THE ACHP DIFFERENCE

The Alliance of Community Health Plans (ACHP) represents the nation’s top-performing nonprofit health plans to improve affordability and outcomes in the health care system. ACHP member companies are provider-aligned health organizations that provide high-quality coverage and care to tens of millions of Americans. They are leading the industry in practical, proven reforms around primary care delivery, value-based payment and data-driven systems improvement.

ACHP advocates on behalf of its members and a unique approach to health care today, one that puts the patient at the center with health plans and clinical teams collaborating to improve health outcomes and reduce costs. Our advocacy focuses on providing policymakers with tested solutions being realized in communities nationwide and rooted in a model that is proven to deliver better value for patients, employers and taxpayers.

ACHP.org  @_ACHP
2019 YEAR IN REVIEW

- **CO-SPONSORED** Comparative Effectiveness Research: Recent Applications and Future Investments seminar with the Bipartisan Policy Center and PCORI

- **WELCOMED** two new members to ACHP: CommunityCare™, fallonhealth

- **CONVENED** 40+ member plan leaders for the inaugural ACHP Strategy Summit in Chicago

- **PUBLISHED** New Research Shows How Payer-Provider Partnerships Can Accelerate Adoption of Evidence-Based Care in The New England Journal of Medicine (NEJM) Catalyst

- **DEBUTED** new internal workgroups for community partnerships, low-value care and health data innovation

- **FILED** Amicus Brief in major court challenge to the Affordable Care Act

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QUALITY CARE DISTINGUISHES OUR MEMBERS

ACHP members top quality ratings year-after-year, leading an entire industry to better standards. Providing the right care, to the right patient at the right time is at the core of what ACHP members do.

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DEPLOYED a targeted branding campaign to elevate ACHP’s profile among DC influencers and offer policymakers our depth of policy expertise, garnering six million online impressions.

COMPLETED 24 member visits.

EXPANDED the ACHP team strengthening our Clinical, External Affairs, Market Competitiveness and Operations departments.

MET with HHS leaders including Secretary Azar, Deputy Secretary Hargan and CMS Administrator Verma to advance major policy initiatives in Medicare Advantage, price transparency, interoperability and quality ratings.


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HELD annual CEO Summit focused on strengthening Medicaid programs.

LISTED ACHP President & CEO Ceci Connolly in Business Insider’s inaugural “DC Healthcare Power Players” list.

HOSTED 70+ virtual meetings.


SUBMITTED 16 regulatory comments to federal agencies.

SECURED inclusion of CREATEES Act, stability in the individual market and 10 years of PCORI funding in bipartisan budget deal.

2019 YEAR IN REVIEW

Nearly all ACHP MA plan enrollees — 95 percent — are in a 4+ star plan. J.D. Power ranks ACHP plans TOP IN THEIR REGIONS for customer service.

ACHP members operated THREE OF THE FIVE HIGHEST-RATED COMMERCIAL PLANS in the country as rated by NCQA.

ACHP members offered nine of the 20 total contracts to receive THE TOP SCORE OF 5 STARS by CMS.

ACHP member organizations continue to OUTPERFORM HUNDREDS OF OTHER PAYERS on key national health measures, including managing chronic conditions, member experience with a plan and preventive screenings and vaccinations.
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PRESENTED at the U.S. News & World Report Healthcare of Tomorrow Conference, Health Affairs Health Spending: Moving from Theory to Action, AcademyHealth National Health Policy Conference, Washington Post Live and more

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THE VOICE OF NONPROFIT HEALTH PLANS

ACHP and its member organizations support policies that ensure access to a high value system of coverage and care that provides outstanding patient experience. Drawing on our relationships on Capitol Hill and in the Administration, ACHP is elevating the voice of nonprofit, community health plans and shaping policy that builds healthy communities.

Partnering with our members, ACHP scored significant policy accomplishments in 2019.

- **LAUNCHED** Medicare Advantage education series, boosting Hill and Administration engagement
- **TESTIFIED** three member-plan executives before House and Senate subcommittees
- **PROTECTED** the payer-provider model in the Lower Health Care Costs Act of 2019
- **SHOWCASED** ACHP members’ price transparency tools for HHS Secretary Alex Azar
- **SECURED** inclusion of patient data protections and an implementation delay in interoperability regulation
- **COLLABORATED** with the Partnership to Amend 42 CFR Part 2 to help clinicians securely share important patient information
- **ADVANCED** transparent PBM model to control drug costs
- **PARTICIPATED** in development of CMS Medicaid and CHIP quality rating system
TRANSFORMING HEALTH CARE DELIVERY

ACHP convenes executive-level quality and clinical leaders to share best practices for improving outcomes, meeting quality benchmarks and delivering value to the communities they serve. Multi-disciplinary learning opportunities focus on improving health, achieving superior consumer experiences and managing costs.

- **HOSTED MULTIPLE IN-PERSON MEETINGS** fostering shared learning and engagement among medical, behavioral and pharmacy health plan leaders

- **AWARDED A SECOND PATIENT-CENTERED OUTCOMES RESEARCH INSTITUTE (PCORI) ENGAGEMENT AWARD** to promote evidence-based, peer-led interventions that address serious mental illness

- **LAUNCHED AN INITIATIVE** to benchmark social determinants of health capabilities and initiatives of member plans to provide strategic analysis of growth opportunities

- **CONVENED A STAKEHOLDER ROUNDTABLE** on social determinants of health and opportunities in Medicaid

- **PARTNERED WITH CENTER TO ADVANCE PALLIATIVE CARE** to identify new approaches for home-based services and network incentives in Medicare Advantage
DRIVING PERFORMANCE THROUGH MARKET COMPETITIVENESS

ACHP provides financial, marketing, product and strategy leaders insightful data analysis as well as opportunities to learn about and discuss emerging trends for a competitive advantage – driving innovative solutions that lead communities to better health.

Gathered health plan quality leaders to COLLABORATE ON INNOVATIONS in product design, improving consumer experience and best practices for data segmentation, among other topics

ENHANCED CUSTOM QUALITY PERFORMANCE TOOLS to provide members real-time data to improve performance, consumer experience and top national quality rankings

• 1,400+ dynamic and detailed Medicare Advantage Snapshots provided plans market data for making product design and expansion decisions

QUANTIFIED THE IMPACT of the Medicare Advantage benchmark cap payment glitch on member plans to advocate for full payment of quality bonuses

Provided members timely INSIGHT ON NATIONAL MARKET TRENDS to empower development of competitive, consumer-focused initiatives

Participated in HFMA’S 13TH ANNUAL THOUGHT LEADERSHIP RETREAT and contributed to the corresponding whitepaper Beyond Boundaries: Why Finding Ways to Address Social Determinants Is Vital to Healthcare’s Future

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<th>AultCare Health Plans</th>
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