



For Immediate Release

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CAPG: Proposed Cuts to Medicare Advantage Undermine Value of Coordinated Care – Reward Volume-Based Payment System

Statement by Don Crane, President and CEO of CAPG, following the Centers for Medicare & Medicaid Services' announcement of additional proposed cuts to the Medicare Advantage program.

CAPG is the largest professional association in the U.S. of physician groups practicing in the coordinated care, delegated model.

LOS ANGELES, Calif., Statement by Don Crane, President and CEO of CAPG:

“Year after year of cuts to the Medicare Advantage program will undermine the coordinated care delivery model and the comprehensive care and services that our physician groups provide to the more than 15 million seniors enrolled in the program.

“The proposed new cuts are on top of a six percent cut made to the Medicare Advantage program last year. We urge CMS to withdraw the proposed reduction and instead issue final rates that ensure a strong future for the Medicare Advantage program.

“Seniors enrolled in Medicare Advantage have better access to primary care and prevention services, like mammograms and diabetes care, than they do in traditional Medicare. They also have access to comprehensive care teams, including physicians and other healthcare professionals. All of this reduces the use of higher cost, more intensive care downstream.

“The strengths of Medicare Advantage can be quantified in its enrollment numbers. Among seniors newly eligible for Medicare, 50 percent are enrolling in Medicare Advantage over traditional Medicare.

“CAPG physician organizations know first-hand that the quality and coordination of healthcare services available in Medicare Advantage are unmatched elsewhere in the healthcare delivery system. The proposed cuts are a step in the wrong direction for senior healthcare and seem to indicate a desire to go back to the higher cost days of spending on volume rather than value.”

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