MACRA:
5 big questions answered

Presented by:
Kelly Whittle, Whittle Advisors

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Thank you.
Today’s agenda

• Kelly Whittle
  webinar presentation

• Polling & Q&A session

• Sponsor overview:
Ask a question

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April 26, 2017
Today’s industry expert

Kelly Whittle

Kelly is a passionate strategist and expert in change leadership.

As the founder of Whittle Advisors, she shares client successes through international speaking engagements and publications. Her experience includes expertise in strategy, change leadership, and solution implementation for hospitals, physician practices, and specialty groups.

With 20 years of leadership experience, she specializes in developing business strategies based on data-driven evidence. Her clients have been recognized nationally for outstanding ICD-10 Transition achievements. She is a founder of the International Society of Digital Medicine, which is focused on international collaboration to improve healthcare outcomes through the use of technology.
Question 1: Why MACRA? Why now?

**Broader Strategy at Play**

The goal of value-based care is to align Patients, Payers and Providers to achieve the following...

1. Better patient outcomes
2. Lower cost
3. Improved population health

Challenge: There is less money to achieve greater outcomes, which requires a new business model.

**Medicare Access and CHIP Reauthorization Act (MACRA) is NOT an isolated program**

Transitions are happening across the continuum of care making care coordination, real-time data sharing, and patient engagement more important than ever.
Question 2: Does MACRA replace MU, PQRS, and VBM?

MACRA acts as the umbrella covering Meaningful Use, Physician Quality Reporting System, and Value-based Modifier.

MACRA replaces the Sustainable Growth Rate (SGR).

Calculating the SGR – 4 factors:

- ~ % change in physicians’ services fees
- ~ % change in the average number of Medicare fee-for-service beneficiaries
- ~ 10-year average annual percentage change in real GDP per capita
- ~ % change in spend due to regulatory changes
Question 3: Are QPP/MACRA in danger if the ACA is repealed?

Quality Payment Program (QPP) is the program name CMS will use to implement the MACRA regulation. MACRA will not be impacted by action taken to repeal/replace ACA.

1. MACRA received bi-partisan support from both houses and parties.
2. MACRA regulation is separate from Patient Protection and Affordable Care Act.
3. MACRA is designed as payment reform – fee-for-service to value-based healthcare.
Question 4: What are the key dates in the MACRA timeline to be aware of?

MACRA Dates:

- Transition Year 2017
- Data Submission March 31, 2018
- GPRO Groups of 25+ Register June 30, 2017
- Payment Adjustment 2019
Question 5: How can I minimize the strain of MACRA on my practice?

Value-based healthcare is here and expanding/evolving. Success requires a strategy to identify gaps, mitigate risks, and implement the new value-based business model.

1. Complete a review of current operational and analytic capabilities
2. Identify and document gaps
3. Create an action plan based on the gap assessment that prioritizes the areas of highest financial benefit and risk
4. Having a strong partner with the necessary skills and knowledge can be one of the keys to ensure you do not assume unnecessary risks and sustain loss
“Sometimes the questions are complicated and the answers are simple.”

— Dr. Seuss
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Thank you!

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