

## KACO Connections

### Welcome note

Janet Comrey,  
Operations Director  
Keystone ACO



**Welcome to the spring 2023 edition of the Keystone Accountable Care Organization (ACO) newsletter!**

This year, Keystone ACO is celebrating its 10th anniversary and is a top-ranked ACO in the Medicare Shared Savings Program. Rankings are based on savings to Medicare by ACO providers who take ownership for the total cost and quality of care for their patients.

### **Which providers participate in Keystone ACO?**

Keystone ACO delivers high-quality healthcare for a population of about 70,000 Pennsylvanians who are enrolled in original Medicare. It includes the following healthcare provider groups:

- Geisinger (Clinic and Hospitals)
- Evangelical (Clinic and Hospital)
- Family Practice Center Associates
- Wayne Memorial (FQHC and Hospital)
- The Wright Center
- Lycoming Internal Medicine
- Dr. Nicholas Dodge
- Prime Med Associates

Read on to learn more about ACOs, and specifically Keystone ACO. You'll also find tips and success stories about tobacco cessation from two beneficiaries, a recipe for a quick, light meal or snack and an introduction to our team.

Thank you,  
Janet Comrey

## What is an accountable care organization?

Accountable care organizations, or ACOs, are part of the Affordable Care Act legislation under the framework of the Medicare Shared Savings Programs. An ACO consists of a self-defined network of doctors, hospitals and other healthcare providers who work together to deliver value-based, high-quality care to their Medicare patients. The goal is to improve communications between healthcare providers and to provide team-based approaches that make sure patients receive needed screenings, checkups and patient counseling that can prevent illnesses, disease or other health problems.

When healthcare experts work together, they are more likely to give better care when it's needed. They can keep patients from having unnecessary tests or treatments and even prevent mistakes.

ACOs that provide high-quality care and lower health care cost receive earnings from CMS (Centers for Medicare and Medicaid) that is used by the ACO providers to further improve care through added resources, staff, and services. For example, patients whose healthcare provider joins an ACO may get:

- Extra help managing a chronic disease.
- Coordination between different doctors or members of their care team.
- More preventive health services to keep them healthy.
- Added recovery support when they come home from the hospital.
- Added support to receive discounts on costly medications.
- Certain telehealth waivers that allow a healthcare visit (video visit) from your home.
- Skilled nursing services at a facility without a qualifying hospital stay.
- Expanded services for mental healthcare by a licensed social worker.

## ACOs provide many potential benefits

- **Access** - ACOs are focused on increasing healthcare access for patients. Providers are extending hours to evenings and weekends or offering same-day or next-day appointments, when possible. Medical records can easily be accessed by providers involved with the patient's care to provide diagnosis, treatment and care coordination.
- **Care coordination and communication** - ACOs provide a care team that coordinates efforts to give better patient care. This includes referrals to some special programs as noted previously. Communication lines are open between providers and patients.
- **Better-quality care at a lower cost** - ACOs provide quality outcomes and reduce unnecessary costs. Under ACOs, providers can check to see what tests/services have previously been performed and run only necessary tests or make referrals to higher-quality specialists.
- **Primary care physician** - Under a medical home and ACO model, the primary care provider serves as the primary contact for all medical questions, issues or requests for medical information. The primary care provider is responsible for coordinating care and obtaining important medical information from other providers, such as specialists, laboratories and diagnostic imaging.
- **Preventive care and annual wellness visits** - ACO providers offer annual wellness visits that focus on preventive care such as needed health screenings and health risk assessments. The patient and provider can work together to create a care plan to detect disease early and ease any current disease effects.

## How do ACOs provide better care?

ACOs are designed to put Medicare patients at the center of their care. They focus on providing coordinated, high-quality care to patients, especially those who have a chronic illness, are disabled or are elderly. Since patients may receive healthcare at more than one doctor's office or at different laboratories and pharmacies, doctors do not always have the patient information they need at the time of treatment. Providers participating in an ACO receive important data from Medicare that can help identify opportunities to improve their patients' health and healthcare. For example, an ACO primary care doctor can receive healthcare information on their patients who are cared for across different healthcare systems or doctors' offices. They may learn of a new condition through testing at an outside facility. And since frequent emergency room (ER) visits and/or hospital stays may mean poor management of a chronic condition, the primary care provider and care team can work with other providers and the patient to start a better care plan. This includes referrals to programs that address both clinical and social needs of patients. Data helps the ACO provider and the care team:

- Determine which doctors, hospitals, rehabilitation or nursing centers provide better care for patients
- Determine which patients need preventive services such as annual mammograms, depression screenings and fall-risk screenings
- Determine which patients need stronger case management due to frequent ER visits and hospital readmissions

- Determine which patients may need a referral to a trained pharmacist who can make sure patients are on the best medications or receive assistance to afford their medications
- Determine which patients may need a home visit by a care team member who works with an advanced practitioner to be sure patients have the right services and equipment to best manage self-care at home
- Determine which patients may need case managers to support their care needs

By sharing information about your medical history and coordinating your treatment, your ACO doctors and care team can provide you better care.

## How are patients assigned to an ACO?

Patients with original Medicare (Part A and B) do not enroll in an ACO. **ACOs are not health insurance.** It is something your doctor (mostly a primary care doctor) decides to participate in and follows Medicare guidelines. If a doctor provides most of your care and belongs to an ACO, you'll be assigned to their ACO. Part of the advantage of belonging to an ACO is that your doctors can share information to improve your care. That includes your medical history, conditions and prescriptions. But if you don't like the idea, you have the right to opt out of sharing your healthcare information with the ACO.

## Does my doctor participate in Keystone ACO?

Each year, Keystone ACO receives a new list of Medicare patients from the Centers for Medicare and Medicaid Services (CMS) based on the doctor who provided the majority of care. ACOs must send letters to patients notifying them that their doctor is part of an ACO.

This year, Keystone ACO expects about 15,000 newly enrolled original Medicare beneficiaries through participating doctors. If the majority of healthcare you received under original Medicare (with both Parts A and B but not Part C) is provided by a doctor or group of doctors who have decided to be part of Keystone ACO, you will receive this quarterly newsletter and other communications such as mailed letters (once a year), and posters will be at participating healthcare sites. Before this year, letters were sent to all Medicare patients whose majority of care was provided by a Keystone ACO doctor. Starting this year, only **new** Medicare enrollees will receive the letters.

Keystone ACO sends quarterly newsletters with tips for Medicare patients on managing health. We share healthy recipes, local health-related events, contact numbers and information on certain health conditions and prevention. If you or a loved one has received this newsletter, the assignment condition has been met through one of your providers who is participating with Keystone ACO.

Keystone ACO wants to improve the mailing process used today. In the future, newsletters and important mailings to patients who subscribe to an electronic patient medical record may receive their Keystone ACO letters by that route. For example, the MyChart app informs Geisinger patients they have new messages and send important communications.

### **Are Medicare benefits affected?**

An ACO will not limit your choice of healthcare providers or seek preapprovals. It **isn't** a Medicare Advantage Plan, HMO plan or an insurance plan of any kind. Only people with **original Medicare** can be assigned to an ACO through their doctor.

If your doctor or other provider is part of an ACO, you still have the right to visit **any** doctor, hospital or other provider that accepts Medicare at any time, **and your original Medicare benefits will not change.**

### **Can patients opt out of the ACO?**

Original Medicare patients are assigned to an ACO through a participating ACO provider. Those who do not want Medicare to share their information do not need to change their coverage to see a doctor who is not participating in an ACO. They **can opt out of data sharing at any time**, and their care remains the same under traditional Medicare. However, opting out of the data-sharing could affect the doctor's ability to understand their total healthcare needs and offer the necessary resources.

If you do not want Medicare to share your data with your ACO participating provider, just call 1-800-MEDICARE (1-800-633-4227)

### **Keystone ACO contact information**

Following is our updated contact information. Dial 570-271-6403, then listen to the options to get connected to the appropriate person. Select option 1 for newsletter/website-related questions, option 2 to talk with our operations director or remain on the line to speak with our administrative assistant. Or email us: [keystoneaco@keystoneaco.org](mailto:keystoneaco@keystoneaco.org)

#### **Medicare resources**

##### **To contact Medicare**

For additional information on accountable care organizations, contact Medicare at 1-800-Medicare (1-800-633-4227) and ask for the Medicare ACO Department.

TTY users should call 1-877-486-2048.

You may also visit [medicare.gov/acos.html](https://www.medicare.gov/acos.html).

In our last newsletter, we asked if anyone would like to share their smoking cessation story. Thanks to Chuck and Nat for their responses and willingness to share.

**Chuck's story:**

*"I started smoking at age 20 while in college and under pressure from my friends. After graduation, I worked in the oil fields and worked for 3 days solid at a clip. I would eat breakfast at every meal and smoke a carton of Pall Mall Golds to keep awake. I would pass out when I got back to bed to sleep and remember waking up and gasping for breath.*

*After smoking at least a pack a day for 40 years, at age 59 I decided that enough is enough. I did have a friend who also decided that we should quit the never-ending drain on our wallets. We started to wean off the habit by limiting the smoking times. In other words, no smoke before 10 a.m. and only after eating. We maintained no more than 11 cigarettes a day for almost a year.*

*At age 60 I called an end to the habit. After all, I could maintain myself for the periods between intervals without a problem. That is not to say there were no withdrawal problems, but I managed to get through it. And my wife put up with me for the next month or so, thank God. **YOU HAVE TO WANT TO QUIT IN ORDER TO DO THIS REGIMEN.**"*

**Nat's tips:**

Nat suggests taking the month of May to focus on quitting. Educate yourself and find the cigarettes with the least amount of nicotine and tar and smoke only those from May 1 through 15. Starting May 15, replace cigarettes with salted sunflower seeds, which will satisfy that hand-to-mouth motion. On May 31, stop eating the sunflower seeds and you will then be finished with both the seeds and cigarettes and should no longer have the craving to smoke. (If you choose to follow this method, consult your medical provider to see if it's safe for you to consume salted sunflower seeds.) Folks with the lowest levels of stress will likely find this method easier to achieve. Nat added that you will be so proud of yourself for quitting.

Please continue to share your smoking and tobacco cessation success stories and tips with us. You may see your story in upcoming newsletters.

To share, email us at [keystoneaco@keystoneaco.org](mailto:keystoneaco@keystoneaco.org). Your name or personal information will not be shared. Also, be sure to share how your health has improved after you stopped using tobacco products.

**Do you or someone you love smoke and want to quit smoking?**

**The National Cancer Institute created [smokefree.gov](http://smokefree.gov) to help you or someone you care about quit smoking. [Smokefree.gov](http://smokefree.gov) is part of the U.S. Department of Health and Human Services' efforts to reduce smoking rates in the United States.**

**Visit: [smokefree.gov](http://smokefree.gov)**



## Easy Tortilla Pizza

Recipe courtesy of [allrecipes.com](http://allrecipes.com) by: LPMUSTANG



### Ingredients:

- 1 (8-inch) soft flour tortilla
- 1 teaspoon olive oil
- 1 pinch garlic powder
- Salt and ground black pepper to taste
- 3 tablespoons tomato sauce
- 1 cooked chicken breast, sliced
- 1/2 green bell pepper, chopped
- 2 green onions, finely chopped
- 1/3 cup shredded mozzarella cheese
- 1 pinch dried oregano

### Directions:

1. Preheat oven to 400 degrees F (200 degrees C).
2. Place tortilla on a baking sheet. Brush with olive oil; sprinkle garlic powder, salt, and pepper on top.
3. Bake in the preheated oven until golden, 3 to 5 minutes. Remove from the oven and spread tomato sauce on top; arrange chicken breast, green bell pepper, and green onions over tomato sauce. Sprinkle with mozzarella cheese.
4. Bake in the preheated oven until cheese is melted, about 5 minutes. Sprinkle oregano over cheese. Slice pizza into wedges using a pizza cutter.

### Nutritional facts

Serving size: 1  
Calories 833  
Total fat - 43 g  
Saturated fat - 13 g  
Cholesterol - 201mg  
Sodium - 1024 mg  
Total carbohydrate - 37 g  
Dietary fiber - 5 g  
Total sugars - 5 g  
Protein - 71 g

### Tips:

This budget-friendly pizza can be eaten as a snack or a small meal and can be made with a variety of toppings. This is also great to serve as an appetizer for gatherings. Try adding some of the following toppings:

- Mushrooms
- Black olives
- Turkey pepperoni
- Roasted or sun-dried tomatoes
- Fresh basil

**Meet our administrative team:**



Janet Comrey,  
Operations Director



Cindy Yeager,  
Data and Quality  
Manager



Kaitlyn Huttman,  
Senior Clinical Practice  
Transformation Coordinator



Dr. Richard Martin,  
Senior Clinical Advisor



Annette Wilson, Clinical  
Practice Transformation  
Coordinator



Karen Fetterolf,  
Beneficiary Engagement  
Liaison



Theresa Cosgrove,  
Administrative Assistant



**Reminders**

**Schedule appropriate preventive screenings:**

- Mammogram    Colonoscopy    Eye exam**  
**Dental visit    Annual wellness visit**

**STRENGTH AND EXERCISE FOR PARKINSON'S**

A functional exercise program for people living with Parkinson's disease designed to help mitigate symptoms and rebuild functionality

*with instructor Olivia Conklin*

**Every Tuesday and Thursday from 1-2 pm**

Join Personal Trainer Olivia Conklin for a strength training program for persons living with Parkinson's disease.

**Participants can expect:**

- Exercises to help strengthen muscles to improve your daily life such as sitting, standing and balance
- Activities to address hand-eye coordination and cognitive abilities

**Exercise has shown to positively affect:**

- Mood and self-confidence
- Bone health, sleep, digestion, fatigue, gait and functional mobility

**Register at [millercenterlewisburg.com](http://millercenterlewisburg.com)**

Questions? Email [oonclin@gsvymca.org](mailto:oonclin@gsvymca.org)

Lewisburg YMCA at the Miller Center  
120 Hardwood Drive | Lewisburg, PA  
(570)556-4191 | [millercenterlewisburg.com](http://millercenterlewisburg.com)

**WELLNESS 360**  
*Evangelical's New Active Aging Network*

Wellness 360 is Evangelical's active aging network that helps people 55+ to connect, learn, and live their healthiest lives. Membership is free and includes many perks, such as early notification of upcoming events, free health screenings, educational opportunities, and discounts at local businesses.

**Sign up for FREE today:**  
[www.EvanHospital.com/wellness360](http://www.EvanHospital.com/wellness360)

**EVANGELICAL COMMUNITY HOSPITAL**  
WELLNESS 360

**Senior Health and Fitness Day**  
Hosted by Evangelical Community Hospital, community health and wellness

Wednesday, May 24, 2023, 9 a.m.-noon

The Miller Center  
120 Hardwood Drive  
Lewisburg, PA 17837

Sponsored by Asbury Riverwoods



PAEB

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