

Center for Medicare and Medicaid Innovation

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As part of the Patient Protection and Affordable Care Act, Congress mandated the Department of Health and Human Services to establish the Center for Medicare and Medicaid Innovation (Innovation Center) and will provide the Innovation Center with \$10 billion for fiscal years 2011-2019 to identify, evaluate, and disseminate information on new models of care. Don Berwick, M.D., Administrator of the Centers for Medicare and Medicaid Services said in an open blog that the ultimate goal is to explore new approaches to the health care delivery system and payment for health care services, resulting in a higher quality of care and more affordable coverage. The Innovation Center will initially focus on three areas. The first is improvement of care for patients. The Innovation Center will explore ways to make care safer and more patient-centered while increasing availability. The second area is the coordination of care among health care providers. Better provider coordination could improve health outcomes and lead to the development of new models. Finally, the Innovation Center will evaluate the creation of community care models. The Innovation Center intends to consult with hospitals, physicians, and other stakeholders to obtain input and build partnerships. The Secretary of HHS was granted new authority to expand the duration and scope of models of care that improve quality and reduce costs for Medicare and Medicaid recipients, thereby allowing CMS to speed the introduction of successful innovations through its programs without seeking specific legislative authority. The Center will soon begin accepting outside input through its website <http://www.innovations.cms.gov/> with a goal of being operational in February 2011.

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