

Part B Insider (Multispecialty) Coding Alert

Part B Payment: CMS Continues to Shift Toward MACRA's QPP with Focus on Cardiac Care

Mandatory bundled payments offer incentives to providers that put quality over quantity.

Offering yet another olive branch to the purveyors of quality care, CMS has proposed more bundled payment options for Medicare providers centered on the prevention and treatment of cardiac issues. With MACRA's Quality Payment Program (QPP) in mind, this new proposed rulemaking released on July 25 promises to put more money in the pockets of both providers and hospitals who provide quality care at affordable prices.

"Today's proposal is an important step to improving the quality of care Americans receive and driving down costs," said **Sylvia M. Burwell**, HHS secretary, in a July 25 press release. "By focusing on episodes of care and rewarding successful recoveries, bundled payments encourage hospitals to coordinate care to achieve the best outcomes possible for patients."

Background: Not only does the CDC list heart disease as the leading cause of death in the U.S., as recently as 2014, CMS shelled out over \$6 billion to treat more than 200,000 Medicare beneficiaries who had heart attack and bypass surgery, HHS data suggests.

Bundling payments encourages the coordination of care between hospital and physician since cardiac patients often require a prolonged plan of care across different health care platforms. Medical cooperation is at the heart of this Medicare proposal, with the hope that physicians will work together to truly help patients—and receive the increased monetary incentive in the process.

"Patients want the peace of mind of knowing they will receive high-quality, coordinated care from the minute they're admitted to the hospital through their recovery," said **Patrick Conway, M.D.**, CMS principal deputy administrator, and chief medical officer. "The variation in cost and quality for the same surgery at different hospitals shows there are major opportunities for hospitals included in today's models to reduce costs, improve care, and receive additional payments by improving patient outcomes."

Three Parts Make Up the New Rule

The suggested policies are set to affect 98 metropolitan strongholds chosen at random and would be phased in over a five year period starting July 1, 2017, with the level of both complexity and risk—think MACRA advanced Alternative Payment Model (APM) ideology—increasing over the years of implementation.

Three key pieces make up the cardiac bundled payment puzzle, coming on the heels of the July 21 introduction of the Million Hearts® Cardiovascular Disease (CVD) Risk Reduction Model, a CMS Innovation Center program that seeks to prevent heart disease by assessing risk, improving care, and cutting costs.

The three policy points are:

- The new bundled payment models offer incentives for improving the cardiac rehabilitation of Medicare beneficiaries.
- These new cardiac-centered, bundled-payment models continue the initiative begun this past April with the release of the ruling on bundled payments for hip replacements and surgeries.
- Doctors with significant participation in bundled payment models can qualify for payment incentives under the proposed QPP.

AMA Chimes In

The new ruling increases the likelihood of coordinated cardiac care by providing pay-for-performance opportunities and rewards for engaging in the risks tied to the QPP through MACRA, which is set to take effect on Jan. 1, 2017. The bundled payments as well as the comprehensive care for joint replacement models mentioned in an April 2016 proposed ruling are examples of what CMS would consider as advanced APMs. The American Medical Association (AMA) agrees this care and payment enterprise is a step in the right direction to engage providers and push MACRA forward.

"In the landmark Medicare Access and CHIP Reauthorization Act (MACRA), Congress encouraged physicians to participate in alternative payment models that support their efforts to redesign the delivery of patient care in ways that improve quality and outcomes while also restraining spending growth," **Andrew W. Gurman, MD**, AMA president said in a July 26, 2016 press statement. "Under this new proposal, CMS is broadening its models so that physicians participating in its cardiac and orthopaedic models will qualify as alternative payment model participants under MACRA. This is a good step and in keeping with the goals of MACRA."

Resources: For more information about the proposed rulemaking concerning bundled cardiac payments, visit <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2016-Fact-sheets-items/2016-07-25.html>.

For a closer look at the Million Hearts® Cardiovascular Disease (CVD) Risk Reduction Model, visit <https://innovation.cms.gov/initiatives/Million-Hearts-CVDRRM/>.

To read the HHS press release about bundled cardiac payments, visit <http://www.hhs.gov/about/news/2016/07/25/important-next-step-towards-better-smarter-healthier-medicare-new-payment-models-and-rewards-better>.