Ten Groups Ask CMS to Not Finalize Proposed ACO Quality Changes
As ACOs Continue to Handle a Pandemic, CMS Should Postpone New Quality Paradigm

WASHINGTON, D.C. – Citing the ongoing COVID-19 Public Health Emergency, a large group of leading healthcare organizations is urging CMS to not move forward with sweeping changes to how accountable care organizations (ACOs) and other alternative payment models (APMs) are assessed on quality in the Medicare Shared Savings Program (MSSP) and Merit-Based Incentive Payment System (MIPS).

The changes proposed in the 2021 Medicare Physician Fee Schedule would alter the way ACOs report and are measured on quality and come at a time when the healthcare industry continues to deal with the uncertainty of the ongoing pandemic. Additionally, the expected delayed release of the final rule further reduces the amount of time ACOs and other APMs would have to implement such changes.

“The ACO quality changes proposed are significant and come at a time when ACOs are continuing to deal with challenges and uncertainty caused by the COVID-19 pandemic,” the letter states. “Just as CMS has proposed to delay moving forward with the MIPS Value Pathways approach due to concerns with COVID-19, CMS should also postpone such a drastic and significant change to the way ACO quality is measured, assessed, reported and scored for purposes of both the MSSP and MIPS programs.”

CMS proposes to abruptly end the use of the Web Interface reporting mechanism, a tool that has been used since the MSSP’s inception. The proposed rule would also remove the pay-for-reporting year currently provided to ACOs beginning an initial MSSP contract as well as individual measures that are newly introduced to the measure set. CMS also proposes significant changes to the quality measure set ACOs must report under the new APM Performance Pathway. Finally, the proposed rule would replace the current MIPS APM Scoring Standard, which allows each APM to have its own set of unique quality measures and scoring approaches that best fit the particular model.

The letter was signed by the American College of Physicians, American Medical Association, America’s Essential Hospitals, America’s Physician Groups, AMGA, Association of American Medical Colleges, Federation of American Hospitals, Medical Group Management Association, National Association of ACOs, and Premier.

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About NAACOS. The National Association of ACOs (NAACOS) represents more than 12 million beneficiary lives through hundreds of organizations participating in population health-focused payment and delivery models in Medicare, Medicaid, and commercial insurance. Models include the Medicare Shared Savings Program (MSSP), Next Generation ACOs, and alternative payment models supported by a myriad of commercial health plans and Medicare Advantage. NAACOS is a member-led and member-owned nonprofit organization that works to improve quality of care, outcomes, and healthcare cost efficiency.