

What's Changing in the Health Workforce in Next Generation Accountable Care Organizations?

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OBJECTIVE

This study explores key workforce strategies in Next Generation Accountable Care Organizations (Next Gen ACOs), the latest evolution in Medicare ACOs.

METHODS

We conducted semi-structured interviews with leaders from seven of the initial 18 Next Gen ACOs to better understand their perceptions regarding how workforce roles are changing to support the Next Gen ACO model. We recorded and transcribed the interviews, and subsequently reviewed texts for thematic patterns.

RESULTS

All of the ACOs emphasized the importance of team-based primary care and care coordination/care management teams. Staffing models and ratios varied across ACOs, with most roles dating back to the sites' earlier Medicare ACO and/or patient centered medical home efforts. Workforce investments were funded by the health systems in anticipation of shared savings, and in support of their ongoing transition to value based care. Bandwidth issues (lack of time amidst other demands), professional shortages and financial constraints were among the factors preventing most of the ACOs from adopting and/or fully expanding one or more envisioned workforce strategies. Informants stressed that transforming the workforce to support value-based care takes considerable time.

CONCLUSIONS

Our findings suggest that workforce investments and change management are occurring as a result of these organization's commitment to moving towards value based payments. However, findings also reveal that changes have been enabled by many generation of payment reforms, not just ACOs, and that these are taking place over an extended period of time. Given the variation in workforce staffing across sites, as well as the risk stratification approaches used, future research would benefit from standardized measurement to assess the scale and scope of workforce investments and their relationship to outcomes.

Key Words: Accountable Care Organization (ACO); team based primary care; care coordination; shared savings