Doctor participation in ACOs, medical homes grows amid pandemic

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Physician participation in accountable care organizations (ACO) and medical homes continues to grow steadily amid the COVID-19 pandemic, according to the results of an AMA survey of about 3,500 physicians.

Nearly one-third of doctors worked in practices participating in medical homes in 2020, up from 23.7% in 2014. On the ACO front, 42.7% of physicians were in practices that participated in a commercial ACO in 2020, up from 31.7% in 2016. Meanwhile, 29.5% of physicians were in practices that took part in a Medicaid ACO, up from 20.9% in 2016.

And the share of physicians in practices involved in Medicare ACOs has risen from 28.6% in 2014 to 36.7% in 2020, though it dipped from a high of 38.2% in 2018.

The findings are included in the AMA Policy Research Perspectives report, “Payment and Delivery in 2020: Fee-for-Service Revenue Remains Stable While Participation Shifts in Accountable Care Organizations During the Pandemic.”

The report draws on the AMA’s Physician Practice Benchmark Surveys, which are nationally representative surveys of post-residency physicians who provide at least 20 hours of patient care per week, are not employed by the federal government, and practice in one of the 50 states or the District of Columbia. The surveys have been done every other year since 2012 by the Division of Economic and Health Policy Research, which does independent research to support AMA federal, state and private sector advocacy agendas.
The AMA report also details trends in doctors’ participation in alternative payment methods. While nearly 90% of physicians were in practices getting fee-for-service payments—largely unchanged since 2012—the percentage taking part in other forms of payment grew.

According to the AMA survey, in 2020 the percentage of doctors that worked in practices that received:

- Pay-for-performance, 44.5%—up from 29.4% in 2012.
- Bundled payments, 40.1%—up from 32%.
- Shared savings, 21.5%—up from 8.3%.

Participation in capitated payment plans rose slightly, from 21.7% in 2012 to 23.8% in 2020.

**Trends by practice ownership, specialty**

Doctors working in private practice were “substantially less likely than those involved in hospital-owned practices to indicate their practice was involved in medical homes and ACOs,” says the AMA report.

While 42.3% of doctors in hospital-owned practices took part in a Medicare ACO in 2020, only 21.3% of physicians in private practices did, an 18-percentage point gap. The gap between doctors in hospital-owned practices and those in private practices was 16 percentage points for Medicaid ACOs and 12 percentage points for commercial ACOs.

“Differences in participation rates by practice ownership may relate to the fact that hospital-owned practices were more likely to have primary care physicians,” says the AMA report, which notes other research that “hospitals have the capital and infrastructure to implement quality reporting and data-sharing.”

Practices with no primary care doctors were less likely to take part in medical homes and ACOs, compared to practices with primary care doctors. Compared with physicians in solo practice or single-specialty practices, physicians in multispecialty practices were the most likely to take part in commercial ACOs (50.9%), Medicare ACOs (47.9%), medical homes (43%) and Medicaid ACOs (42.5%).

Despite increasing participation in medical homes, ACOs and alternative payment methods, the revenue mix has not changed appreciably since 2012, with about 70% of revenue coming from fee for service (FFS) and about 30% from other payment methods.


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That’s likely because the new payment methods build on fee-for-service models and use “existing coding, billing and payment processes,” and payment adjustments “are calculated and administered retrospectively,” according to research cited in the AMA report.

Read more from AMA President-elect Jack Resneck Jr., MD, about why it’s time to pursue patient-centered payment models designed by doctors.

It takes astute clinical judgement, effective collaboration with colleagues, and innovative problem-solving to succeed in an independent setting that is often fluid, and the AMA offers the resources and support physicians need to both start and sustain success in private practice.

Learn more about the new AMA Private Practice Physicians Section, which seeks to preserve the freedom, independence and integrity of private practice.