

procedures. The AAFP insists that attribution for patients within care episode groups should be to the physician with the highest Part B allowable charges, defined within the proposed rule as a plurality of claims, rather than the methodology suggested in this proposed rule.

Physicians that are part of an Advanced APM have agreed to be responsible for total costs and have incentives and mechanisms available to review, manage and reduce total costs. However, physicians outside such arrangements have limited control over the actions and costs of specialists, are offered no incentives for reducing total costs, and have no agreed-upon goals or mechanisms in place to review, manage and reduce total costs. Primary care physicians outside advanced APM arrangements cannot anticipate that multiple specialties will work together toward total cost of care reduction and should not be held accountable for these costs, many of which will be generated by specialists. Rather, the physicians who generated the costs should be held responsible for such costs.

MIPS APM category

The AAFP objects to the implementation of the entire section of this proposed rule related to “MIPS APMs.” This section of the proposed regulation is incredibly confusing and we have concerns that, as written, CMS is incentivizing physicians to remain in the fee-for-service program rather than to continue their progress towards APMs. In concept, we believe physicians and practices should proceed towards Advanced APMs versus slipping back into the fee-for-service program. CMS and CMMI have implemented policies in the MSSP program that allow ACO's to maintain a neutral financial position for a defined period of time. We believe that this approach may be appropriate in this regulation – allow APMs to sit between the two programs, not eligible for the 5 percent Advanced APM bonus, but not subject to the MIPS methodology either for a period of time such as two years. At the completion of this time period, the APM would either have to move into the full Advanced APM program or be subjected to the MIPS criteria as applicable with no special consideration under any of the four categories.