

# ILLINOIS RURAL COMMUNITY CARE ORGANIZATION

## Statewide Rural ACO

Illinois Rural Community Care Organization (IRCCO) was established in January 2015 as a Medicare shared savings accountable care organization (ACO). IRCCO is one of 41 ACO Investment Models (AIM) funded by CMMI. AIM seeks to encourage uptake of coordinated, accountable care in rural areas by offering pre-payment of shared savings in both upfront and ongoing per beneficiary per month payments.

**ILLINOIS RURAL COMMUNITY CARE ORGANIZATION**  
Statewide Rural Accountable Care Organization

IRCCO was established in 2015 and is an ACO investment model or AIM

- Membership includes rural hospitals, 21 CAHs, independent physician practices, RHCs and FQHCs.
- Receives pre-payment of shared savings in both upfront and ongoing per beneficiary per month payments

Added incentive comes from participating in the BCBS-IL Intensive Medical Home (IMH) program

- Beneficiaries with complex and chronic health conditions
- Financial support to the IMH provider based on the number of BCBS members enrolled
- Based on claim information filed with BCBS

Illinois Rural Community Care Organization

IRCCO is comprised of 21 critical access hospitals (CAHs) and their associated physician practices and clinics located in rural communities across the state. IRCCO has about 20,000 attributed patients and is managed by the Illinois Critical Access Hospital Network (ICAHN). The goal of the IRCCO is to learn how to function as a shared savings ACO.

Each member is required to financially support the cost of organizing as well as operating the IRCCO in years 1 and 2. Participants can be either a physician or hospital and they will share equally in their portion of any shared savings which will be based on percentage of participant fees paid. In addition, members will be rewarded when meeting quality and efficiency goals.

Uses of AIM funding include but are not limited to:

- Investments in infrastructure such as the expansion of HIT systems to include a patient portal and/or data warehouse capabilities
- Hiring of staff such as nurse case managers, executives or project directors to oversee the implementation of care coordination efforts.

IRCCO has completed its first year and has built the infrastructure and care management process to function effectively as an ACO. Through its early experience, IRCCO has a better appreciation of the need for cultural change and the importance of reducing costs and improving outcomes. The challenge going into the second year is to move from an instinct to treat a patient to one of health maintenance while securing a primary care base.

Moving forward, IRCCO will concentrate its efforts on care coordination and transitions, particularly for those with chronic diseases. Four work groups comprised of hospital and physician partners will address unnecessary ED visits, hypertension, congestive heart failure and Medicare annual wellness visits. The focus will demand a renewed emphasis on gathering and analyzing data to improve the patient experience, improve population health and reduce costs.

In addition, the IRCCO is participating in the BCBS of Illinois Intensive Medical Home (IMH) program, which is an enhanced model of primary care focusing on the high-risk chronic care beneficiaries. IRCCO is paid for nurse care management services and providers are reimbursed based on the number of BCBSIL members enrolled based on claims information.