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Health Care Transformation Task Force Joins Leading Health Groups In Urging The Administration To Credit Medicare Advantage Toward Advanced Alternative Payment Model Status.

WASHINGTON (June 9, 2017) – The Health Care Transformation Task Force (HCTTF) has joined with other health care leaders, including providers and payers, in asking the Centers for Medicare and Medicaid Services (CMS) to count Medicare Advantage (MA) contracts as Advanced Alternative Payment Models (APMs) under the Medicare Access and CHIP Reauthorization Act (MACRA) Quality Payment Program (QPP).

“To encourage patient-centered care, CMS should give credit to clinicians who are participating in Medicare advantage and other forms of risk-based payments,” said Jeff Micklos, executive director of the Health Care Transformation Task Force. We look forward to working with HHS leadership to make this position become policy.”

The HCTTF joined two letters, one to Health and Human Services Secretary Tom Price and one to CMS Administrator Seema Verma, urging them to level the playing field for clinicians by crediting participation in Medicare Advantage towards Advanced APMs.

The first letter, addressed to Price, was also signed by the California Association of Physicians Groups (CAPG), National Committee for Quality Assurance (NCQA), Healthcare Leadership Council, America’s Health Insurance Plans, Pacific Business Group on Health, Direct Primary Care, Alliance of Community Health Plans, National Coalition on Health Care, and the Blue Cross Blue Shield Association.

The second letter, addressed to Verma, was also signed by Premier healthcare alliance, American College of Surgeons, American Medical Association, American Medical Group Association, American Osteopathic Association, America’s Essential Hospitals, Healthcare Leadership Council, Medical Group Management Association, and the National Association of ACOs.

About Health Care Transformation Task Force

The Health Care Transformation Task Force is an industry consortium that brings together patients, payers, providers and purchasers to align private and public sector efforts to clear the

way for a sweeping transformation of the U.S. health care system. Our members are committed to rapid, measurable change, both for ourselves and our country. Our members aspire to have 75 percent of their respective business operating under value-based payment arrangements by 2020. To learn more, visit www.hcttf.org.

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