**News Release**

For Immediate Release

**[Day of Week, Month, Day, 2020]**

**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 2019, 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 in a shared savings payment of $[**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.”

For example, [**ACO name**] providers work to increase the number of Medicare beneficiaries taking advantage of annual wellness visits, including recommended screenings and preventive care. The ACO also focuses on ensuring smooth patient transitions from the hospital to home—or a nursing home if needed. All ACO providers receive detailed information about their performance on quality measures. And clinicians and providers share best practices to coordinate the care beneficiaries receive from different primary care and specialty providers and to prevent health issues and repeat hospitalizations. [**ACO name**] includes [**WHO AND WHAT COMMUNITY PROVIDERS**] who serve [**COMMUNITY NAME**].

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. The Medicare Shared Savings Program (MSSP) creates incentives for ACOs to invest in transform care by allowing them to share in savings they generate after meeting defined quality and cost goals.

In 2019 nationally, XXX ACOs caring for xx million beneficiaries participated in the MSSP, generating gross savings of $X.X billion based on the Centers for Medicare & Medicaid Services methodology for setting financial benchmarks. After accounting for shared savings earned by ACOs in 2019, estimated net Medicare savings were $XXX million.

“The Medicare ACO shared savings program is the largest value-based payment model in the country and a critical tool in moving the health system toward better value,” [**name**] said.

A fact sheet with more information about MSSP ACOs is available online, along with other resources**—**[**What is an ACO?**](https://www.naacos.com/what-is-an-aco-)**—**and the[**ABCs of ACOs**](https://www.naacos.com/assets/docs/pdf/abcsofacosonepagerfinal.pdf) .

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