

News Release

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National Health Groups Outline Value-Based Care Priorities for Congress *Providers Seek to Continue to Incent Movement to Value-Based Care*

WASHINGTON — In a [letter](#) sent today, 12 of the nation’s leading healthcare organizations asked leaders on Capitol Hill to maintain the movement toward value-based care in the new Congress. The groups outline their legislative priorities that will improve adoption of value-based care models, which have proven to provide better patient care by encouraging physicians and other clinicians to coordinate care across settings and be more accountable to patient outcomes.

Congress in recent years has sought to speed the transition to value-based care by encouraging physicians and other clinicians to transition into alternative payment models (APMs), primarily through the bipartisan Medicare Access and CHIP Reauthorization Act (MACRA). While roughly 30 percent of Medicare clinicians are participating in risk-based payment models today, the rate of uptake remains below original projections.

“While MACRA was a step in the right direction, more needs to be done to drive long-term system transformations,” the letter states.

Today’s letter was sent to Sens. Ron Wyden and Mike Crapo, the top Democrat and Republican on the Senate Finance Committee, Reps. Cathy McMorris Rodgers and Frank Pallone, leaders of the House Energy and Commerce Committee, and Reps. Jason Smith and Richard Neal, leaders of the House Ways and Means Committee. It encourages committee chairs to hold hearings and engage with stakeholders to consider long-term approaches for advancing value-based care.

Specifically, the letter asks lawmakers to:

- **Extend value-based care incentives** by extending the original 5 percent advanced APM incentive payments.
- **Ensure participants join and remain in value-based care models** by removing barriers to APM participation.
- **Provide a more predictable pathway for more clinicians to engage in APMs** by working with the CMS Innovation Center to ensure promising models have a better pathway to be implemented and become permanent.
- **Establish parity between APMs and Medicare Advantage (MA)** by seeking greater alignment between APMs and the MA program to ensure that both models can achieve success.

The letter was signed by the American Academy of Family Physicians, American College of Physicians, American Medical Association, AMGA, America's Physician Groups, Association of American Medical Colleges, Federation of American Hospitals, Health Care Transformation Task Force, Medical Group Management Association, NAACOS, National Rural Health Association, and Premier healthcare alliance.

Value-based payment reforms have generated over \$17 billion in gross savings for Medicare over the last decade and improved the quality of care for millions of patients. More than 13 million beneficiaries are cared for by an ACO today, making it far and away the largest alternative payment model in Medicare. Nearly 573,000 physicians and other non-physicians participate in the Medicare Shared Savings Program.

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About NAACOS. The National Association of ACOs (NAACOS) represents more than 8 million beneficiary lives through Medicare's population health-focused payment and delivery models. NAACOS is a member-led and member-owned nonprofit of more than 400 ACOs in Medicare, Medicaid, and commercial insurance working on behalf of health systems and physician provider organizations across the nation to improve quality of care for patients and reduce health care cost.