CMS Perspective:

Accountable Health Communities Model (AHC)

First Evaluation Report

December 2020

For information on the model and to download the independent evaluation report discussed in this document, please visit

https://innovation.cms.gov/innovation-models/ahcm





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The Accountable Health Communities (AHC) Model tests whether systematically identifying and addressing certain health-related social needs (HRSNs) of Medicare and Medicaid beneficiaries through screening and community navigation services reduces health care costs and utilization. The AHC Model's first annual evaluation report shows some promising findings from the first 18 months of model implementation as well as areas for improvement as the model continues.

The AHC Model is identifying high-need Medicare and Medicaid beneficiaries and showing early signs of reducing emergency department use among Medicare beneficiaries. These two findings reinforce the model's value and are responsive to calls for further research on effective approaches to social risk identification and resolution. For example, the Office of the Assistant Secretary for Planning and Evaluation's Report to Congress on Social Risk Factors and Performance in Medicare's Value-Based Purchasing Program¹ and a consensus report from the National Academies of Sciences, Engineering and Medicine² note a continued need to identify and scale effective interventions that aim to address social risk factors. Similarly, U.S. Preventive Services Task Force has noted that the AHC Model may inform future recommendations on how to better account for social risk.³ To support further research on this topic, CMS is exploring public release of AHC Model data.

The report also finds that beneficiaries are accepting community navigation services at higher rates than anticipated, but identifying eligible beneficiaries and implementing navigation services effectively is a challenge. Through targeted peer-to-peer learning and technical assistance opportunities, CMS is sharing with the bridge organizations the report's findings on common barriers and emerging best practices in implementing universal HRSN screening and providing community navigation services. In close collaboration with other federal and external partners, CMS is also publishing case studies and a guide to HRSN screening best practices that highlight information gleaned and lessons learned from model implementation and evaluation. In response to challenges cited in the report, CMMI has also allowed for additional screening flexibility and start-up time in other models that incorporate social needs screening such as the Integrated Care for Kids and Maternal Opioid Misuse Models.

This report offers updated information on select social needs of Medicare and Medicaid beneficiaries as identified by the AHC model. The AHC HRSN Screening Tool, which was used to identify certain HSRNs among Medicare and Medicaid beneficiaries, is available for use in the field to identify social risk factors such as food insecurity, and the Agency for Health Research and Quality and CMS are integrating questions from the AHC HRSN Screening Tool into their Medical Expenditure Panel Survey and Medicare Current Beneficiary Survey, respectively. CMS and HHS are also working on efforts to standardize social

¹ Report to Congress: Social Risk Factors and Performance in Medicare's Value-Based Purchasing Program The Second of Two Reports Required by the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014. March 2020. Available at: https://aspe.hhs.gov/pdf-report/second-impact-report-to-congress

² National Academies of Sciences, Engineering, and Medicine. 2019. Integrating social care into the delivery of health care: Moving upstream to improve the nation's health. Washington, DC: The National Academies Press. https://doi.org/10.17226/25467.

³ Developing Primary Care—Based Recommendations for Social Determinants of Health: Methods of the U.S. Preventive Services Task Force. Annals of Internal Medicine. 15 September 2020. Available at: https://www.acpjournals.org/doi/pdf/10.7326/M20-0730

determinants of health data to improve interoperability. These findings and efforts will inform future agency-wide efforts to better understand the role social risk plays in health outcomes.

As Secretary of Health and Human Services Azar highlighted in March 2020 remarks, the AHC Model is pioneering the Department of Health and Human Services's approach to addressing social determinants of health, in a way that recognizes that every person has unique social service needs and strengthens ties between the health care sector and existing community-based organizations. The promising results in this report on emergency department use among Medicare beneficiaries suggest that better identifying and addressing social needs is critical to the transition to value-based care, and has the potential to reduce health care costs and improve utilization patterns. Once results from the Medicaid analyses are complete, we hope to observe similar promising results as we saw in the Medicare population, along with declining health care expenditures. If we do not observe that the model has had the desired impact on expenditures, CMS will need to assess the next steps for the model in the context of other efforts to address social determinants of health.