May 8, 2017

The Honorable Orrin G. Hatch  
Chairman  
Senate Committee on Finance  
221 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Ron Wyden  
Ranking Member  
Senate Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Johnny Isakson  
131 Russell Senate Office Building  
Washington, DC 20510

The Honorable Mark Warner  
475 Russell Senate Office Building  
Washington, DC 20510

Dear Chairman Hatch, Ranking Member Wyden, Senator Isakson, and Senator Warner,

I am writing on behalf of AMGA to thank you and offer our support for the Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act of 2017, S. 870, a bipartisan bill to strengthen and improve health outcomes for Medicare beneficiaries living with chronic conditions. AMGA is a trade association leading the transformation of health care in America. Representing multispecialty medical groups and integrated systems of care, we advocate, educate, innovate, and empower our members to deliver the next level of high performance health. AMGA is the national voice promoting awareness of our members’ recognized excellence in the delivery of coordinated, high-quality, high-value care. More than 175,000 physicians practice in our member organizations, delivering care to one in three Americans.

We appreciate the time and effort the Senate Finance Committee and the Chronic Care Working Group devoted to this proposal. This bill includes a number of policy options that AMGA recommended to advance team-based care. For example, the bill allows Medicare Shared Savings Program (MSSP) Accountable Care Organizations (ACOs) in track 1 to choose prospective or retrospective attribution. It is important that all MSSP ACOs have the option of prospective assignment so our members can know who their patients are and can develop the administrative, clinical, cultural and financial competencies necessary to eventually assume downside financial risk.
The bill would also waive the originating site requirement to allow for expanded use of telehealth services for downside risk ACOs only. As this bill moves forward, we recommend waiving the originating site requirement for all ACOs regardless of track. There is substantial evidence via the Veterans Administration, the Indian Health Service, state Medicaid programs and commercial health plans that telehealth services reduce hospital admissions and re-admissions, hospital bed days of care, and emergency department use. More generally, telehealth services also improve timely access, quality and care coordination, patient engagement, and reduce costs. Applying this waiver to the ACOs not in Track 1 needlessly limits the benefits of this technology to a very small subgroup of ACO patients. We believe all ACO beneficiaries should benefit from this important technology.

Additionally, we support provisions intended to expand supplemental benefits within the Medicare Advantage (MA) program to improve treatment of chronic conditions. We also support the provision to expand telehealth services in MA.

AMGA strongly endorses the CHRONIC Care Act of 2017 and greatly appreciates your leadership on this issue.

Sincerely,

[Signature]

Donn Sorenson
Chair, Board of Directors
AMGA