

Support physicians as they transition to new value-based payment models by creating early opportunities for success and eliminating barriers that impede advancement toward new payment and delivery designs.

QUALITY PAYMENT PROGRAM FLEXIBILITY

ISSUE OVERVIEW: The American Society for Gastrointestinal Endoscopy (ASGE) thanks lawmakers for action during the 115th Congress, as part of the Bipartisan Budget Act of 2018, granting the Centers for Medicare and Medicaid Services (CMS) with continued flexibility on the implementation of the Merit-Based Incentive Payment System (MIPS). When physicians participate in quality improvement activities, patients benefit and the potential exists for cost savings to accrue to the health care system. However, to realize these positive outgrowths, physicians must first be given the opportunity to succeed within the new MIPS and alternative payment model (APM) payment structures.

Physician specialists are disadvantaged by the lack of choice within the Quality Payment Program (QPP) by not having Advanced APMs available to them. Another limitation is the threshold for eligible clinicians to earn the status of Qualifying APM Participant. Currently, to become a Qualifying APM Participant, a physician must meet a specific Medicare payment or patient count threshold, which may not be easily attainable depending on a practice's mix of services. ASGE supports the proposal in the President's Fiscal Year 2019 Budget that would allow clinicians to receive a five percent bonus on physician fee schedule revenue received through the APMs in which they participate regardless of whether they meet or exceed the payment or patient thresholds. As explained in budget documents, this change would reward clinicians along a continuum for their participation in Advanced APMs without imposing arbitrary participation thresholds. Removing the thresholds would also simplify the QPP. The President's proposal would be bolstered by allowing physicians who participate in Other Payer Advanced APMs to claim an exemption from MIPS until more Medicare Advanced APMs become available for physician specialists.

LEGISLATIVE ASK:

Support legislative action to remove reference of payment or patient count thresholds from the definition of a Qualifying APM Participant at Section 1833(z)(2) of the Medicare Access and CHIP Reauthorization Act.