



Making the Case for Accountable Health Models

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Accountable Health Communities (AHCs)

A federal demonstration model by CMS.

Focuses on the addressing the gap between clinical care and social services among Medicare and Medicaid beneficiaries.

Uses bridge organizations to screen Medicaid and Medicare patients for social needs (housing, food, transportation) and connect them to community-based orgs.

Accountable Communities for Health (ACHs)

A community-driven model that is broader than AHCs.

A structured alliance of diverse stakeholders.

Regional “Wellness Funds”

Shared measures of success.

In Kentucky: This could be a natural fit with Area Development Districts (ADDs) as regional units.

Accountable Care Organizations (ACOs)

Groups of doctors, hospitals, and other providers.

Coordinate care for a defined group of patients.

Payment models often include shared savings.

Providers are directly accountable for the quality, outcomes, and costs of their patients’ care.



Ladder of Accountability

