

April 27, 2016

VIA ELECTRONIC MAIL

Amy Bassano
Deputy Director
Centers for Medicare & Medicaid Innovation
Centers for Medicare & Medicaid Services
Baltimore, MD

Dear Ms. Bassano:

The Health Care Transformation Task Force ("HCTTF" or "Task Force")¹ writes to share initial feedback on the new CPC Plus alternate payment model ("APM"). As you know, the HCTTF fully supports the HHS/CMS goal of moving Medicare payments to APMs. We believe the CPC Plus model has the potential to be a major, effective contributor to meeting this goal.

Last evening, the Task Force held its quarterly meeting and discussed the CPC Plus model, reaching consensus to provide immediate feedback addressing a core concern with the model. The Task Force expressed unanimous support for a recommendation that the CPC Plus model be modified to allow ACO-affiliated primary care physicians ("PCPs") to be eligible to participate in the CPC Plus model. We are not recommending changes to the practice selection criteria, merely the removal of the exclusion of ACO-affiliated PCPs.

Additionally, one Task Force member representing federally qualified health centers ("FQHC") which are part of a Medicare ACO was particularly concerned that the proposed approach would be another limitation on their ability to participate in CMS APM models (a concern similar to the regrettable FQHC exclusion from the Comprehensive Primary Care Initiative).

We anticipate that our recommendation may cause CMS concerns regarding evaluation issues and the potential for double payment through the incentive mechanisms of both programs. An effective way to conduct a CPC Plus evaluation may be to use multiple analytical

¹ The Task Force is a group of private sector stakeholders that wish to accelerate the pace of delivery system transformation. Representing a diverse set of organizations from various segments of the industry – currently including providers, health plans, employers, and consumers – we share a common commitment to transform our respective businesses and clinical models to deliver the triple aim of better health, better care, and reduced costs. Our member organizations aspire to put 75 percent of their business into value-based arrangements which focus on the triple aim by 2020. We strive to provide a critical mass of policy, operational, and technical support from the private sector that, when combined with the work being done by CMS and other public and private stakeholders, can increase the momentum of delivery system transformation.

arms, with the ACO physicians placed in one arm. Further, our members believe that any "double-dipping" concern can be addressed by modifying the CPC Plus incentive system for ACO-affiliated PCPs in a way that best determines success. The Task Force stands ready to work with CMS to find an appropriate solution to allay potential double-dipping concerns.

We appreciate your consideration of our recommendation. We welcome the chance to discuss this issue further with you. Please do not hesitate contacting Task Force Executive Director Jeff Micklos at (202) 774-1415 or jeff.micklos@leavittpartners.com for follow up.

Sincerely,

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cc. Rahul Rajkumar, M.D.