

Physician-Focused Payment Model Technical Advisory Committee

According to the Physician-Focused Payment Model Technical Advisory Committee (PTAC) bylaws voted on and approved by PTAC on June 21, 2016:

“PFPM-specific disclosures. *Prior to reviewing, participating in deliberations, and/or voting on a PFPM submitted to the Committee, Committee members shall disclose any role they have played in the development of the submitted PFPM and any impact that such a PFPM could have on them if it were approved.”*

PTAC members’ disclosures relating to potential conflicts of interest and potential threats to impartiality related to the identified proposal are presented below:

Submission from the Coalition to Transform Advanced Care (C-TAC) for a Physician-Focused Payment Model entitled, the “Advanced Care Model (ACM) Service Delivery and Advanced Alternative Payment Model (AAPM)”.

PTAC Member Disclosures	
Committee member	Disclosed Information
<i>Jeffrey Bailet</i>	<p>Blue Shield has been a member of C-TAC for 4 years. We did not renew our membership for this year but Blue Shield of California still works closely with many of their committees. We will be speaking at the upcoming C-TAC summit in November as well, and we are partnering with C-TAC on a multi-Blues workgroup on palliative care, supported by BCBSA.</p> <p>There was a survey of C-TAC members to provide input into the APM proposal over a year ago with an endorsement of support on the concept of an APM for palliative care at that time.</p> <p>Leadership confirmed that if the APM aligned with our current plan to roll out our APM, we'd be in support of a Medicare APM. There was no formal commitment made to C-TAC nor did I participate in the survey or communicate with C-TAC staff in any capacity.</p>
<i>Robert Berenson</i>	Nothing to Disclose
<i>Paul Casale</i>	Nothing to Disclose
<i>Tim Ferris</i>	I oversee palliative care programs with partner’s healthcare.
<i>Rhonda Medows</i>	Nothing to Disclose
<i>Harold D. Miller</i>	I am currently assisting the American Academy of Hospice and Palliative Medicine to develop an alternative payment model for palliative care, which will address patients and care needs that are

	similar, but not identical, to the CTAC proposal.
<i>Elizabeth Mitchell</i>	Nothing to Disclose
<i>Len M. Nichols</i>	Nothing to Disclose
<i>Kavita Patel</i>	Nothing to Disclose
<i>Bruce Steinwald</i>	Nothing to Disclose
<i>Grace Terrell</i>	Nothing to Disclose