Re: Transparency and Stability are Essential for Accelerating the Transition to Value-based Care

Dear Secretary Becerra,

The American Academy of Family Physicians, American College of Physicians, and American Medical Association share your commitment to accelerating the transition to a value-based health care system and improving equitable access to person-centered care. Achieving this shared goal requires successful physician participation in alternative payment models across payers. To foster physician participation and build physicians’ capacity to take on financial risk, we urge the Department of Health and Human Services (HHS) to prioritize the stability of alternative payment models.

The Center for Medicare & Medicaid Innovation’s (CMMI) recent Strategy Refresh laid out several goals to accelerate adoption of value-based care, including having 100 percent of Medicare beneficiaries in an accountable care relationship by 2030. CMMI correctly notes in the Strategy Refresh that advanced primary care and accountable care models are central to achieving this goal. Physician practices, whether operating on their own or within the context of a broader accountable care organization, need a stable suite of multi-payer models, that provide predictable, prospective revenue streams adequate to meet patient and practice needs. This suite of models should include participation options for practices that are prepared to assume varying degrees of financial risk.

Streamlined prospective payment models that adequately support and sustain comprehensive, longitudinal patient-physician relationships and address the whole person, including health-related social needs, are essential. This payment infrastructure enhances patients’ access to high-quality, continuous primary care and strengthens practice capabilities that improve quality and reduce health care spending. This is especially important for independent practices that care for a large share of underserved patient populations in marginalized and rural areas. Advanced risk models provide experienced practices with additional flexibility to improve quality and reduce health care spending.

However, participation in alternative payment models requires significant upfront and ongoing investment from physician practices. **HHS must support their efforts to make these investments with a commitment to transparency and stability in existing models and by working with the physician community when model improvements are needed. Participating practices need assurance that models will not be abruptly ended or changed without their input.** Improving the transparency and stability of models will foster trust and encourage participation among physicians, and ultimately advance the administration’s goals.

Our organizations strongly believe accelerating adoption of value-based care models is essential to the long-term wellbeing of the Medicare program and its ability to meet the needs of a diverse and aging population. Thank you for your ongoing work to strengthen our health care system and improve patients’ equitable access to care. Should you have any questions or wish to discuss these issues further,
please contact Stephanie Quinn, the AAFP’s Senior Vice President, Advocacy, Practice Advancement, and Policy, at squinn@aafp.org.

Sincerely,

American Academy of Family Physicians
American College of Physicians
American Medical Association

Cc: Chiquita Brooks-LaSure, Administrator, Centers for Medicare & Medicaid Services
    Liz Fowler, Deputy Administrator, Centers for Medicare & Medicaid Services