

Congress of the United States
Washington, DC 20515

September 18, 2019

Ms. Seema Verma
Administrator
Centers for Medicare & Medicaid Services
Department of Health & Human Services
ATTN: CMS-1689-P
Mail Stop C4-26-05
7500 Security Blvd.
Baltimore, MD 21244-1850

Dear Administrator Verma:

As Members of Congress dedicated to the goal of advancing value-driven health care, we are writing to express our support for the development of innovative quality measurement that is meaningful to all physicians and the patients for whom they provide care. This may be done by utilizing the statutory authority granted to the Secretary under the Medicare Access and CHIP Reauthorization Act (MACRA).

As physicians and the Centers for Medicare & Medicaid Services (CMS) continue to implement the changes set forth in MACRA, it is our understanding that the current Merit-based Incentive Payment System (MIPS) quality component may not properly assess the quality of work of a large portion of physicians. While measurement in MIPS is necessary for payment adjustments, effective measurement should also provide actionable information to accomplish the following: ensure that the resources and systems are in place to provide high quality care, inform patient decision making, and create continuous improvement cycles for quality and outcomes.

As you know, most employed surgeons are ranked based on measures in the CMS Web Interface. This system evaluates compliance with primary care actions such as immunizations, blood pressure control, diabetes control, and tobacco cessation. It is our understanding that these measures, while important for a patient's overall health, may not always be aligned with the type of care provided to surgical patients. As such, we believe CMS has an opportunity to work with stakeholders to implement quality measurement that is more meaningful to non-primary care physicians and clinicians, which will drive better outcomes for patients.

A strong quality measurement framework should consider meaningful measures that focus on high-value processes, clinical outcomes, and patient reported outcomes or experiences, among other factors. Ideally, these measures should focus on the patient, incorporating the entire team responsible for their care throughout their journey, and should be compatible with cost measures, allowing for a discreet assessment of value.

In order to accomplish the goals of MACRA for all patients, we encourage CMS to utilize its current statutory authority to pursue innovative quality measurement that is meaningful to all physicians and the patients for whom they provide care.

Beyond differentiating among providers for purposes of payment, quality measurement in MIPS should support quality improvement and drive value in the system. This was the intent of Congress in enacting MACRA.

As CMS continues to implement MACRA and address the goals of improving quality and effectiveness in the health care system, we encourage you to work with key stakeholders to develop and implement measurement that goes beyond payment decisions, to inform improvement and better outcomes for all patients.


Sincerely,



George Holding
Member of Congress



Raul Ruiz, M.D.
Member of Congress



Larry Bucshon, M.D.
Member of Congress



Brian Higgins
Member of Congress



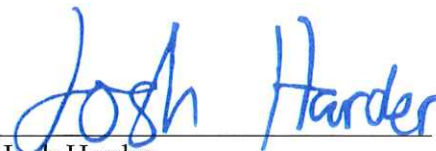
Andy Harris, M.D.
Member of Congress



Kurt Schrader
Member of Congress



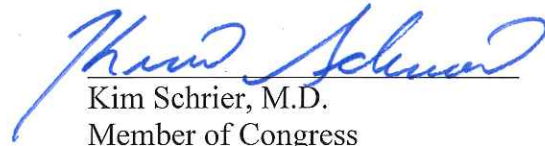
Brian Fitzpatrick
Member of Congress



Josh Harder
Member of Congress



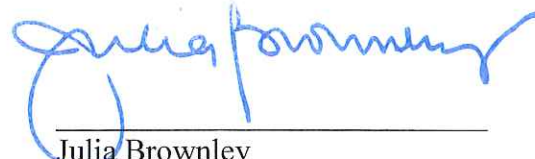
Roger Marshall, M.D.
Member of Congress



Kim Schrier, M.D.
Member of Congress



Brad R. Wenstrup, D.P.M.
Member of Congress



Julia Brownley
Member of Congress



Jackie Walorski
Member of Congress