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Accountable Care Across the Continuum: Integrating Post-Acute Care Providers

 While there has been a lot of focus on ACO's and care coordination in the primary care and hospital settings since the enactment of the Affordable Care Act, there has been a greater focus more recently on the role of post-acute care providers in the ACO model. From contracted relationships to informal "partnerships" to full integration, ACO's are taking note of the opportunity for cost savings by expanding their efforts to the post-acute care setting. Hospital systems that own post-acute care organizations are doing away with the traditional fragmented care approach and are including the

post-acute providers in ACO operations discussions. As a result, new roles are emerging, such as the new “transitions of care” coordinator. Plus, care delivery in the post-acute setting is being redesigned to support a new care delivery model, and data analytics capabilities are being expanded to incorporate the post-acute setting.

This expansion is not without legal and compliance challenges. While CMS offers fraud and abuse waivers for participants in the Medicare Shared Savings and Pioneer ACO Programs, the waivers are not explicitly applicable to the commercial setting and thus careful planning needs to be undertaken to ensure compliance with fraud and abuse laws as well as HIPAA and other state laws. There are traps for the unwary, which, while not insurmountable, should not be taken lightly as penalties can be severe. Proper legal guidance is a must.

Teaming up with the right post acute care providers is critical as providers look to expand care across the continuum. Providers should share the long-term strategic plan of the ACO as well as its overall mission, but the relationship should have as a foundational goal a commitment to deliver the right care at the right place at the right time. Proper structuring of the agreements between the providers as well as payor contracts can ensure that the post-acute care providers are compensated accordingly for their efforts in a manner that complies with applicable laws as well as the opportunity to share in any savings that may be available. Quality improvement and cost reduction efforts – which are goals of the ACO – will be supported by avoiding readmissions; providing care in the most appropriate, lowest cost setting; and achieving overall improvement in care coordination.

A robust ACO network that is successful in providing high quality, lower cost care that spans the entire continuum adds tremendous value to the network from a payor contracting perspective. Patients also benefit, as they become more in charge of healthcare spending in the post-reform era.

South Florida Hospital News and Healthcare Report's number one goal is top quality healthcare journalism written and edited for the region's most successful, powerful healthcare business executives and professionals.



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