



February 23, 2022

Elizabeth Fowler  
Deputy Administrator & Director  
Center for Medicare & Medicaid Innovation  
7500 Security Boulevard  
Baltimore, MD 21244

**RE: ACO Transformation Track removed from the CHART Model**

Dear Deputy Administrator Fowler,

On behalf of the National Rural Health Association (NRHA), I write to express our concern with the removal of the Accountable Care Organization (ACO) Transformation Track within the Community Health Access and Rural Transformation (CHART) Model. As the country rebounds from the COVID-19 pandemic, it has become increasingly evident that innovation in rural health is needed to ensure stability within the rural safety net. NRHA looks forward to working with the Centers for Medicare and Medicaid Services (CMS) and the Center for Medicare and Medicaid Innovation (CMMI) to improve access to care in rural communities.

NRHA is a non-profit membership organization with more than 21,000 members that provides national leadership on rural health issues. Our membership includes nearly every component of rural America's health care, including rural community hospitals, critical access hospitals, doctors, nurses, and patients. We work to improve rural America's health needs through advocacy, communications, education, and research.

When CMS announced the CHART Model in 2020, NRHA was excited about the innovation possibilities within both the Community Transformation Track and ACO Transformation Track. We were particularly excited that the ACO Transformation Track would build on the successes of the ACO Investment Model (AIM) program. Given the need for continued innovation in rural health, our members were disappointed to hear the recent announcement that the ACO Transformation Track would be pulled from the CHART Model. While disappointed, we appreciate the consistent communication CMMI, and CMS, has provided rural stakeholders to ensure innovation continues.

As you know, when the Affordable Care Act (ACA) was signed into law in 2010, it stood up CMMI allowing CMS authority to ramp up successful demonstrations to full operation without Congressional approval. Given the success and popularity of the AIM program within CMMI, NRHA believes it is critical to ensure ACO innovation continues. While unfortunate that the ACO Transformation Track has been removed from the CHART Model, NRHA believes CMS has a unique opportunity to build on the success of the AIM program, while incorporating adjustments, and create a full rural centric ACO model at CMS. NRHA remains committed to working with CMS to ensure the successful AIM program is expanded. As CMS evaluates opportunities to provide innovation, NRHA stands ready to provide input to ensure rural stakeholders are adequately represented in those discussions.

NRHA is grateful that CMS and CMMI recognizes the unique challenges of providing care in rural America. We look forward to continuing working with leaders within CMS to sustain local access to high quality care in rural communities. It is necessary that CMS and CMMI continues to innovate to



improve the health and health care access of the 60 million Americans residing in rural communities. If you would like additional information, please contact Josh Jorgensen at [jjorgensen@ruralhealth.us](mailto:jjorgensen@ruralhealth.us).

Sincerely,

A handwritten signature in black ink, appearing to read "Alan Morgan", is positioned above the printed name.

Alan Morgan  
Chief Executive Officer  
National Rural Health Association