

Physician-Focused Payment Model Technical Advisory Committee

**Questions to Guide [Listening Session #1](#) for the March 2024 Theme-Based Meeting:
Developing and Implementing Performance Measures for Population-Based Total Cost
of Care (PB-TCOC) Models**

Topic: What Do We Want to Measure in PB-TCOC Models, and How?

Monday, March 25, 1:00 – 2:30 p.m. EDT

Listening Session Subject Matter Experts (SMEs):

- **Thomas Sequist, MD, MPH**, Chief Medical Officer, Mass General Brigham
- **David Meltzer, MD, PhD**, Chief of the Section of Hospital Medicine, Director, Center for Health and the Social Sciences, and Chair, Committee on Clinical and Translational Science, University of Chicago; and Fanny L. Pritzker Professor of Medicine, Department of Medicine, University of Chicago Harris School of Public Policy and the Department of Economics
- **Franklin Gaylis, MD, FACS**, Chief Scientific Officer, Genesis Healthcare Partners; Executive Medical Director, Unio Health Partners; and voluntary Professor, Urology, University of California San Diego

Committee Discussion and Q&A Session

To assist in grounding the Committee’s discussion, the questions for the presenters will focus on the following areas:

- A. Measuring desired characteristics and outcomes of population-based total cost of care models– what features do we want to measure?
- B. Balancing the number and types of performance measures (PREMs, PROMs, process measures, claims-based outcome measures).
- C. How measures for population-based total cost of care models would differ from measures in current value-based purchasing programs.

After each SME provides an 8-10-minute presentation, Committee members will ask the presenters questions.

The questions below are sample questions that Committee members may ask.

1. **What do we want to measure in population-based total cost of care models that will ultimately lead to the quadruple aim (such as care outcomes, patient experience or how care is provided)?**

- a) What are the other goals of performance measurement in population-based total cost of care models? How do we balance the priorities and inputs (such as time needed to complete the measures) of the different goals?
 - b) What are some approaches to measure the aspects of care that contribute to the quadruple aim in population-based total cost of care models?
 - c) How can performance measurement be used to facilitate value-based transformation?
 - d) How may the use of performance measures to drive system change differ among settings and providers? How can we accommodate different settings' needs for performance measurement?
- 2. What is the appropriate mixture of outcome, patient experience, and process measures to directly measure system change and how organizations provide care?**
- e) How do we pick the appropriate number and mix of measure types to accurately measure performance and quality and drive care delivery transformation while minimizing administrative burden?
 - f) Are some measure types more important to include to drive system change than others? Do some measure types come with more administrative burden than others?
 - g) Are certain population-based total cost of care models' performance measures suited for specific provider types or settings? If so, which measures are best matched with which provider types?
- 3. How do the goals for performance measurement differ between population-based total cost of care models and value-based purchasing programs? How are the goals similar?**
- a. What measures should population-based total cost of care models include to drive delivery system change versus the measures that are included in value-based purchasing programs?
 - b. What are some lessons learned from performance measurement in value-based purchasing programs that can be applied to performance measurement in population-based total cost of care models?
 - c. How can measures used for value-based purchasing programs be incorporated into population-based total cost of care models?
- 4. Are there any additional insights you would like to share about performance measurement in population-based total cost of care models?**

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Questions to Guide **Listening Session #2** for the March 2024 Theme-Based Meeting: Developing and Implementing Performance Measures for Population-Based Total Cost of Care (PB-TCOC) Models

Topic: Issues Related to Selecting and Designing Measures for PB-TCOC Models

Monday, March 25, 2:40 – 4:10 p.m. EDT

Listening Session Subject Matter Experts (SMEs):

- **Krishna Ramachandran, MBA, MS**, Senior Vice President, Health Transformation and Provider Adoption, Blue Shield of California
- **Dana Gelb Safran, ScD**, President and Chief Executive Officer, National Quality Forum
- **Vivek Garg, MD, MBA**, Chief Medical Officer, Primary Care, Humana
- **Sai Ma, PhD, MPA**, Director, Enterprise Clinical Quality, Elevance Health

Committee Discussion and Q&A Session

To assist in grounding the Committee's discussion, the questions for the presenters will focus on the following areas:

- A. Challenges related to current performance measures – implications for total cost of care performance measurements.
- B. Balancing the number and mixture of performance measures with administrative burden – importance of specialty-specific measures versus total cost of care-level indicators.
- C. Improving design and implementation of patient-reported measures in population-based total cost of care models.
- D. Identifying health equity measures for population-based total cost of care models.

After each SME provides an 8-10-minute presentation, Committee members will ask the presenters questions.

The questions below are sample questions that Committee members may ask.

1. What are the major challenges providers and health care systems experience with implementing performance measures in population-based total cost of care models?

- a. What challenges do providers face with achieving substantial changes in measure rates to attain the relative benchmark from year to year?

- b. What are some strategies systems and providers can employ to overcome the performance measures' challenges?
 - c. What are some alternative measures that might better capture total cost of care model participants' performance than the measures that are currently used? Which measures may be more effective at driving system transformation in total cost of care models?
 - d. What are some challenges with patient attribution and risk stratification for performance measurement in population-based total cost of care models? What have been some successful approaches that have overcome these challenges?
- 2. How can administrative burden be minimized while implementing the correct measures to accurately capture specialty-specific as well as organization-wide performance?**
- a. How are organization-wide measures versus specialty-specific or setting-specific measures implemented in total cost of care models?
 - b. When is it better to have organization-wide versus specialty-specific or setting-specific measures?
 - c. Are there any examples of total cost of care models that have an appropriate balance of specialty and setting-specific measures as well as organization-wide measures?
- 3. What are some approaches to improve the design and implementation of patient-reported measures in population-based total cost of care models?**
- a. To what extent can patient/caregiver experience measures accurately reflect the provision of patient-centered, coordinated care relative to direct measures of those processes?
 - b. What are some best practices for incorporating patient-centered outcome measures into population-based total cost of care models?
 - c. What are some examples of other alternative payment models that have successfully incorporated patient-reported measures into their performance measurement? Can these approaches be applied to population-based total cost of care models?
- 4. What performance measures are currently being used to evaluate health equity in population-based total cost of care models?**
- a. What additional measures related to health equity can be implemented in population-based total cost of care models to improve clinical and patient satisfaction outcomes across patient populations?
 - b. What strategies can be taken to prevent unintended negative consequences of performance measurement, such as worsening disparities, from occurring?
 - c. What are some lessons learned regarding performance measure selection from population-based total cost of care models that have larger improvements in health equity than others?
- 5. Are there any additional insights you would like to share about selecting performance measures for population-based total cost of care models?**