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HEALTHCARE STAKEHOLDERS CALL ON CONGRESS TO EXTEND INCENTIVE FOR VALUE-BASED CARE BEFORE END OF YEAR

Alliance for Value-Based Patient Care members join physician, hospital and other organizations advocating for extending Medicare incentive to improve healthcare

WASHINGTON, DC—A diverse group of more than 630 national healthcare organizations, including members of the [Alliance for Value-Based Patient Care](https://valuebasedcare.org) as well as other national, state, and local organizations, today [issued a letter](#) to congressional leadership calling for an extension of Medicare’s advanced alternative payment model (APM) incentives, which are helping the United States transition to a healthcare system led by physicians and other clinicians that invests in and rewards good clinical outcomes, improving the quality of care patients receive. The Alliance includes the American Medical Association, America’s Physician Groups, AMGA, Health Care Transformation Task Force, National Association of ACOs, and Premier Inc.

The letter to Senate leaders Chuck Schumer (D-N.Y.) and Mitch McConnell (R-Ky.), Acting Speaker of the House Patrick McHenry (R-N.C.) and House Minority Leader Hakeem Jeffries (D-N.Y.) urges Congress to extend the Medicare Access and CHIP Reauthorization Act’s (MACRA) 5% incentive for value-based care by two years to ensure physicians and other clinicians continue to participate in Advanced APMs. Joining Alliance members on the letter were American Academy of Family Physicians, Federation of American Hospitals, Medical Group Management Association, National Rural Health Association, and numerous others.

“America cannot afford to take steps backward when it comes to healthcare, but that’s exactly what will happen if Congress allows a vital incentive for value-based care in Medicare to expire this year,” said Jeff Micklos, executive director at the Health Care Transformation Task Force on behalf of the Alliance for Value-Based Patient Care. “Nearly 300,000 clinicians have relied on Medicare’s incentive for ongoing transitions to value-based care. Unless it’s included in Congress’s year-end legislative priorities, progress toward a results-oriented, cost-effective healthcare system will be significantly impeded.”

The letter to congressional leadership explains the significant impact of the 5% incentive for boosting healthcare quality and reducing costs. In 2022, ACOs—one of the most popular types of value-based arrangements—produced approximately \$1.8 billion in savings to Medicare, significantly more than the cost of the financial incentives for value-based care.

The advanced APM incentives are critical to the success of value-based care, because they help cover the costs associated with the investment of transitioning to value-based models, expanding care management teams, developing programs to improve patient care and adopting population health infrastructure.

Medicare’s 5% incentive for value-based care is included in the “Value in Health Care Act” (H.R. 5013), introduced by U.S. Reps. Darin LaHood (R-Ill.), Suzan DelBene (D-Wash.), Brad Wenstrup (R-Ohio), Earl Blumenauer (D-Ore.), Larry Bucshon (R-Ind.), and Kim Schrier (D-Wash.).

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About the Alliance for Value-Based Patient Care

The Alliance for Value-Based Patient Care is a national coalition dedicated to advancing policies that promote value and quality in U.S. healthcare. Learn more at <https://valuebasedcare.org>.