



The Voice of Accountable Physician Groups

VALUE GOALS 2015

BACKGROUND

In January 2015, Health and Human Services Secretary Sylvia Burwell announced ambitious goals for moving healthcare payment from volume (fee-for-service) to value (alternative payment models). Specifically, for Original Medicare, the Secretary seeks to move 30% of payments to alternative payment models by the end of 2016 and 50% by the end of 2018.

To facilitate achievement of this goal, CAPG is adopting value goals for its members.

CAPG's goal is for all CAPG members to have at least 90% of their Medicare (Original and Medicare Advantage) population in capitated payment arrangements by 2018.

CAPG VALUE GOALS

CAPG and its members are committed to advancing alternative payment models that include the following defining features:

- (1) prospective, capitated payment to a multi-specialty physician group;
- (2) physician group provides care for a defined population of patients;
- (3) medical group assumes responsibility for medical care, quality, clinical performance measurement, and accountability for administrative and financial performance.

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LEADERSHIP IN PROLIFERATING THE MODEL ACROSS THE COUNTRY

More than 50% of CAPG's members are already participating in the above model to the fullest extent possible for their organizations. Other CAPG members have some experience with capitated payment in Medicare Advantage and are pursuing other types of alternative payment models, such as accountable care organizations, with their Original Medicare populations.

CAPG is committed to supporting its members' achievement of this goal through its educational and advocacy programs.

CAPG'S COMMITMENT TO EDUCATION

CAPG will continue to educate medical groups about best practices via the Standards of Excellence™ Survey — a blueprint for the development of the clinical and financial attributes necessary to be successful in capitated models.

CAPG will continue to build programming into our annual conferences, regular committee meetings, and Capitol Hill briefings that prepares physician groups to accept clinical and financial risk in the future.

CAPG ADVOCACY

CAPG will work with likeminded organizations in Washington, D.C. to advance the policies necessary to build capitated payment opportunities in Original Medicare.

CAPG will advocate protecting and strengthening capitated delivery models where they are flourishing today, including in the Medicare Advantage program.

CAPG will advocate improving and expanding existing alternative payment models to set a foundation for organizations that want to take capitation in the future.

CAPG will continue to advocate for new models that allow physician organizations to test capitated payments in Original Medicare. As an example, CAPG has developed the Third Option, a new delivery model that uses a capitated payment model to foster high quality coordinated care for seniors.