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From Vision to Implementation: The Building Blocks of Accountable Care

Introduction

Tying quality of care to reimbursements has been proposed in the last few years as a solution to increase the efficiency and quality of care and replace the costly and ineffective fee-for-service model. Provisions within the Affordable Care Act of 2010 have given accountable care organizations (ACOs) the foundation upon which to build real-world, value based care models. As a result, healthcare organizations across the country are exploring what they must do in terms of restructuring and realigning their operations in order to manage costs efficiently, and to improve outcomes and optimize care. Many are discovering that current information management systems and processes are too fragmented to support accountable care. Furthermore, they are realizing that care coordination managing risk, and financial and population management demand new competencies and technologies.

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