

January 27, 2016

Dear House and Senate Health and Welfare Committee Members:

Accountable Care Organizations (ACOs) represent a model that entrusts a group of providers with responsibility for the cost and quality of care for a population of patients. This is an emerging concept, and many questions remain about the most appropriate ways to ensure that ACOs can produce favorable quality at reduced cost.

AARP agrees with the primary goals of an ACO, improving health care quality while reducing costs by means of shared accountability. To be successful, ACOs must demonstrate their commitment to high-quality, excellent patient experience and reduced costs. More importantly, consumers must be assured access to the full continuum of care. This access includes an emphasis on a strong and stable source of primary care, opportunities to benefit from quality improvements, and savings from more effective, efficient care. ACOs also require monitoring to ensure that they provide stable, ongoing care.

AARP strongly supports the consumer protections being proposed by the Vermont Office of the Health Care Advocate. These protections include assuring there is consumer representation on ACO governing boards, accountability to quality care and positive health outcomes, provider choice and integrated care, and transparent patient grievance procedures. Consumer engagement and education are essential if Vermonters are going to understand what changes to expect from health care payment reform efforts and what their legal rights are under any new model.

Sincerely,



Greg Marchildon
AARP Vermont State Director