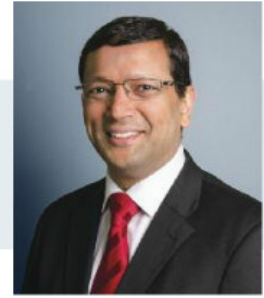


MACRA is coming. Are we ready?

By Dr. Jayesh Shah, 2016 BCMS President



With the repeal of the sustainable growth rate (SGR) now behind us, we thought our struggles were over. But before we could celebrate our victory, MACRA (Medicare Access and CHIP Reauthorization Act) is suddenly here. Congress passed this legislation to completely reform the way Medicare makes physician payments. The goal of MACRA is to provide better care with lower cost. It focuses on quality, cost, technology improvement and practice improvement. The stated main goal is to decrease administrative paperwork for physicians, according to the acting administrator for the Centers for Medicare and Medicaid Services (CMS).

The proposal currently plans to implement performance measurements for both the Merit-based Incentive Payment System (MIPS) and Alternative Payment Models (APM), which start on Jan. 1, 2017.

While these regulations are not final, the proposed rule was published in April 2016 and CMS is actively listening to our concerns. Mr. Andy Slavitt, CMS acting administrator, was at the American Medical Association meeting in June 2016 echoing many of our concerns. Physicians should continue to post their comments and concerns on the website at www.cms.gov before the comment period ends in July 2016. The final rule is to be published by October 2016.

MACRA is an innovative model with new approaches, including models of medical home and specialty models to reduce cost. MACRA sunsets three of the existing quality programs — including PQRS — into a single, aligned quality improvement program. If a physician chooses the Alternative Payment Model, then the requirement is decreased. MIPS allows additional opportunity for bonus payments. According to the information on the CMS website, \$500 million are assigned as bonus funds for the first six years. First reporting is not due until 2018.

Adding new regulations without improving the infrastructure will cause more frustration to physicians. MACRA's theoretical goals are hard to translate into the reality of private practice. Physicians feel that the measures are more an exercise of compliance than of quality improvement. It could lead to some unintended consequences of physician burnout and the closure of some small practices.

The Texas Medical Association's MACRA position paper www.texmed.org/macra/ specifically asks CMS to:

- Exempt physicians who have no possibility of earning more than it costs them to report data, and not force physicians into unacceptably risky payment models.

- Establish objective and timely measurement and reporting systems that are simpler and less costly than those currently required. The focus should be on improving care for all Medicare patients, not creating yearly physician winners and losers that affects payment two years after care has been delivered.
- Use quality metrics that capture those activities that are under the physician's control and have been shown to improve the quality of care, enhance access-to-care, and/or reduce the cost of care. The focus should be on metrics that are the most meaningful to a practice and its patients, not on what will result in the best "score."
- Give physicians, who want to shift to value-based care, enough time to make this transition in a way that benefits their patients and does not cause undue collateral damage to their practices.
- Require electronic health record vendors to build and maintain products that meet federal specifications rather than forcing physicians to buy and constantly upgrade expensive and often-bulky systems.

Here is what all physicians should do.

PREPARE YOUR PRACTICE: All physicians and practice managers should review all the modules on the steps to transition their practice so the practice can meet the challenges of value-based care. <https://www.stepsforward.org/>

PREPARE YOUR PRACTICE. There are steps you can take now to prepare for the transition to MACRA next year, such as participating in a qualified clinical data registry that streamlines reporting processes.

MACRA TOOL KIT: AMA has prepared a Tool Kit for all physicians to get prepared for MACRA. To access the MACRA tool kit and additional resources and information please visit [https://www.ama-assn.org/go/medicare payment](https://www.ama-assn.org/go/medicare%20payment).

TMA PRACTICE EDGE: Texas Medical Association has started TMA Practice Edge which will allow small practices and specialty physicians to align themselves and form clinically-integrated networks and ACO's with very little upfront cost. Please review the following website for details. www.tmapracticeedge.com.

Stay involved and stay strong. We need strong physician leadership to overhaul this healthcare system.

Regards, Dr. Jayesh Shah