

How ACOs are Involving Rural Health Organizations

Part V of a Series on ACOs

To date, little is known about Accountable Care Organizations (ACOs), nor how these newly-established organizations will fare as health care reform progresses. Even less is known about the structure and impact of ACOs serving rural areas, specifically as related to RHCs, rural FQHCs, and CAHs.

However, our recent study involving interviews with ACO leaders found that many ACOs are already beginning to partner with RHCs and CAHs. The ACO leaders also reported a strong willingness to improve care, health outcomes, and accessibility to services, as well as reduce gaps in care for rural patients.

The study findings suggest that RHC and CAH participation in ACOs may grow over the next several years. Many of the ACO leaders we interviewed indicated that they have plans to expand their involvement with rural health organizations.

We found that the ACO executives were interested in:

- Assessing the risks and rewards of including rural health clinic providers in their networks
- Increasing access to chronic condition health care management and coaching for rural populations to improve their health outcomes
- Improving the value and integration of the healthcare delivery system by including more rural providers and their patients

So far, we know little about how the ACO model accommodates the unique challenges of RHCs. For this reason, researchers at the University of Central Florida's College of Health and Public Affairs are conducting an NIH-funded study to analyze the performance and outcomes of RHCs, with a particular focus on their participation in ACOs. The research team welcomes the participation of RHC personnel throughout the project. For more information on the "RHCs in ACOs" study, please contact Dr. Judith Ortiz at the Rural Health Research Group at (407) 823-6145 or via email: Judith.Ortiz@ucf.edu.

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