

# Physician-Focused Payment Model Technical Advisory Committee

## Potential Questions for **Listening Session #1** for the

### March 2025 Theme-Based Meeting:

#### ***Reducing Barriers to Participation in Population-Based Total Cost of Care (PB-TCOC) Models and Supporting Primary and Specialty Care Transformation***

#### ***Topic: Reducing Organizational-Level Barriers Affecting Participation in PB-TCOC Models***

**Monday, March 3, 1:10 p.m. – 2:40 p.m. EST**

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#### **Listening Session Subject Matter Experts (SMEs):**

- **Clif Gaus, ScD, MHA**, Past President and Chief Executive Officer, National Association of ACOs
- **David Johnson, MD, MPH**, Assistant Professor of Urology, University of North Carolina, and Clinical Operating Partner, Rubicon Founders
- **Angelo Sinopoli, MD**, Executive Vice President of Value-Based Care, Cone Health
- **Dan Liljenquist, JD**, Chief Strategy Officer, Intermountain Health

#### **Committee Discussion and Q&A Session**

After each SME provides an 8–10-minute presentation, the Committee discussion will focus on questions raised by Committee members in response to the SMEs' presentations.

The following are examples of questions that Committee members may ask.

#### **A. Approaches for Determining and Improving Predictability of ACO Performance Benchmarks**

**Question 1:** *What are best practices for improving the predictability of ACO benchmarks and to effectively address the ratchet effect?*

- a. How might these approaches vary depending on the type of provider organization that is participating?
- b. How can current approaches be tweaked to more effectively address the ratcheting effect?

## **B. Role of Conveners in Increasing Participation in PB-TCOC Models**

**Question 2:** *What roles may conveners play in increasing participation of certain kinds of providers in PB-TCOC models?*

- a. What types of conveners currently exist in the value-based care landscape and what evidence has shown that using conveners increases participation?
- b. How can value-based care organizations better use conveners to increase participation?
- c. How should payments to conveners be made?

## **C. Can We Incentivize Clinical Integration?**

**Question 3:** *Why has increased participation in value-based care not always resulted in improvements in clinical integration? Which incentives related to improving clinical integration within organizations participating in value-based care are most effective?*

- a. What are examples of PB-TCOC models and providers that are using value-based payment incentives to encourage clinical integration?
- b. How might approaches to incentivize clinical integration vary depending on the type of organization that is participating (e.g., physician-owned, hospital-owned)?

## **D. Addressing Workforce Challenges Related to Supporting Value-Based Care**

**Question 4:** *What are some approaches that various types of organizations are using to address workforce challenges related to increasing providers' participation in person-centered, multidisciplinary, team-based care?*

- a. What do providers need to successfully perform and thus increase their participation in team-based primary care?
- b. How might the integration of teams differ depending on types of settings (e.g., critical access hospitals, safety-net hospitals, independent practices, integrated delivery systems)?
- c. Have some organizations been successful in increasing the number of medical residents that have been doing rotations in multidisciplinary team-based primary care settings? If so, how?
- d. To what extent do current residency programs teach value-based care when training physicians?

## **Conclusion**

**Wrap-up Question:** *Are there any additional insights you would like to share about reducing organizational-level barriers affecting participation in PB-TCOC models?*