



# STARFIELD SUMMIT

*Advancing & Improving  
Measurement and  
Value in Primary Care*



# Welcome!

- We will begin shortly.
- **Please make sure your microphone is muted unless you are speaking/presenting.**
- If you would like to ask a question or make a comment, please utilize the “raise hand” function or type in the chatbox.
- When introducing yourself during the roll call, please share your name, organization and position.
- We will keep this very brief so that we maximize our meeting time. Thank you!



# Poll Everywhere Instructions

- We will be utilizing the Poll Everywhere platform today.
- In preparation to submit your poll question responses, please register by computer or cell phone.
- Register by Computer: [pollev.com/chs](https://pollev.com/chs) (link in chat)
- Register by Cell Phone: **Text “CHS” to 22333**



# Roll Call: Advisory Committee Members

- ▶ **Joel Andress, PhD** | ESRD Measures Development Lead, Division of Quality Measurement, CMS
- ▶ **Howard Beckman, MD, FACP, FACH, FNAP** | Clinical Professor of Medicine, Family Medicine and Public Health Science, UPMC; Senior Consultant, Common Ground Health
- ▶ **Beth Beudin-Seiler, PhD** | Health Care Research Analyst, Systems Research and Initiatives Group, Altarum
- ▶ **Arlene Bierman, MD, MS** | Director, Center for Evidence and Practice Improvement, AHRQ
- ▶ **Roger Bush, MD** | Primary Care Provider, Pike Market Medical Clinic, ABIM and ABFM Board Member
- ▶ **Daniel Carey, MD, MHCM** | Senior Vice President & Chief Medical Officer of the Physician Enterprise, Providence
- ▶ **Marcos Dachary** | Principal, SVP of Sales & Growth, Milliman MedInsight
- ▶ **Gwen Darien** | Executive Vice President for Patient Advocacy and Engagement, National Patient Advocate Foundation
- ▶ **Ishani Ganguli, MD, MPH** | Assistant Professor, Harvard Medical School; Internal Medicine, Brigham and Women's Hospital
- ▶ **Rick Glazier** | Senior Core Scientist, Institute for Clinical Evaluative Sciences, Canada
- ▶ **Diane Harper, MD, MPH, MS** | Professor, University of Michigan; NAPCRG; President, Board of Directors, NAPCRG
- ▶ **Aparna Higgins** | Senior Policy Fellow, Duke-Margolis Center for Health Policy
- ▶ **Lauren S. Hughes, MD, MPH, MSc, FAAP** | State Policy Director, Farley Health Policy Center, University of Colorado Anschutz Medical Campus; Associate Professor of Family Medicine, Department of Family Medicine, University of Colorado; ABFM
- ▶ **Karen Johnson, PhD** | Vice President, Division of Practice Advancement, AAFP



# Roll Call: Advisory Committee Members

- ▶ **John Keats** | Market Medical Executive, Cigna Health Care
- ▶ **Reid Kiser, MS** | Director, Division of Quality Measurement, CMS
- ▶ **Alex Krist, MD, MPH** | Professor & Associate Professor, Family Medicine and Population Health, VCU Health; Co-Director, Virginia Ambulatory Care Outcomes Research Network (ACORN); Director, Community Engaged Research, Center for Clinical and Translational Research
- ▶ **Bruce E. Landon, MD, MBA, MSc** | , Professor of Health Care Policy, Department of Health Care Policy, Harvard Medical School; Professor of Medicine and Practicing Internist, Beth Israel Deaconess Medical Center
- ▶ **John Mafi, MD, MPH** | Associate Professor of Medicine, Division of General Internal Medicine and Health Services Research, David Geffen School of Medicine, UCLA; Affiliated Adjunct Physician Policy Researcher in Health Policy, RAND Corporation
- ▶ **David Mirkin, MD** | Chief Medical Officer, Milliman MedInsight; Principal, Physician Healthcare Management Consultant, Milliman
- ▶ **Warren P. Newton, MD, MPH** | President & Chief Executive Officer, ABFM
- ▶ **Lars Peterson, MD, PhD** | Vice President of Research, ABFM
- ▶ **Robert L. Phillips, MD, MSPH** | Executive Director, The Center for Professionalism and Value in Health Care
- ▶ **Jacob Quinton, MD, MSHS, FACP** | Medical Officer, Center for Medicare and Medicaid Innovation (CMMI); Primary Care Internist
- ▶ **Eugene Rich, MD** | Senior Fellow, Mathematica
- ▶ **David Schmitz, MD** | Professor and Chairman, Department of Family and Community Medicine, University of North Dakota School of Medicine and Health Sciences
- ▶ **Jason Spangler, MD, MPH, FACPM** | Executive Director, Global HTA Policy Strategy & Engagement, Amgen
- ▶ **Katy Spangler** | Co-Director, Smarter Health Care Coalition; Principal, Spangler Strategies



# Roll Call: Advisory Committee Members

- ▶ **Christina Stasiuk, DO, FACOI** | Market Medical Executive, Cigna Mid-Atlantic Region
- ▶ **Lauren Vela** | Director Health Care Transformation, Walmart



# Planning Committee

- **Beth A. Bortz, MPP** | President & CEO, Virginia Center for Health Innovation
- **Andrew Bazemore, MD, MPH** | Senior Vice President of Research and Policy, ABFM
- **A. Mark Fendrick, MD** | Professor, University of Michigan; Director, VBID Center
- **Stephen A Horan, PhD** | Founder & CEO, Community Health Solutions
- **Saraya A. Perry, MPA, MNM** | Project Coordinator, Virginia Center for Health Innovation
- **Jill Shuemaker, RN, CPHIMS** | Clinician Measure Director, The Center for Professionalism & Value in Health Care



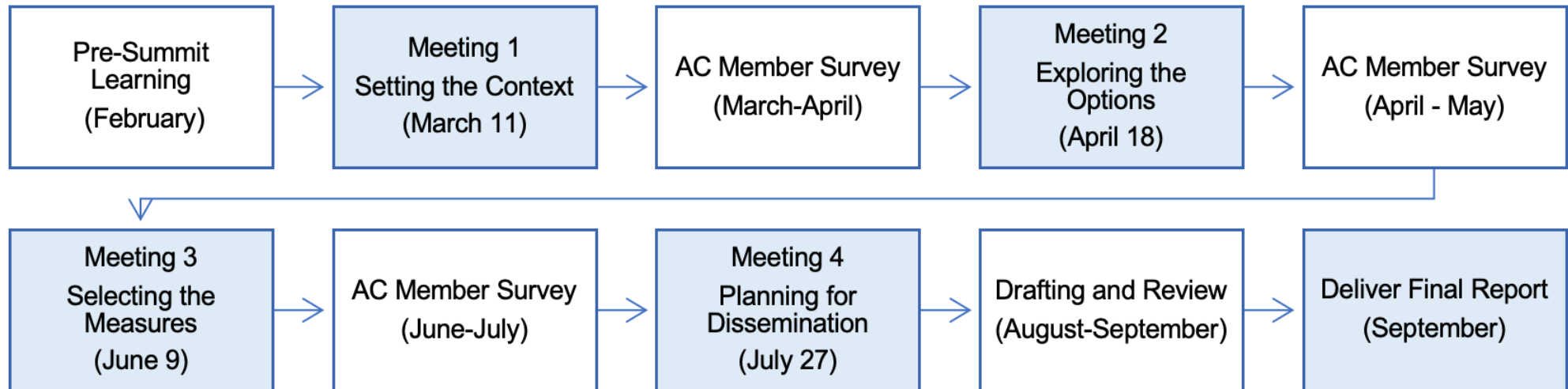
# Agenda

Time	Topic / Questions	Facilitators
2:00-2:15	Welcome, Introductions, and Overview of the Meeting	Beth Bortz, MPP Andrew Bazemore, MD
2:15-2:35	Survey Results: A Working Set of Criteria for Identifying Viable LVC Measures	Stephen Horan, PhD
2:35-3:15	Insight from the Field: Exploring Existing Options for Identifying LVC Measures	Stephen Horan, PhD
3:15-3:35	Some Initial Reactions: Potential Pros and Cons of Existing Options	Andrew Bazemore, MD
3:35-3:50	Break	
3:50-4:30	Small Group Discussion of Existing Options	Team
4:30-4:55	Full-Group Sharing and Discussion	Andrew Bazemore, MD Beth Bortz, MPP Stephen Horan, PhD
4:55-5:00	Wrap up and Next Steps	Beth Bortz, MPP



# Workplan

## Starfield V Summit Work Plan



# Survey Results: A Working Set of Criteria and Considerations for Identifying Viable LVC Measures

We applied your insights from Meeting 1...



To develop a pre-meeting survey on possible criteria and considerations...



And generate a working draft list based on survey results...



# Insights from Meeting 1...

Q1. Why is it important to identify and measure LVC in primary care settings?

- To reduce patient harm, improve outcomes, and address equity (11)
- Inform and optimize practice (28)
- To be transparent (5)
- To gauge the scope and magnitude of LVC (20)
- To optimize use of limited resources (16)
- To build alliances with employers (1)

Q2. What are the pitfalls and unintended consequences that might lead some PCPs to resist engaging in identifying and measuring LVC?

- Adverse impact on patient experience & provider relationships (12)
- Adverse impact on provider autonomy (14)
- Adverse impact on alert fatigue and measurement burden (14)
- Lack of clear consensus on measures and recommendations (7)
- Conflicting payment incentives (10)
- Gaps in system supports (13)
- Adverse impact on morale (6)

Q3. How might we use measure design to mitigate these pitfalls and unintended consequences?

- Focus on harm reduction, positive outcomes, and savings for patients (11)
- Use LVC measures that are relevant for PCPs (19)
- Engage health care organizations as accountable partners (27)
- Create aligned incentives for PCPs
- Equip PCPs with effective supports (28)
- Use benchmarking with a panel/population perspective (7)



# A working draft set of criteria and considerations...

## A. Impact Criteria - LVC measures should inform care decisions that result in these impacts...

- Reduce patient harm
- Facilitate patient savings
- Optimize use of limited resources
- Inform quality improvement
- Improve patient outcomes
- Inform efforts to advance health equity
- Demonstrate transparency and value to payers and partners
- Other

## B. Technical Criteria - LVC measures should be...

- **Relevant.** The measure is relevant for its purpose of reducing low-value care.
- **Actionable.** The measure is produced in a format and timetable that can be used to prompt action by PCPs.
- **Accurate.** The measure is based on accurate data and a credible methodology.
- **Feasible.** The measure is feasible to produce from existing data sources.
- Other

## C. Implementation Considerations - LVC measures are more likely to be effectively implemented to the extent they are...

- Supported by internal practice systems, policies, and procedures
- Based on credible data and measures
- Focused on harm reduction, positive outcomes, and savings for patients
- Viewed as clinically relevant by PCPs
- Based on shared accountability for performance with the health care organization and downstream providers.
- Presented to individual providers in ways that reflect performance with respect to peers while respecting provider autonomy
- Aligned with practical incentives for PCPs
- Other

See the handout for additional comments in response to 'other'



# Exploring Existing Options for Identifying LVC Measures

## Our Flow

Insights from  
the Field

Some Initial  
Reactions

Break

Small Group  
Discussion

Full-Group  
Sharing and  
Discussion

At the end of the day, we'll ask for your insight on:

- 1. The best options we should consider
- 2. Missing elements that need development

# Insights from the Field...



## Questions:

1. What are the options to consider as potential sources of LVC measures?
2. What have we learned from experience with implementation of these options?
3. What are some potential pros and cons of these options?

### Choosing Wisely

- Stephen Horan, PhD (Moderator)

<https://www.choosingwisely.org>

### US Preventive Services Task Force

- Alex Krist, MD, MPH

<https://www.uspreventiveservice taskforce.org/uspstf>

### Health Plan Approaches

- John Keats, MD

Speaker bios at  
<https://www.starfieldsummit.com/starfieldsummitv-attendees>

### Other Approaches Including International

- Please share your insights...

# Insights from the Field...



## Insight Poll

- Are there other potential sources of LVC measures that we should consider? These might include employer efforts, health plan efforts, public sector efforts, international efforts, or any other source of ideas.



# Some Initial Reactions...



Pros, cons, insights, additional ideas?

Andrew Bazemore, MD  
(Moderator)

Bob Phillips, MD,  
MSPH

Eugene Rich, MD

Katy Spangler

Speaker bios at  
<https://www.starfieldsummit.com/starfieldsummitv-attendees>





# Break

Please remain signed into the Zoom meeting.

Feel free to turn off your camera and mute your mic during the break.



# Small Group Discussion

(Discussion guide in chat box)



## Small Group Discussion Guide

**Our Purpose.** The purpose of this small-group discussion segment is to give everyone a chance to share their perspectives on the potential of available options for identifying LVC measures.. By sharing our insights in small groups, we can learn from each other and clarify our thinking about the issues.

**Three Questions.** This will be an informal discussion where everyone gets a chance to share their insights. We've outlined three questions to serve as a guide for discussion. Your facilitator will guide you through the discussion of each question.

Q1	Using our draft set of criteria and considerations as a reference framework, do any of the options outlined today meet our expectations as a source of LVC measures for primary care?
Q2	Are there other, better options we should consider?
Q3	What are we missing that needs development?

**Report Out.** We encourage you to note your most important take-aways from this discussion so you are ready to share your thoughts with the full group. When we reconvene as a full group, we'll invite everyone to share your 'top of mind' answers to the discussion questions via Poll Everywhere.

**Notes:**

# Member Insights: Full Group Sharing (Poll Everywhere)

- ▶ We will be utilizing the Poll Everywhere platform today.
- ▶ If you have not already done so, please register by computer or cell phone in preparation to answer the upcoming poll questions.
- ▶ Register by Computer:  
[pollev.com/chs](https://pollev.com/chs) (link in chat)
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# Member Insights: Full Group Sharing (Poll Everywhere)

- ▶ Reflecting on all of the options identified throughout our discussion today:
  - ▶ P1. Which are the best options we should consider?
  - ▶ P2. What are we missing that needs development?



# Wrap Up & Next Steps



# Meeting 3

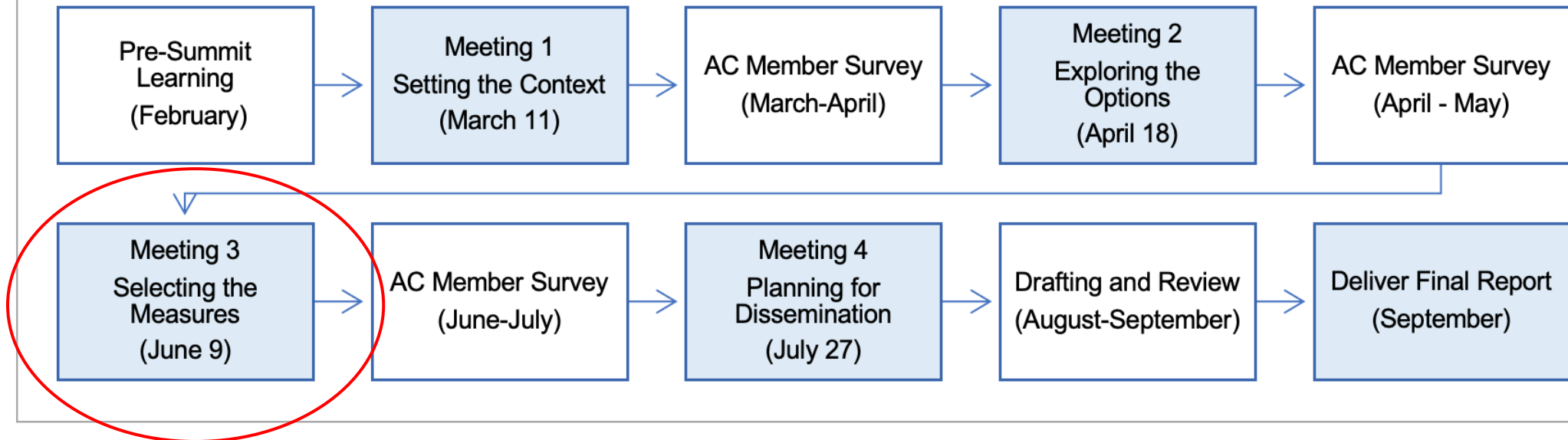
Meeting 3 - June 9, 2022, 1-5pm

- ▶ Focus on Selecting Measures
  - ▶ Pre-Meeting Survey on Candidate Measures
  - ▶ Review and Discussion of Survey Results
  - ▶ Consensus Polling on LVC Measures
  - ▶ Summary and Discussion of Polling Results



# Our Overall Work Plan

## Starfield V Summit Work Plan



Poll Question: Thinking about our overall project approach, what else should we be talking about as we prepare for Meeting 3 and beyond?

