

## CMS Innovation Center Advertises Opportunities for "ACO Pioneers"

By Jill H. Gordon

May 23, 2011

On Friday, May 20, the Centers for Medicare & Medicaid Services published a notice in the Federal Register soliciting applications for a planned 30 slots reserved for "ACO pioneers." Reading much like a job description, CMS' notice identifies both the track record and the goals that will be evaluated to measure future performance.

CMS is looking to create a "dream team" of accountable care organizations, essentially providing another route for those entities that were held up as models for the creation of the ACO program to blaze the trail for others to follow.

CMS' ideal candidate:

- Has a demonstrated track record of coordinating care while being subject to financial risk for the cost of the care provided;
- Is willing to serve as a beacon for those who seek to attain improvements in both financial and clinical performance; and
- Has the ability to modify behavior in response to financial and clinical data.

The successful candidate's performance will be evaluated based upon the progress attained in achieving the following goals:

- The ability to transform quickly from fee-for-service to value-based coordination of care and improved outcomes;
- Demonstrating that ACOs can prosper under multiple governance structures (e.g., physician-driven) and diverse service areas (e.g., rural); and
- Proving that financial risk can be successfully managed for Medicare and non-Medicare patients alike.

To be eligible, applicants from urban areas must have a minimum of 15,000 Medicare patients; rural applicants must have at least 5,000 Medicare patients.

Final selection will be based on the quality of the application, interviews of finalists (with an eye to including diverse geographic areas), types of organizations, and types of Medicare populations served. The formulation of a care improvement plan is viewed as a plus.

The successful applicant must commit to the program from its beginning through the end of calendar year 2016.

Applicants must be able to act quickly, since the deadline to submit a letter of intent is June 10, with final applications due July 19. The [letter of intent](#) and [full application](#) are available online.

---

Please also see the advisories in our ongoing series on the newly proposed ACO regulations.

["The New ACO Regs: They're Here \(Well, Sort of ... \)" \(04.05.11\)](#)

["Antitrust Enforcement Agencies Issue Proposed Guidance on ACOs" \(04.06.11\)](#)

["What the Proposed ACO Regulations Say About Legal Structures and Governance" \(04.11.11\)](#)

["ACOs: The Fraud & Abuse Waivers – Finding a Path Through the Maze" \(04.15.11\)](#)

["Proposed Quality Measures for ACOs " \(04.18.11\)](#)

["If You Build It, Who Will Come?" \(05.02.11\)](#)

["How IRS Guidance Addresses ACO Participation for Exempt Hospitals and Other Health Care Organizations" \(05.09.11\)](#)

["Are There Enough ACO Shared Savings to Share?" \(05.23.11\)](#)

This advisory is a publication of Davis Wright Tremaine LLP. Our purpose in publishing this advisory is to inform our clients and friends of recent legal developments. It is not intended, nor should it be used, as a substitute for specific legal advice as legal counsel may only be given in response to inquiries regarding particular situations.