**News Release**

For Immediate Release

**[Day of Week, Month, Day, 2023]**

**Contact: [Name, Title, Phone Number, Email]**

**[ACO Name] Earns High Quality Marks, Saves Medicare Money**

*ACOs Improve Quality and Reduce Costs While Preserving Medicare Beneficiary Choice of Providers*

**[City and State]—**[**ACO Name**] improved care for [**number**] Medicare beneficiaries in [**community**] and saved Medicare $[**amount**] by meeting quality and cost goals in 2022, according to recently released performance data from the federal agency that administers Medicare.

The [**ACO name**] earned a quality score of [**XX**] percent on performance measures ranging from preventive health checks to use of computerized health records to preventing avoidable hospitalizations, Medicare data show. The $[**amount**] of gross savings to Medicare resulted $[**amount**] of shared savings payments to [**ACO NAME**], which will be used [**HOW**].

“When providers work together through an ACO to focus on patients and invest in care coordination, information technology and other care improvements, they can both increase quality and reduce costs,” said [**name, title, ACO name**]. “ACOs like ours are measurably improving care and saving money while maintaining patient choice of Medicare providers.”

A market-based solution to fragmented and costly care, accountable care organizations (ACOs) empower local physicians, hospitals, and other providers to work together and take responsibility for improving quality, enhancing patient experience and keeping care affordable for a defined set of patients. The Medicare Shared Savings Program (MSSP) creates incentives for ACOs to invest in care transformation by allowing them to share in savings they generate after meeting defined quality and cost goals.

In the absence of this model, we could not have been able to [**FILL IN EXAMPLES HERE**]. With the shared savings we’re getting back from Medicare, [**ACO name**] will be able to reinvest in patients, its clinicians and community by [**FILL IN EXAMPLES HERE**].

ACO providers work to ensure Medicare beneficiaries are receiving appropriate care like annual wellness visits and recommended screenings. The ACO also focuses on ensuring smooth patient transitions from the hospital to home—or a nursing home if needed. And clinicians and providers coordinate care beneficiaries receive from different primary care and specialty providers and to prevent health issues and repeat hospitalizations.

In 2022 nationally, 482 ACOs caring for 10.4 million beneficiaries participated in the MSSP, generating gross savings of $4.3 billion based on the Centers for Medicare & Medicaid Services methodology for setting financial benchmarks. After accounting for shared savings earned by ACOs, estimated net Medicare savings were $1.8 billion.

Medicare has set a goal to have all patients in an accountable care relationship by 2030. While laudable, Congress needs to provide the appropriate incentives to encourage providers to participate in ACOs. A critical incentive payment expires at the end of this year, and lawmakers must extend the 5 percent incentive payment for alternative payment models to continue the type of high-quality, efficient care being provided by ACOs across the country.

A [fact sheet](https://www.cms.gov/files/document/2023-shared-savings-program-fast-facts.pdf) with more information about MSSP ACOs is available online.

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[**Add organization description and link to website**]