



One Prince Street
Alexandria, VA 22314-3318
☎ 703.838.0033
📠 703.548.1890

March 21, 2024
Michael Chernew, Ph.D.
Chairman
Medicare Payment Advisory Commission
425 I Street, NW, Suite 701
Washington, D.C. 20001

Dear Dr. Chernew:

On behalf of AMGA, we appreciate the opportunity to provide comment on MedPAC's March 7, 2024 discussion regarding data completeness in Medicare Advantage and the program's importance in the continued transition to value-based care.

Founded in 1950, AMGA is a trade association leading the transformation of health care in America. Representing multispecialty medical groups and integrated systems of care, we advocate, educate, innovate, and empower our members to deliver the next level of high-performance health. AMGA is the national voice promoting awareness of our members' recognized excellence in the delivery of coordinated, high-quality, high-value care. There are over 177,000 physicians practicing in our member organizations, delivering care to more than one in three Americans. Our members are also leaders in value-based care delivery, focusing on improving patient outcomes while driving down overall healthcare costs.

AMGA appreciates the Commission's diligent assessment of data completeness and quality of care in the Medicare Advantage (MA) program. As more beneficiaries opt for MA plans, it is crucial that they have the information they need to choose a quality plan, and that policymakers and researchers have access to the information necessary to evaluate the program. However, it is imperative that the collection of this data does not unduly burden providers. Quality measurement goals should complement rather than hinder care provision.

For this reason, when discussing recommendations to move towards more complete encounter data, we urge the commission to carefully consider the administrative burden imposed by major changes to reporting requirements, and the effort already expended by practices to adjust their systems to existing requirements. Additionally, any financial penalties imposed on plans for incomplete data will inevitably affect the providers with whom they engage.

AMGA also calls attention to the significance of value-based care in MA. MA provides both regulatory stability and the ability to design creative benefits, making it an ideal setting for value-based care. This both enhances patient outcomes, and, as Commissioner Poulsen observed, can make data collection more complex as, "in the world of value-based payment there will be patterns that traditional encounter data will not, and possibly cannot, capture perfectly." We strongly believe that much of the value provided by MA is rooted in its unique positioning to foster an environment conducive to value-based care, and any recommendations made around

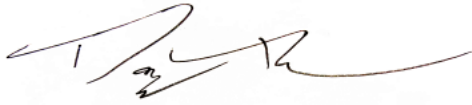
the program should be designed to preserve this environment.

We agree wholeheartedly with Commissioner Poulsen's assertion that MA plans engaging in value-based care arrangements with providers yield improved outcomes for beneficiaries at lower costs. While frequent program changes in traditional Medicare have hindered the transition to value-based care, discouraging providers from making the up-front investments necessary for the transition, the stability of Medicare Advantage has fostered innovation in value-based payment arrangements.

The supplemental benefits options in Medicare Advantage are a key factor in the program's ability to foster value-based care. These benefits allow providers and plans to better address social determinants of health by covering services not traditionally considered medical. We appreciate Dr. Cherry's recognition of the value added by supplemental benefits and case management in enhancing quality in MA. These benefits, such as transportation, can improve access, and ultimately improve patient outcomes. Considering the pivotal role of MA in the transition to value-based care, we hope that future discussions on the program's value take this into account.

AMGA would be please to meet with MedPAC to discuss our members' experiences and expertise in Medicare Advantage, value-base care, or other issues of interest to the commission. We thank you for your consideration of our comments. Should you have questions, please do not hesitate to contact AMGA's Darryl M. Drevna, Senior Director of Regulatory Affairs, at 703.838.0033 ext. 339 or at ddrevna@amga.org.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Darryl M. Drevna', with a long horizontal flourish extending to the right.

Darryl Drevna
Senior Director of Regulatory Affairs
AMGA