

## **ACO Assignment Improvement Act of 2017**

Action Requested: Cosponsor H.R. 1160, the ACO Assignment Improvement Act of 2017. This legislation would allow assignment of patients treated by PAs to Medicare shared savings ACOs.

PAs are recognized in the Medicare Shared Savings Program (MSSP) as "ACO professionals," yet their patients cannot be assigned as beneficiaries in that program. This legislation will allow Medicare beneficiaries who receive their primary care from PAs to be assigned to MSSP ACOs without arbitrarily requiring the patient to see a physician. Likewise, PAs should be recognized to lead and participate fully in the design, management, and operation of patient-centered medical homes and ACOs.

**Background:** Under current law, Medicare fee-for-service beneficiaries are assigned to an ACO based on their utilization of primary care services furnished by a physician. However, individuals in rural and underserved communities often rely on PAs and other advanced practitioners. As a result, the physician requirement prevents Medicare fee-for-service beneficiaries in these communities from accessing the coordinated care provided by ACOs.

The ACO Assignment Improvement Act of 2017 removes this barrier by allowing primary care services furnished by PAs and other advanced care providers to count for purposes of ACO assignment. Removing this barrier will also encourage ACO formation by helping healthcare providers attain enough ACO beneficiaries to participate in the Medicare Shared Savings Program. Through these changes, ACO assignments will be more effective for beneficiaries and providers in rural communities that suffer from acute physician shortages.

**AAPA Legislative Recommendation:** AAPA urges Congress to support the ACO Assignment Improvement Act of 2017 (H.R. 1160) introduced in the 115<sup>th</sup> Congress by Reps. Derek Kilmer (D-WA) and Lynn Jenkins (R-KS). This legislation will allow patients, including many living in rural areas, to benefit from innovation in our healthcare delivery system by allowing patients primarily served by PAs to be assigned to Medicare shared savings ACOs.

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