From AMA President Steven J. Stack, MD

Proposed rules issued Wednesday by the Centers of Medicare & Medicaid Services (CMS) represent the most sweeping change in physician payment policy in the last 25 years.

Implementing MACRA
With overwhelming physician support—including from the AMA and the majority of other medical associations—Congress passed the Medicare Access and CHIP Reauthorization Act (MACRA) one year ago. This law repealed the threat of annual payment cuts from the sustainable growth rate formula, and it now offers physicians treating Medicare patients a choice of two payment pathways going forward:

- Participating in the modified fee-for-service model, which will be subject to a revised set of pay-for-performance metrics under the Merit-based Incentive Payment System (MIPS)
- Meeting requirements for alternative payment models (APM), which offer opportunities to improve care delivery while having more payment flexibility

The rulemaking for this law also provides an opportunity to reduce the physician burden associated with the current Medicare reporting requirements for electronic health record meaningful use and clinical quality. The AMA has been vigorously pressing for needed changes to these programs.

While we have not yet digested the entire 962-page regulation, it appears on our initial review that CMS Acting Administrator Andy Slavitt and his senior management team have listened.

Providing physician feedback
We are at the beginning of the formal rulemaking process. CMS leadership has asked for feedback on what the agency did well in the proposed rule, what needs to be revised and what else needs to be included.

This proposed rule gives us an opportunity to provide thoughtful feedback to CMS in order to secure further improvements in the final regulations. In the coming weeks, the AMA will develop a detailed analysis of the proposed rule and coordinate formal written comments with state and national medical societies.

In the fall, CMS will publish a final rule that will set the terms for the initial performance period, which will determine payment bonus and penalty amounts in 2019.

Supporting you throughout the process
Navigating changes with substantial financial consequences for our practices and implications for how we deliver care to our patients will require preparation, sound guidance and adaptation. Change is never easy, and most physicians are already overwhelmed with existing demands.

The AMA is committed to continued advocacy and support for you, your colleagues and your practice teams through every step of this process in the months and years ahead.
To help you in your initial preparations for the coming payment policies, the AMA offers a guide to physician-focused payment models, key points of MIPS and five things you can do now to prepare, among other resources. The AMA's STEPS Forward™ collection of practice improvement strategies also offers a variety of education modules to help physicians take steps toward advancing team-based care, implementing electronic health records, improving care and practicing value-based care.

You can also learn more about MACRA and the ways physicians are already pursuing alternative payment models and other delivery reforms at AMA Wire®. And a webinar at 2 p.m. Eastern time May 11 will feature a physician expert who will share how her practice has adopted a value-based care model that has let them focus on keeping patients at the center of care. Register to participate.

I urge you to take the first step of becoming familiar with the core elements that will determine payments for the MIPS and APM tracks. The core policy elements in MACRA are also surfacing in other public and private insurance programs, so understanding these principles will be essential for most physician practices.

We'll make additional tools available later this year to help you assess your options within the new MIPS and APM programs and choose the best course for your practice. We also will offer online educational programs and in-person forums in the coming months.

Navigating the road ahead
MACRA both presents opportunities and poses risks. On the opportunity side, we have the potential to fix some misguided reporting programs and implement better rewards for physician-led improvements in care delivery.

The risk is that government policymakers may cling to narrow-minded regulatory approaches that are driving the alarming rate of physician burnout. We remain actively engaged in the policymaking process now underway in the hope that we will be better positioned to lower the risk of more excessive regulatory burdens and seize other opportunities to support professional satisfaction and sustainable physician practices.

The AMA has been working closely with state and national medical societies to shape the early stages of MACRA implementation and will continue to do so. You can play an important role by providing your input, support and participation in our efforts to shape a better delivery and payment system for patients and physician practices.

The road ahead will be bumpy, it will certainly be challenging, and course corrections will need to be made. But the goal is well worth it: Building an environment that fosters greater physician satisfaction and more sustainable practices.