

## ACPM NEWS on HEALTH SYSTEMS TRANSFORMATION

## Register Now! ACPM Hosting Three Listening Sessions On 6|18 Initiative

ACPM and the Centers for Disease Control and Prevention (CDC) are hosting three in-person [listening sessions](#) to explore the role of providers in implementing the [CDC's 6|18 Initiative](#). If you are involved or interested in preventing or addressing any of the initiative's six priority health conditions—

asthma, high blood pressure, diabetes, healthcare-associated infections, tobacco, or unintended pregnancies—we want to hear from you! These sessions are a rare opportunity for providers to engage in in-depth discussions and identify ways to address barriers to implementing this initiative. Many of these barriers were identified in a survey disseminated to members in October.



To promote maximum participation, we have limited each session to 40 participants and spaces are filling up fast! *Locations and dates for the listening sessions are listed below.* **There is no cost to attend and physicians can earn up to 4 CME/MOC.** You can also download the [flyer](#) and share with your networks.

- New York City, February 3 (held at NYC Dept. of Health)
- Houston, February 24 (co-hosted by University of Texas at Houston OM Program)
- Atlanta, February 28 (co-hosted by Emory University PM program)

**Special Opportunity for Residents:** We encourage residents to participate in the listening sessions. This unique opportunity offers several benefits:

1. Network with other preventive medicine physicians to provide input, directly to CDC officials, on the role of physicians in implementing the 6|18 initiative
2. Ability to obtain 4 CME at no cost
3. Participate in discussions, take notes, synthesize themes and salient points to be incorporated into the final report
4. Potential acknowledgement in ACPM position statement on 6|18 initiative; currently in development

## FEATURED HST NEWS

### Transforming Health Care Delivery through the CMS Innovation Center: Better Care, Healthier People, and Smarter Spending

In a recent [blog post](#), Center for Medicare and Medicaid Services (CMS) Acting Principal Deputy Administrator Patrick Conway, MD, highlighted the importance of Center for Medicare and Medicaid Innovation (Innovation Center) in the development



of alternative payment models.

The Innovation Center has enhanced the quality of health care delivered while not increasing costs for Medicare, Medicaid, and Children's Health Insurance Program (CHIP) beneficiaries. The Innovation Center takes locally-driven approaches – from doctors and other health care partners providing care to patients every day – and gives them the platform to be tested through a collaborative process.

CMS met its goal of tying 30 percent of Medicare fee-for-service payments to an alternative payment model by the end of 2016 in March of that year. In the blog post, Dr. Conway attributes the success of this goal to the Innovation Center. CMS is also on track to hit its goal of linking 50 percent of Medicare payments to alternative payment models, many developed by the Innovation Center, by end of 2018.

## Medicare-Medicaid Accountable Care Organization (ACO) Model

The [Medicare-Medicaid ACO \(MMACO\) Model](#) is focused on improving quality of care and reducing costs for Medicare-Medicaid enrollees. The MMACO Model builds on the Medicare Shared Savings Program (Shared Savings Program), in which groups of providers take on accountability for Medicare costs and quality of care for Medicare patients. Through the Model, CMS will partner with interested states to offer new and existing Shared Savings Program ACOs the opportunity to take on accountability for the Medicaid costs for their assigned Medicare-Medicaid enrollees.



States may choose from three options for when the first 12-month performance period for the Medicare-Medicaid ACO Model will begin for ACOs in the state: January 1, 2018; January 1, 2019; or January 1, 2020. States that choose 2018 as their performance period must submit [Letters of Intent](#) by **January 20, 2017**. You can [access more information](#) including fact sheet, press release and frequently asked questions about the model.

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## WHAT WE ARE READING

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### After Obama, Some Health Reforms May Prove Lasting

Transformation of healthcare delivery may survive even as the repeal of the Affordable Care Act is imminent, writes Abby Goodnough and Robert Pear, in [an article](#) that highlights the healthcare successes of the Obama administration.

### A Bipartisan Reason to Save the Affordable Care Act

A [New York Times opinion article](#) discusses how the Affordable Care Act and Medicare and CHIP Reauthorization Act (MACRA), have allowed physicians to transition from fee-for-service to value-based care. This was possible through the Center for Medicare and Medicaid Innovation that has partnered with states and providers to test numerous payment and delivery reform demonstration projects.

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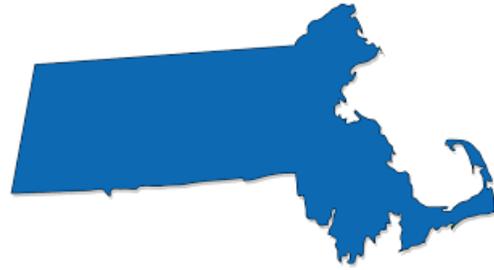
## HST in PRACTICE

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### Alternative Quality Contract in Massachusetts

According to a [study](#) published in *Health Affairs* in January, Blue Cross Blue Shield of Massachusetts' innovative payment model,

the [Alternative Quality Contract \(AQC\)](#), improved the quality of care for all members, with the greatest gains for members from lower socioeconomic backgrounds. The study compared changes in clinical quality, health outcomes, and total spending between enrollees in areas with lower and higher socioeconomic status (SES), between 2006-2012, before and after their physicians entered the AQC. It



concludes that while spending for lower and higher SES patients in the AQC was similar, quality improvements were greater for lower SES patients in the AQC compared to higher SES patients. The AQC now includes 90% of physicians and hospitals in the Blue Cross HMO Network. It is currently one of the largest private payment reform initiatives in the United States and has become a model for state and national policymakers.

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## RESOURCES

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### U.S. Department of Health and Human Services as Nation's Chief Health Strategist - Transforming PublicHealth and HealthCare to Create HealthyCommunities

In September 2016, a group of public and private thought leaders in healthcare and public health published a [report](#) under the auspices of [Public Health Leadership Forum](#) on how the U.S. Department of Health and Human Services (HHS) can serve as the nation's Chief Health Strategist to ensure that *America's communities are places that provide every person with the opportunity to achieve optimal health and are served by a strong public health infrastructure*. The report was funded by Robert Wood Johnson Foundation



### Innovation Spotlight - Triple Aim

Healthcare Association of New York State has created a clearinghouse, [Innovation Spotlight - Triple Aim](#), that allows hospitals, nursing homes and home healthcare agencies to share how they pursue and achieve *the triple aim* of improving population health, enhancing quality of patient care, and reducing per capita cost of healthcare. [Access](#) numerous case studies from healthcare organizations throughout New York State.



Healthcare Association  
of New York State

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## ABOUT ACPM HEALTH SYSTEMS TRANSFORMATION PROJECT

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### Learn More & Get Involved

ACPM defines Health Systems Transformation (HST) as a systems-based approach to improving population, community and individual health by incorporating the determinants of health and increasing the efficiency and effectiveness of healthcare.

The Health Systems Transformation Project is from a cooperative agreement that ACPM has with the Centers for Disease

**HEALTH SYSTEMS  
TRANSFORMATION**



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Control and Prevention.

[Learn more](#) about our past and current efforts in HST:

See our HST [fact sheets](#) , [resources](#) and [regional meetings](#); pages on [HST Learning Institute](#) and [HST webinar](#); HST Task Force member [bios](#); and past [newsletters](#).

Coming Soon: Access recordings from the HST institute (Feb 2016) and HST webinar (June 2016). [Check back](#) in February to learn about CME/MOC for these activities.

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