

**Medicare Accountable Care in 2030 | The Pathway to 100%**

National Press Club

Tuesday, October 3, 2023

*AGENDA*

*The Centers for Medicare and Medicaid Services (CMS) has set a bold vision to transition all Traditional Medicare and Medicare Advantage beneficiaries into accountable care relationships by 2030. Achieving this will require strategic coordination and collaboration across stakeholders to create transformational change in providing high-quality, whole-person care to all Medicare beneficiaries. In partnership with West Health, Duke-Margolis will bring together CMS leadership, leading experts in public health and academic medicine, and innovators from the private sector to discuss a path forward in achieving CMS' strategic vision.*

**1:00 PM Welcome and Preview**

Mark McClellan, MD, PhD, Director of the Duke-Margolis Center for Health Policy  
Shelley Lyford, Chief Executive Officer, West Health

**1:10 PM The Next Iteration of MACRA Congressional Panel**

Mark McClellan, MD, PhD, Director of the Duke-Margolis Center for Health Policy  
Representative Larry Buschon (R-IN, 8th)

**1:30 PM The Role of the Private Sector in Achieving 2030**

Objective: Almost a decade after MACRA was signed into law and with CMS' ambitious goals coming into clear view, the commercial role in achieving the 2030 goals cannot be understated. From Medicare Advantage Plans ensuring accountability in covered lives to value-enablers providing the tools for accountable providers to succeed in accountable care models, the landscape for accountability will require full participation and coordination across stakeholders.

Moderator: Mark McClellan, MD, PhD, Director of the Duke-Margolis Center for Health Policy

Panelists: Kate Goodrich, Chief Medical Officer, Humana  
Lindsay Jubelt, Chief Population Health Officer, Mass General Brigham  
Adam Boehler, Chief Executive Officer, Rubicon Founders

**2:10 PM Accelerating Participation Advanced Primary Care Models**

Objective: CMS continues to build out new primary care models—ACO REACH and Making Care Primary— in addition to improving its Shared Savings Program. These new and redesigned programs aim to target providers who have historically not participated

in CMS reforms, such as safety net providers, as well as provide a foundation upon which other models can be built on or nested within. This session explores attributes of advanced primary care and how CMS' models can help accelerate adoption of advanced primary care.

Moderator: Robert Saunders, PhD, Senior Research Director, Health Care Transformation at Duke-Margolis  
Panelists: Victoria Digennaro, President, Pioneer Physicians Network Primary Care  
Judy Zerzan-Thul, Chief Medical Officer, Washington State Health Care Authority  
Christina Severin, Chief Executive Officer, Community Care Cooperative

**2:50 PM**      **Break**

**3:00 PM**      **Opportunities to Engage Specialists in Accountable Care Reforms**

Objective: Specialists comprise most of the physician workforce and oversee the vast majority of health care spending. Yet, their engagement in value-based care reforms to date is underwhelming. Existing specialty payment models focused on acute episodes or procedures needing improvements to increase participation, and new models that emphasize specialty management of chronic conditions needing development. This panel will talk about opportunities to engage specialists in longitudinal models of care and design features for and barriers to develop these potential payment models.

Moderator: Mark McClellan, MD, PhD, Director of the Duke-Margolis Center for Health Policy  
Panelists: Richard Ashenoff, Executive Director, Memorial Healthcare System  
Larry Kosinski, Founder and Chief Medical Officer, SonarMD, and American Gastroenterological Association  
Chad Mather, SCA Health  
Karen Joynt Maddox, Washington University School of Medicine

**3:45 PM**      **Reforming Medicare to better serve the frail and elderly populations**

Objective: Medicare has reached a historical milestone where a majority of beneficiaries are enrolled in Medicare Advantage as opposed to Traditional Medicare and over 10 million beneficiaries are its value-based programs. The Center for Medicare and the Center for Medicare and Medicaid Innovation have continued to innovate its programs to address social drivers of health, expand site of service options, and improve the accuracy of payments. However, additional innovations and reforms are necessary to ensure CMS' strategic vision is achieved. This session will review some of the more recent changes to Medicare programs and discuss where Medicare Advantage and Traditional Medicare go from here.

Moderator: Mark McClellan, MD, PhD, Director of the Duke-Margolis Center for Health Policy

Panelists:

Meena Seshamani, Deputy Administrator and Director, CMS  
Elizabeth Fowler, Deputy Administrator and Director, CMMI

**4:15 Reflections, Conclusion, and Dismissal**

Mark McClellan, MD, PhD, Director of the Duke-Margolis Center for Health Policy