

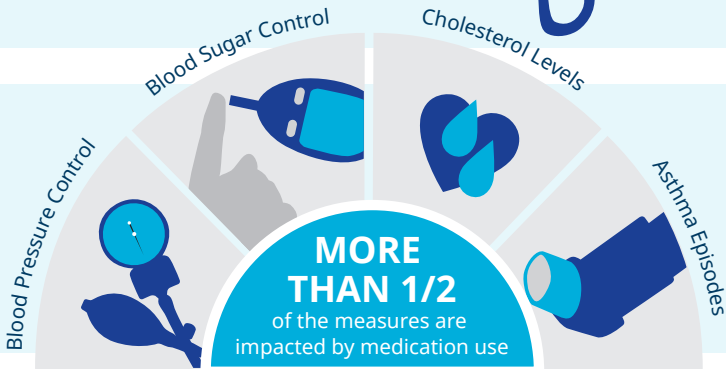
An **ACCOUNTABLE CARE ORGANIZATION (ACO)** is a group of health care providers who work to deliver coordinated care for a defined population and are collectively accountable for the cost and quality of care.



ACOs HAVE THE POTENTIAL TO improve quality of care and lower costs.



To show success,
ACOs MUST REPORT ON SPECIFIC QUALITY MEASURES.



WHY? Optimal medication use can lead to



better patient outcomes



improved patient experience



lower costs

HOW are ACOs optimizing medication use to achieve these goals?



IN A 2014 STUDY,

ACOs indicated they were effective in sending prescriptions electronically, merging data into one database and promoting appropriate use of generics.

A 2017 ANALYSIS SUGGESTS MORE ACOs ARE:

- ✓ Educating patients about medication alternatives
- ✓ Involving pharmacists in direct patient care
- ✓ Focusing increasingly on appropriate generic use
- ✓ Notifying providers of potential adverse events
- ✓ Alerting providers to gaps in preventative care
- ✓ Transmitting prescriptions for non-controlled substances electronically

ACOs FACE BARRIERS TO IMPLEMENTING MORE COMPREHENSIVE STRATEGIES FOR OPTIMIZED MEDICATION USE, INCLUDING:



Lack of reimbursement



Poor technology interoperability



Difficulty isolating cost savings from optimized medication use practices



Sources

Dubois RW, Feldman M, Lustig A, Kotzbauer G, Penso J, Pope SD, Westrich KD. Are ACOs Ready to be Accountable for Medication Use? *J Manag Care Pharm*. 2014;20(1):17-21.

Wilks C, Krisle E, Westrich K, Lunner K, Muhlstein D, Dubois R. Optimization of Medication Use at Accountable Care Organizations [published online May 30, 2017]. *J Manag Care Spec Pharm*. 2017. <https://doi.org/10.18553/jmcp.2017.17100>.