

ACO Investment Model (AIM)

Final Evaluation of Three AIM Performance Years

Findings at a Glance

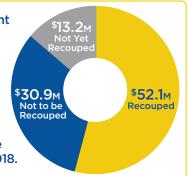
Model Overview

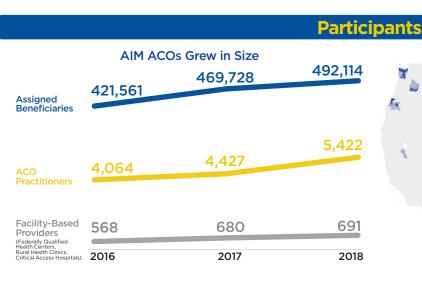
The Accountable Care Organization (ACO) Investment Model (AIM) operated under the Shared Savings Program (SSP) from 2015 to 2018. AIM provided up-front payments to select ACOs to invest in infrastructure and staffing. It targeted:

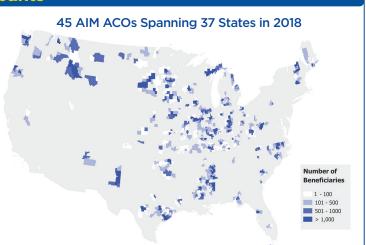
- New ACOs to encourage their formation in rural or low ACO penetration areas (41 AIM Test 1 ACOs began in 2016).
- Existing ACOs that were small to encourage their continued participation and transition to two-sided financial risk (6 AIM Test 2 ACOs began in 2015 or 2016).

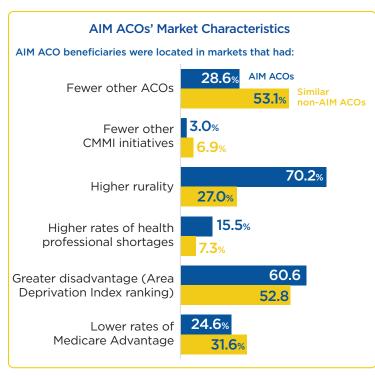
AIM ACOs received up-front payments for two years. These payments can be recouped from shared savings earned by AIM ACOs for up to six years.

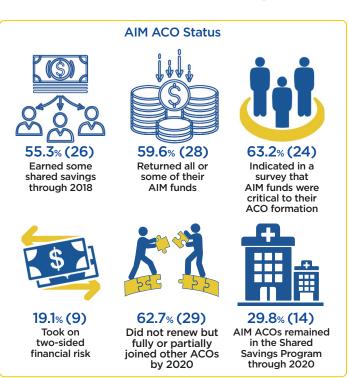
A total of \$96.2M in AIM payments were dispersed. So far, 54.2% of funds have been recouped through 2018.













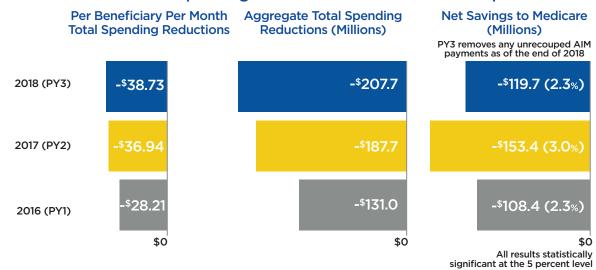
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Findings

AIM Test 1 ACOs Reduced Spending and Utilization Relative to Comparison Beneficiaries





Across all three performance years, AIM Test 1 ACOs made statistically significant reductions in several types of utilization (PY3 percentages shown):

- Spending on inpatient hospitalizations (-4.0%), hospital outpatient visits (-3.7%), skilled nursing facility stays (-7.8%), and home health episodes (-8.2%);
- Utilization of emergency department visits not resulting in hospital admission (-2.9%);
- Hospital readmissions (-4.4%).

Most AIM ACOs Reduced Spending Compared to Similar Non-AIM SSP ACOs

Most AIM Test 1 and 20 ACOs Test 2 ACOs reduced Had an inconsistent spending pattern total Medicare spending more than similar SSP ACOs from 2017 to 2018.



AIM ACOs Maintained Quality of Care

Very small differences in measures of patient/caregiver experience between beneficaries assigned to AIM ACOs and comparison beneficiaries who responded to the ACO Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.



Key Takeaways

AIM ACOs located in areas with greater health care needs and less access to accountable care. Many AIM ACOs indicated that AIM funds were critical to their formation.

AIM ACOs were successful in reducing total Medicare spending and related utilization without decreasing the quality of care they provided. AIM generated net savings to Medicare during each of the three performance years.

Most AIM ACOs ended participation in the Shared Savings Program at the end of 2018. However, many of their providers partially or fully joined other SSP ACOs in 2019.