Whereas, The Merit-based Incentive Payment System (MIPS) was created as part of the Quality Payment Program (QPP) under the Medicare Access CHIP Reauthorization Act of 2015 (MACRA) to institute a new “value-based” payment system for physicians; and

Whereas, MIPS adjusts payments based on performance in the categories of: Quality; Cost; Meaningful Use; and Improvement activities; and

Whereas, Compliance with this program involves the navigation of a labyrinth of rules and regulations; and an alphabet soup of acronyms that constitutes an unreasonable burden on physicians; taking time and energy away from the care of patients; and

Whereas, The “value-based” payment system involves a huge bureaucracy which results in the waste of health care dollars; and

Whereas, There is no evidence that this system of payment helps physicians to care for patients or improves the health of patients, which is the true mission of our profession; therefore be it

RESOLVED, That our American Medical Association work to repeal the law that conditions a portion of a physician’s Medicare payment on compliance with the Medicare Merit-Based Incentive Payment System (MIPS) and Alternative Payment Models (APM) programs (Directive to Take Action); and be it further

RESOLVED, That our AMA continue advocating for a reduction in the administrative burdens of compliance with value-based programs and that these programs comply with evidence-based standards. (Directive to Take Action)

Fiscal Note: Not yet determined

Received: 04/25/18
RELEVANT AMA POLICY

MACRA and the Independent Practice of Medicine H-390.837
1. Our AMA, in the interest of patients and physicians, encourages the Centers for Medicare and Medicaid Services and Congress to revise the Merit-Based Incentive Payment System to a simplified quality and payment system with significant input from practicing physicians, that focuses on easing regulatory burden on physicians, allowing physicians to focus on quality patient care.
2. Our AMA will advocate for appropriate scoring adjustments for physicians treating high-risk beneficiaries in the MACRA program.
3. Our AMA will urge CMS to continue studying whether MACRA creates a disincentive for physicians to provide care to sicker Medicare patients.
Alt. Res. 206, A-17

MIPS and MACRA Exemption H-390.838
Our AMA will advocate for an exemption from the Merit-Based Incentive Payment System (MIPS) and Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) for small practices.
Res. 208, I-16 Reaffirmation: A-17 Reaffirmation: I-17