

# Commission on Quality and Practice 2016 Annual Report

# **COMMISSION ON QUALITY AND PRACTICE**

### Resident

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# **Resident Report**

The AAFP Commission on Quality and Practice works to improve the practice environment of family physicians. The commission studies and develops recommendations, policies, and programs when it comes to the areas of health care delivery, performance measurement, practice transformation/management, quality improvement, health information technology, private sector advocacy, and physician payment.

I was honored to serve as a resident member on this commission during the last year. Initially, I was a bit overwhelmed when attending the winter cluster meeting. The business covered during this commission's meetings is dense and sometimes complicated. This isn't hard to imagine given how convoluted we know our health care delivery system to sometimes be. I was impressed though to hear the passionate physician voices around the table. As I began to decipher the acronyms and catch myself up with the ongoing changes in health care policy, I realized how hard the CQP and AAFP staff has been working to digest these policies and their implications for our membership. As a resident, I have been appropriately focused on the development of my clinical skills, but the issues discussed by the CQP are almost as relevant to my future as a practicing family physician. I learned a great amount about the following.

The major theme of discussion this year was the continually changing healthcare landscape after MACRA. We discussed policies related to the implementation of this new law which did away with the flawed sustainable growth rate formula, preventing a 21% cut to medicare reimbursements. MACRA creates two paths for provider payment, the Merit-based Incentive Payment System (MIPS) and the Alternative Payment Models (APM), which emphasize value-based payment. Their goal is to end the era of fee-for-service payment. The AAFP and other primary care organizations have been loudly advocating for changes in Medicare/Medicaid reimbursement for a long time, and these concerns are finally being heard. Now that changes are being made, the Commission on Quality and Practice is trying to ensure that members are ready to transition to these new payment systems which can seem somewhat daunting at first. As a commission, we brainstormed and came up with a strategy to educate our members that would allow them to learn about these changes and transition their practices accordingly. Members can now learn more about MACRA here: <a href="http://www.aafp.org/news/macra-ready.html">http://www.aafp.org/news/macra-ready.html</a>.

Additionally, we discussed many other topics of interest and how they influence the practice of family medicine and the health of our patients. Among these, we looked at the state of telehealth and 7/22/2016

discussed underutilization of chronic care management codes. Much discussion centered on what we could do to empower AAFP members in these areas. We heard from experts in these areas so that we could better understand the information our membership needs to more effectively implement these services in their practices. Finally, we discussed ongoing advocacy efforts on the part of the AAFP to make sure our interests are heard when it comes to things like deciding which core measures will be used for quality measurements by bodies like CMS and private insurance companies.

Frequently, there was significant interest in my perspective on matters that I will face upon entering my practice environment outside residency. I feel fortunate to have been able to provide input, and I know I'm much more prepared for my career after this involvement. I would urge any other resident interested in the transforming health care system to consider applying for this commission. Our voices on commissions are appreciated and can be especially helpful as representation of resident and new physician AAFP member experiences, so please consider getting involved! Please don't hesitate to reach me with questions.

## **Student Report**

The Commission on Quality and Practice is responsible for developing recommendations. policies, and programs for family physicians in all different settings of practice. We discuss issues related to healthcare delivery systems, performance measurement, practice management and redesign, health information technology, and physician payment. The major theme of discussion this year was the changing healthcare landscape. We discussed policies related to CMS payment restructuring with the introduction of MACRA. MACRA creates two paths for provider payment: the Merit-based Incentive Payment System (MIPS) and the Alternative Payment Models (APM). These pathways emphasize value-based payment, and the goal is to end the era of fee-for-service payment. The AAFP and other primary care organizations have been loudly advocating for changes in Medicare/Medicaid reimbursement for a long time, and these concerns are finally being heard. Now that changes are being made, the Commission on Quality and Practice is trying to ensure that members are ready to transition to these new payment systems. We have been working on programs and educational materials for our members that would allow them to learn about these changes and transition their practices accordingly. We also discussed different practice models including accountable care organizations (ACOs), large physician groups, solo practitioners, and direct primary care. We emphasized the importance of not alienating any of these groups of members, as they will all be key to the future of family medicine. There is no single answer to the primary care shortage in America, and we must all work together to keep family medicine at the forefront of the healthcare revolution.

The experience I have gained working on this commission is invaluable. There is no place in the medical school curriculum where we review these topics in such depth. The work that this commission does is vital to every practicing physician. We should all understand how we are valued and how we are getting paid. If we do not understand these basic elements of practice, we will never be able to advocate for our own worth. I cannot think of a better learning experience than sitting at the same table with experienced physicians talking about the current hot button issues of the American healthcare system. I know that this knowledge will serve me well as I set out in my career in this rapidly changing healthcare landscape.

Note: This report was prepared by the resident or student representative(s) listed and includes their account(s) of the business conducted during their term. This is not an official record of business proceedings from the AAFP or any other entity. To find out more about the business of the AAFP, its congresses, commissions, and current policies visit aafp.org.