Informing PTAC’s Review of Physician-Focused Payment Models: Presentation on Public Input Received

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U.S. Department of Health and Human Services
The Release of the RFI is Consistent With PTAC’s Vision

• The release of the June RFI is consistent with PTAC’s Vision Statement, which states that:

  o “We believe that proposed solutions from frontline stakeholders in our delivery system can substantially enhance quality, improve affordability and influence policy development and system transformation.”

  o “PTAC provides a forum where those in the field may directly convey both their ideas and their concerns on how to deliver high value care for Medicare beneficiaries and others seeking health care services in our nation.”

Activate Stakeholders

to recognize care and payment issues and respond by developing models

Increase Awareness of Issues

identified as important payment and patient care issues by stakeholders on the front lines
RFI Questions

1. What are the other current challenges in healthcare delivery and payment?
   - What is needed to push forward on addressing care delivery issues and alternative payment models?
   - Are there other actual and potential PFPMs that have not heretofore been addressed in proposals submitted to PTAC?

2. What other factors would be important to take into consideration to inform PTAC’s evaluation of proposals, including factors related to engagement and adoption of models?

3. How might a proposed PFPM build on the learnings from earlier models?

4. How might care models that are included in the proposals reviewed by PTAC be incorporated in broader models, like Accountable Care Organizations (ACOs)? Direct Contracting?
   - What factors would be important to take into consideration, such as barriers or facilitators for adoption?
Respondents

- American Academy of Family Physicians (AAFP)
- American Medical Association (AMA)
- American Academy of Home Care Medicine (AAHCM)
- American Academy of Neurology (AAN)
- Coalition to Transform Advanced Care Medicine (C-TAC)
- American College of Physicians (ACP)
- **Specialty societies organized by the ACP**: American Academy of Allergy, Asthma and Immunology; American Academy of Hospice and Palliative Medicine; American Academy of Neurology; American College of Chest Physicians; American College of Rheumatology; American Gastroenterological Association; American Society of Clinical Oncology; Infectious Diseases Society of America; Society of General Internal Medicine; and the Society for Post-Acute and Long-Term Care Medicine
Current Challenges & Priority Areas Included:

“Fragmentation in health care increases medical errors and poor outcomes, system waste and inefficiencies, and dissatisfaction for all parties. These effects are compounded when patients have multiple clinicians involved in their care.”

“PTAC should give priority consideration to models that support and reward high-value interactions across settings...”

“One of the central considerations when it comes to existing models is the lack of engagement between specialty and primary care clinicians.”

Coordination & integration of care across services
**Considerations: Factors to Take into Consideration in Proposal Review**

"There is an opportunity for new models to be implemented or for existing models to expand in such a way that bridges the chasm between primary and specialty care and engages specialists in more robust ways, including by promoting specialist participation in the financial rewards and risks of the model."

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<th><strong>Proposals that...</strong></th>
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<tr>
<td>are for specialists</td>
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<td>are about serious illness</td>
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<td>address the cost of home care</td>
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<tr>
<td>integrate non-physician providers</td>
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<td>engage community-based organizations</td>
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<td>engage caregivers</td>
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<td>impact underserved and minority communities</td>
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<td>increase financial stability for providers</td>
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<td>offer upfront investments for small, rural, and primary care providers</td>
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<td>balance quality with savings to avoid stinting</td>
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"Signal that PTAC is a viable path for clinicians to meaningfully participate in value-based care models that directly apply to the care in which they provide.”

“Providing scalable opportunities for specialties not previously engaged in value-based care models should be a priority for PTAC and HHS moving forward.”

**Theme-based Discussions:** Priority areas identified in current or previous proposals and as identified by stakeholders, including CMS.

**Proposals/input:** Proposals and information highlight specific unmet needs.
Appendix

• Full comments are available on the For Public Comment page of the ASPE PTAC website.