

February 6, 2015

Centers for Medicare & Medicaid Services Department of Health and Human Services Attention: CMS–1461–P, Mail Stop C4–26–05 7500 Security Boulevard Baltimore, MD 21244–1850

## File Code CMS-1461-P

The American Academy of Physician Assistants (AAPA), on behalf of the more than 100,000 physician assistants (PAs) throughout the United States, appreciates the opportunity to provide comments on the Centers for Medicare and Medicaid Services (CMS) proposed changes to rules governing the Medicare Shared Savings Program: Accountable Care Organizations (ACOs).

PAs are committed to increasing access to quality healthcare services for all individuals and we seek to work in partnership with the Department of Health and Human Services (HHS) and CMS in both the development and advancement of innovative policies that help achieve that goal. It is within this context that we provide our comments.

## Assignment Methodology

AAPA appreciates the efforts by CMS to promulgate rules that positively respond to concerns expressed by PAs regarding their participation in ACOs. In particular, we applaud the proposal to include PAs in Step 1 of the assignment algorithm which recognizes the fact that PAs play the same role as physicians in delivering primary care services.

The existing ACO assignment methodology designates beneficiaries to ACOs in one of two steps. Under the current rules, Step 1 allows a physician to deliver care to a beneficiary and have that beneficiary assigned to an ACO. PAs are not eligible to assign beneficiaries using the Step 1 method. PAs must assign a beneficiary to an ACO utilizing a Step 2 methodology which requires that the beneficiary have at least one visit with a physician in order to be assigned to an ACO.

This policy is extremely problematic because many patients, especially those residing in rural and underserved communities, have their care provided solely by a PA. It is unfair and counter-productive to prohibit Medicare beneficiaries from participating in an ACO care model simply because they have not received care from a physician.

PAs are included in the definition of ACO professionals and are fully enrolled in the Medicare program as healthcare professionals. Beneficiaries should be eligible to participate in an ACO when receiving their primary care services exclusively from a PA. Therefore, we fully support the proposed changes to the assignment process which would allow PAs to assign beneficiaries in similar fashion to physicians under a Step 1 methodology with no requirement for the patient to be treated by a physician.

## **Primary Care Attestation**

We understand the importance of assuring that PAs who assign beneficiaries under Step 1 are in fact functioning as primary care providers. Unlike for physicians, the CMS data base does not list PAs by their specialty. Rather PAs and advanced practice nurses have a "specialty" listing as PAs and APNs, respectively.

AAPA strongly encourages CMS to develop a process of self-attestation for PAs that would allow PAs to sign a document declaring that he or she practices in primary care in order to participate in the Step 1 ACO assignment process. Appropriate penalties can be put in place to assure compliance. Authorizing PAs to self-attest will increase program transparency and accountability.

## Inclusion of TCM and CCM as ACO Primary Care Services

We also support language in the proposed rule which expands the definition of primary care services used in the attribution process to include transitional care management (TCM) and chronic care management (CCM) codes. The medical services delivered under the auspices of these codes are consistent with, and meet the definition of, primary care services.

AAPA appreciates the opportunity to share our views on policies which will impact the ongoing success of ACOs in the Shared Savings Program. If there are questions regarding our comments, please do not hesitate to contact Michael Powe, AAPA's Vice President of Reimbursement & Professional Advocacy at 571/319-4345 or <u>michael@aapa.org</u>.

Sincerely,

John McGinnity, MS, PA-C, DFAAPA AAPA President