and to change the public dialogue about cancer and other life-threatening illnesses.



## **Mariella Cummings**

Medicare Beneficiary and Consumer Advocate  
Retired health executive

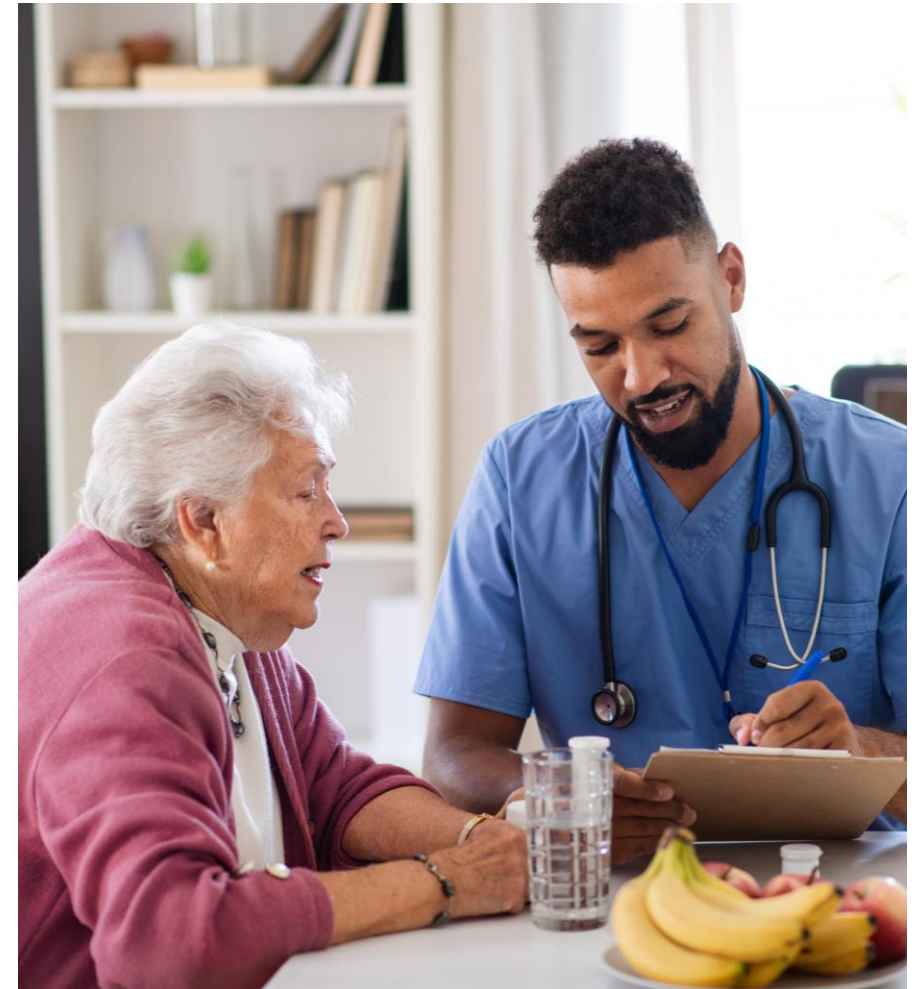
Mariella Cummings recently retired after 60 years of executive leadership in hospitals, health plans, public health, an IPA as a healthcare management consultant through her own business and as an APC Consultant. She has spoken frequently at regional and national health care conferences. Currently she serves as Consumer Advocate on the board of a REACH Model ACO and community board member for a local hospital system. She is committed to population health and the health delivery transformation associated with its success.

# Background, History of ACOs, & Physician Perspective

Mark Gwynne, DO

# VALUE-BASED CARE (VBC) OVERVIEW

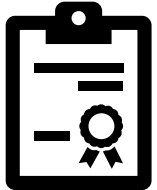
- Health care in the U.S. has focused more on treating patients when they are sick instead of working to keep them healthy and avoid preventable illness.
- [Public opinion research](#) shows that patients want high-quality, affordable, personalized health care, but don't necessarily know what "value-based care" means.
- Patients are an integral part of VBC and should be part of defining what value is, such as
  - ✓ **Outcomes that align with patient goals**
  - ✓ **Personalized care plans that meet patients' needs and preferences**
  - ✓ **Prevention and management of health issues to keep patients healthy and out of the hospital**



# ACCOUNTABLE CARE ORGANIZATIONS (ACOs)



**BETTER CARE &  
INCREASED ACCESS  
TO PREVENTIVE  
SERVICES**



**IMPROVED  
OUTCOMES &  
HIGHER QUALITY**



**REDUCED AVOIDABLE  
COSTS & SAVINGS  
FOR INDIVIDUALS AND  
HEALTH SYSTEM**

- An ACO is a group of doctors, hospitals, and other health care professionals that agree to work together to give patients high-quality, coordinated care to improve health outcomes and avoid unnecessary costs.
- ACOs are responsible for patients who are “assigned” to them, based on where patients have historically received primary care or if they elect to be part of the ACO.
- ACOs are responsible for the quality and total cost of care for their patients.
  - If spending is lower than estimated, the ACO may receive some of the savings.
  - If spending is higher, the ACO may owe money to the payer (e.g., Medicare).
  - ACOs are measured on the quality of care they provide, so cost savings are achieved by improving coordination and prevention, not by reducing needed care.



# ACCOUNTABLE CARE ORGANIZATIONS (ACOS)

- The ACO model is not just a new way to pay for health care, it allows doctors to transform their staff and delivery model to provide better care for patients.
- ACO care teams can include physicians, nurses, care coordinators, behavioral health specialists, social workers, community health workers, pharmacists, medical assistants, and more—all working together to help patients achieve their health goals.
- This team-based approach is more efficient and allows primary care providers to spend more time with patients, which promotes job satisfaction and helps address primary care workforce shortages.



# MEDICARE ACOS: HISTORY & CURRENT STATE

- Providing high quality care and bending the Medicare cost curve are essential to making sure Medicare is available to patients for decades to come, which is why ACOs have had bipartisan support in the federal government for nearly 20 years.
- The Medicare program has a goal to have every beneficiary in accountable care by 2030.
- Over 700,000 physicians and other health care professionals have chosen to participate in a Medicare ACO, as well as more than 1,450 hospitals!

## *Current Medicare ACO programs:*

Medicare Shared Savings Program (MSSP)	ACO Realizing Equity, Access, and Community Health (REACH) Model
The largest and only permanent ACO program in Medicare serves nearly 11 million Medicare beneficiaries as of 2024	The newest ACO program being tested by the Medicare Innovation Center serves nearly 2 million Medicare beneficiaries



# COMMON MISUNDERSTANDINGS ABOUT ACOs

<i>MYTH</i>	<i>FACT</i>
ACOs are health insurance plans.	ACOs are not insurance plans, they are groups of health care providers that contract with a health insurer to coordinate care for patients.
ACOs are part of Medicare Advantage.	Medicare ACOs are part of traditional Medicare, not Medicare Advantage. ACOs may contract with other payers like MA or commercial insurance plans.
ACOs can limit patients' choice of providers.	Medicare ACOs do not limit patients' choice of providers or require additional steps to access care. Primary care clinicians in an ACO may recommend other ACO providers to help coordinate patients' care, but patients can still choose to see any provider that accepts their insurance.
ACOs save money by reducing care.	ACOs create savings by increasing access to high-value preventive services. Patients in an ACO keep all the same health benefits and may receive extra services at no cost.
ACOs' only focus is to save money.	ACOs have <a href="#">proven to improve quality</a> , outcomes, and care experiences for patients while controlling costs. ACOs lower costs by keeping patients healthy.

# PHYSICIAN PERSPECTIVE



- Physicians want to provide the best care possible – accessible, affordable, high-quality care
- Value-Based Care allows us to find trends that we can change not only for one patient, but for a population
- Value-Based Care allows us to address some of the key drivers of poor health outcomes, like behavioral health, lack of nutritious food or transportation and many others
- Physicians and care teams see Value-Based Care as their hope to change our healthcare system to care for patients with means, as well as for our most vulnerable patients who fall through the gaps in our system

# THE IMPORTANCE OF PATIENTS' VOICES

Gwen Darien



# WHAT IS PATIENT ENGAGEMENT?

- Patient engagement is the process of building the capacity of patients, families, caregivers, as well as health care providers, to facilitate and support the active involvement of patients in their own care to enhance safety, quality and people-centeredness of health care delivery
- Underlying goal: facilitation and strengthening of the role of those using health care services as co-producers of health, and health care policy and practice
- Engagement examples: shared decision making, representing patients on an ACO board, participating in a patient advisory council, partnering in research
- Patient engagement:
  - Ensures that patients goals and priorities drive care decision and improves health outcomes for patients
  - Improves experiences for health care providers
  - Improves experiences for patients, families, and caregivers

# HOW TO BE AN ENGAGED ADVOCATE

Engaged Advocates elevate patient and caregiver voices to understand values, preferences, concerns and real-life experiences with health and the health care system—we do not speak on behalf of patients, we facilitate the amplification of their voices

- All advocacy is about having a voice and taking action
- Amplify and legitimize patients' experiences with health care and their voices in the public domain
- Advocacy requires information, preparation and skills
- Advocacy required active listening and continual learning

# THE ROLE OF PATIENTS IN VBC

- The overall goal of VBC across different sectors in health care is to focus on health instead of just procedures.
- For VBC to be successful, patients must have an active role in defining what the “value” in VBC means.
- [Public research](#) has found that consumers want health care that is:
  - Higher quality
  - Affordable and accessible
  - Personalized, whole-person care
  - Coordinated and efficient



# HOW ACOs AFFECT PATIENTS



- ACOs enable health care providers to work as a team to coordinate care and better manage chronic conditions, leading to healthier lives and less money spent on health care.
- ACOs aim to lower costs by avoiding unnecessary services or duplicate tests, helping patients find affordable treatment options (like lower cost prescriptions, telehealth appointments, or connections to assistance programs), and keeping patients healthy.
- Patients continue to get all the same health benefits if they are part of an ACO, and depending on the ACO, patients may also receive extra benefits for free such as:
  - ✓ *personalized care coordination,*
  - ✓ *chronic disease management rewards,*
  - ✓ *transportation to appointments,*
  - ✓ *care in more convenient settings like at home or through telehealth,*
  - ✓ *extra support through care transitions,*
  - ✓ *reduced or no out-of-pocket payments for some services, and more!*

# MEDICARE ACO BENEFICIARY BOARD REPRESENTATIVES

Mariella Cummings

# JOINING AN ACO BOARD: WHAT TO KNOW

1. Understand that you were invited to take on this important position because of the value of your experiences and perspectives.
2. It might take awhile for you to get comfortable in the role, and you can rely on the other board members to support you in the learning curve.
3. Don't be intimidated by others at the table—you were selected for this role because you have expertise, and your opinions and questions are as important as the other board members'.
4. Pay particular attention when issues arise with how the ACO relates to its patients and/or providers. Patients may call with questions or concerns about correspondence, provider relations, and compliments and complaints.
5. Even experienced health professionals on the ACO board are exposed to new information on a regular basis. Anticipate ongoing education.



# WHY YOUR INVOLVEMENT MATTERS

Patient feedback helps ACOs better understand how they can meet patient needs and preferences. Among others, ACOs focus on learning about:

- ✓ Patient preference for communications,
- ✓ New programs or initiatives,
- ✓ Care experiences,
- ✓ Personal stories about patients' health care journeys and outcomes from being part of an ACO.



# MAXIMIZING YOUR CONTRIBUTIONS

## *How to be an effective patient representative*

- Ask for a formal orientation to the ACO board that includes its history, challenges and successes;
- Ask for a mentor to work with you before and after meetings for at least a year;
- Triggers that may raise questions can include:
  - annual written information to each aligned beneficiary;
  - changes in the number of participating providers and the impact on timely appointment access;
  - changes to supplemental benefits;
  - reports from the ACO Compliance Officer related to CMS audits and other issues;
  - reports from the medical department; and
  - changes in the number of aligned beneficiaries, as well as their demographics and chronic disease burden.

# LOOKING AHEAD

- We want to see Medicare do more to educate and support beneficiaries in these roles.
- Goals:
  - ✓ Annual education forum for consumer advocates and patient representatives for training and information on updates to Medicare and the ACO programs.
  - ✓ National network of consumer advocates and beneficiary representatives for regular peer learning and support.
  - ✓ Create a pipeline of engaged patient advocates to serve as patient representatives and train new patient representatives.
  - ✓ National directory of ACO providers so that patients can seek out and ask for this care model.



# RESOURCES AND SUPPORT

## **Resources:**

- [Glossary of Key Terms and Acronyms](#)
- [Patient Advocate Foundation: Advocacy Curriculum: A Training Series](#)
- [ACOs & Patients: Care Focused on Individuals](#)
- [CMS Innovation Center: Value-Based Care Spotlight](#)
- [Person-Centered Care as a Cornerstone of Value-Based Payment: Five Guiding Principles](#)
- [Key Terms & Resource Directory for Equity-Centered Payment Reform](#)

## **Helpful Organizations:**

- [Center for Medicare Advocacy](#)
- [Patient Advocate Foundation](#)
- [National Association of ACOs](#)
- [Institute for Patient- and Family-Centered Care](#)
- [United States of Care](#)
- [Community Catalyst](#)

THANK YOU!

[www.naacos.com](http://www.naacos.com)