

CMS reports on progress toward improved health care

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(HealthDay)—Considerable progress has already been made toward improving the quality and delivery of health care, according to a Centers for Medicare and Medicaid Services (CMS) bulletin published online Feb. 28.

Noting that the [Affordable Care](#) Act aims to improve the quality of care and reduce costs for taxpayers and patients, the CMS detailed some of the progress which has already been made in this realm.

In 2011, total U.S. health spending grew only 3.9 percent, the same as in 2009 and 2010. Medicare spending per beneficiary increased by just 0.4

percent per capita in 2012, while Medicaid spending decreased 0.9 percent in 2011. In the last half of 2012, the 30-day all-cause readmission rate was estimated to have decreased to 17.8 percent, after averaging 19 percent for the past five years. This represents approximately 70,000 fewer admissions in 2012. In addition, at some hospitals early elective [delivery rates](#) have decreased. More than 250 organizations are participating in Medicare Accountable Care Organizations (ACOs), which serve about 8 percent of [Medicare beneficiaries](#), with participation expected to increase. In the first four years, the ACOs are expected to save \$940 million. Since the passing of the [health care law](#), enrollment in Medicare Advantage plans has increased by 30 percent, while premiums have decreased by 10 percent.

According to the report, "fixing America's [health care system](#) means more than just guaranteeing that everyone has coverage. To address the rising costs of health care, we must improve the way that health care is delivered, including coordinating care better and improving the safety of care."

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