HHS Asks Docs for Alternatives to Medicare Payment Model

April 14, 2017 | Physician Compensation [1], Healthcare Careers [2], Healthcare Reform [3], Physician Productivity [4], Productivity [5]
By Dylan Fisher [6]

HHS Secretary Tom Price puts the call out for additional alternatives to the fee-for-service Medicare payment model.

Source: Physicians Practice

Welcome to Practice Rounds, our weekly column exploring what's being covered in the larger world of healthcare.

Physicians divided on Medicare ACOs' effectiveness
A Health Affairs survey of 1,401 physicians participating in Medicare Accountable Care Organizations (ACOs) found that only half of the models were effective in lowering costs while maintaining quality care. The survey included 405 participants in the Medicare Shared Savings Program model, 549 in the Advance Payment Model, and 447 in the Pioneer ACO model.
For physicians participating in the Advance Payment ACOs, 65 percent said they were directly involved in deciding to participate in the program, compared to 30 percent of those in Medicare Shared Savings Program ACOs and 19 percent of those in Pioneer ACOs. According to the survey, physicians in Advance Payment ACOs had more favorable views on the model and their positive impact on patient care, compared to the other two models.
Across all three models, knowledge disparity was evident, as one-half to one-third of physicians responded they were unsure whether they were eligible to receive shared savings. Health Affairs noted, "The results of our survey suggest that many participating physicians' views are not aligned with ACO goals and that the physicians are divided as to whether or not the ACO model is effective."

AMA opioid task force releases safe storage, disposal resource
The safe storage and disposal document provides physicians a three-step process for safe use, storage, and disposal of opioids. First, the document suggests physicians talk to their patients and educate them about safe use of prescription opioids. Second, it asks physicians to remind patients that medications should be stored out of reach of children, and in a safe place. And lastly, it urges physicians to talk to patients about the most appropriate way to dispose of expired, unwanted, and unused medications. The newly released document also provides physicians with helpful opioid facts and links for additional resources.

GOP Doctors Caucus: We're watching MACRA
With the failed American Health Care Act grabbing headlines, the Medicare Access and CHIP Reauthorization Act (MACRA) of 2015, has seemingly fallen by the wayside. Medical Economics reported this week that the GOP Doctors Caucus is watching the rollout of MACRA carefully and promises to insist on changes if needed. The caucus is comprised of Republican members of Congress who are also physicians and was a guiding voice in MACRA's approval.
"I believe all options should be on the table to ensure MACRA is implemented in a way that benefits patients and keeps providers—particularly those in small practices—in the Medicare program," Caucus Chair U.S. Rep. Phil Roe, MD, (R-Tennessee) told Medical Economics.
According to the article, Roe has heard from physicians who think the final rule, issued in October 2016, addressing the concerns of small, independent and rural practices, improves on the earlier version because it allows these practices to sit out in the first year of MACRA implementation.

HHS Secretary Price asks doctors for more alternatives to Medicare pay models
On April 11, Health and Human Services (HHS) Secretary Tom Price spoke during the first voting meeting of the Physician-Focused Payment Model Technical Advisory Committee, asking for physicians to submit additional alternatives to the fee-for-service Medicare model. The committee, which was created under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), reviewed various models that were submitted by medical groups, ultimately rejecting one and ordering limited testing for two others.
Price said innovative payment models could work better than fee-for-service Medicare and may stop doctors from leaving medicine because they feel "burned out," according to Bloomberg.
Doctors across the country should offer the committee ideas about what payment model would work better for them, Price, a physician, said during the meeting. This is especially important for physicians in rural and underserved areas who think the current system is designed for large integrated groups that have administrative assistance, he said.

**Quote of the week:**

**Study: Young Physicians Happy With Career Choice**

"I have to say, it's a myth that physicians are adverse to technology. It's not the technology; we all have an iPhone. What we want is tech to work for us, to support us in seeing patients," - Patrice A. Harris, MD, a practicing psychiatrist in Atlanta, Ga., and chair of the (AMA) board of trustees on technology in medicine.

**Source URL:**

**Links:**