Consumer Priorities for Implementation of the Medicare Access and CHIP Reauthorization Act (MACRA)

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About us

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, access to quality health care, and policies that help women and men meet the dual demands of work and family.

Consumer priorities for health system transformation

- Consumers support movement towards new payment models that reward value and quality, rather than volume.
  - MACRA is an important first step toward transforming our health system to better meets the needs of patients and families.

- Alternative Payment Models (APMs) have the potential to provide comprehensive, coordinated, patient- and family-centered care while driving down costs.

Consumer priorities for health system transformation

- Key priorities to achieve our shared goals of improved health outcomes, improved patient experience, and lowered cost of care are:
  - Meaningful patient and family engagement
  - High-value quality measures
  - Use of an effective clinical care model
  - Robust use of health information technology
  - Consumer safeguards

- How well does the new Quality Payment Program (QPP) address these priorities?
Alphabet soup: MACRA, MIPS, and APMs

- Providers paid through MIPS will receive a composite score based on their performance in four categories
  - Quality, Resource Use, Clinical Practice Improvement Activities, and Advancing Care Information

- Providers will qualify for the Advanced APM bonus if their payment model meets three criteria
  - Use quality measures comparable to MIPS
  - Use certified EHR technology
  - Bear at least nominal financial risk

Meaningful patient and family engagement is essential

- Patients and families should be viewed as partners in all transformation efforts, from point of care to governance.
  - Collaboration with patients and families should be built into design, quality improvement, and governance activities – as well as meaningfully engaged at the point of care.

- Clinical Practice Improvement Activities category includes many activities generally aligned with these priorities.
  - However, there is room for improvement in future years, particularly with respect to engagement of patients and families beyond the point of care.
Quality measurement and reporting should be meaningful, actionable, and transparent to consumers, patients and family caregivers.

MIPS and APM measure sets should include the use of measures derived from patient-generated data that address both care experience and outcomes.

- Quality Performance Category includes key measures, including patient-experience measures and outcomes measures, but there remains room for improvement.

Clinical care model: the missing criterion

- Advanced APMs will only be as successful as the models of care delivery they produce and support.
  - APMs should enable us achieve all three tenets of the Triple Aim – better health outcomes, better experience of care, and lower costs – but they can do so only if they engage and meet the needs of the patients they serve and improve how care is delivered.

- Cost savings and transition to value-based payment approaches are not the sole goals of health care transformation.
  - Advanced APMs should also be required to demonstrate that their payment approach will reinforce the delivery of coordinated patient- and family-centered care, with a strong primary care foundation.
Robust use of health IT: foundational for transformation

- The robust use of health IT and health information exchange is fundamental to achieving the foundational goals of incentivizing high-quality, efficient practices, coordinated care and improved health outcomes.
- Requirements for health IT adoption and use for both MIPS and Advanced APMs must accelerate patient-centered uses of health IT which provide the foundation for health system transformation.

Evolution of consumer safeguards must keep pace

- APMs should be built upon a strong foundation of robust consumer protections that ensure consumer needs are met and that safeguard consumer rights and access to care.
- As CMS continues to develop new models of care and payment and providers take on increased risk, reward, and responsibility, the agency must ensure that the evolution and application of consumer safeguards are keeping pace.