

# Physician-Focused Payment Model Technical Advisory Committee

## Potential Questions for [Listening Session #1](#) for the

### September 2024 Theme-Based Meeting:

#### *Identifying Pathways Toward Maximizing Participation in Population-Based Total Cost of Care (PB-TCOC) Models*

#### *Topic: [Organizational Structure, Payment, and Financial Incentives for Supporting Accountable Care Relationships](#)*

Tuesday, September 17, 9:10 a.m. – 10:40 a.m. EDT

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

- [Alice Jeng-Yun Chen, PhD, MBA](#), Vice Dean for Research and Associate Professor, University of Southern California
- [Michael C. Meng, MBA](#), Chief Executive Officer and Co-Founder, Stellar Health
- [Steven P. Furr, MD, FAAFP](#), President, American Academy of Family Physicians - ([Previous Submitter](#) - APC-APM - Advanced Primary Care: A Foundational Alternative Payment Model for Delivering Patient-Centered, Longitudinal, and Coordinated Care proposal)
- [Jenny Reed, MSW](#), Senior Executive Officer, Southwestern Health Resources

#### 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. Payment and Incentives for Value-Based Care

**Question 1:** *What are effective strategies for structuring payment to encourage participation of different kinds of providers and foster accountable care relationships in PB-TCOC models?*

- a. What strategies are most effective for encouraging participation of integrated delivery systems? How do these strategies differ from strategies used in physician-led or less integrated models?
- b. How do these strategies differ based on provider size or geographic area (such as urban, rural)?
- c. How can financial incentives be structured to ensure that financial risk occurs not only at the organization level but is also occurring at the provider level.

- d. What opportunities exist for developing models that scale across payers?

## **B. Approaches for Achieving Care Coordination Through Team-based Care – To What Extent is Formal Clinical Integration Needed?**

**Question 2:** *How should financial incentives be structured to support coordinated, patient-centered care (e.g., primary, specialty, behavioral health, drugs)?*

- a. What are different strategies for implementing team-based care across various organizational settings?
- b. To what extent is formal clinical integration needed to facilitate accountable care relationships and participation in PB-TCOC models?
- c. What kinds of challenges and opportunities that exist related to improving care coordination across specialties and settings, and supporting accountable care relationships among less integrated providers? What kinds of enabling policies can help to facilitate accountable care relationships among less integrated providers?
- d. If so, are there alternatives to multidisciplinary team-based care that can be more effective in facilitating care coordination?

## **C. Nested Specialty and Setting-Specific Episodes**

**Question 3:** *What are effective strategies for incentivizing specialty participation in PB-TCOC models, including nesting disease- or episode-specific models within TCOC models?*

- a. How should accountability be shared between primary care and specialty providers in PB-TCOC models? How should this vary for different kinds of specialists (such as medical, procedural)?
- b. What role can nested disease and episode-specific episodes play in PB-TCOC models?
- c. How should payment and financial incentives be structured for nested models?
- d. What are examples of models or programs that have successfully nested disease- or episode-specific models within TCOC models?
- e. Are there situations where nesting models is not appropriate and separate models should be implemented for certain diseases, conditions, and/or settings?

## **Conclusion**

**Wrap-up Question:** *Are there any additional insights you would like to share about organizational structure, payment, and financial incentives for supporting accountable care relationships?*