

# Overview of the PTAC Proposal Process

March 28, 2017

# + Quality Payment Program (QPP)

Beginning in 2017, most physicians will be required to choose whether to be evaluated based on performance measures and activities under the Merit-based Incentive Payment System (MIPS) or to participate in an Advanced Alternative Payment Model (APM).

**Currently limited Advanced APM opportunities for physicians, especially specialists.**



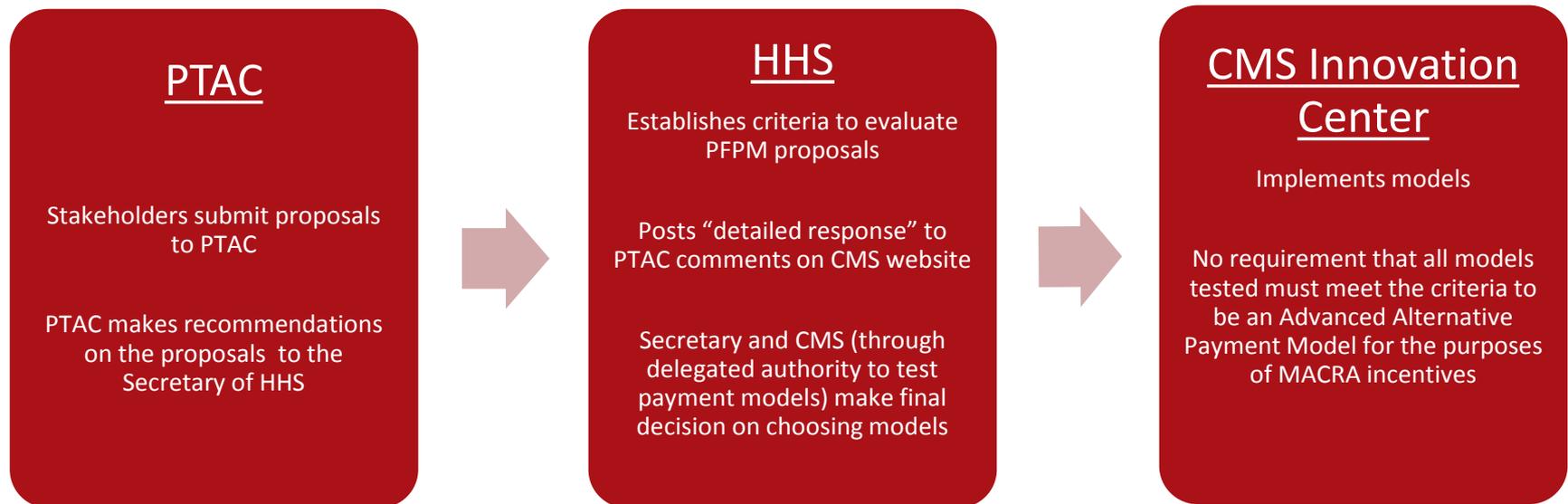
## Physician Focused Technical Advisory Committee (PTAC)

*PTAC was created by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) to make recommendations to the Secretary of the Department of Health and Human Services (HHS) on proposals for Physician-Focused Payment Models (PFPMs) submitted by individuals and stakeholder entities.*

*As required by MACRA, the Secretary of HHS established criteria for PFPMs and to respond to PTAC recommendations. PTAC will evaluate the extent to which proposed models meet the Secretary's criteria and to make recommendations with respect to refinement, further study, testing, and / or implementation of the proposed PFPMs.*

Source: PTAC website (<https://aspe.hhs.gov/ptac-physician-focused-payment-model-technical-advisory-committee>)

# + Process, Roles and Responsibilities



# + PTAC Proposal Review Process

<b>Step 1</b>	<u>Submitter</u> : Submits letter of intent (LOI)
<b>Step 2</b>	<u>Submitter</u> : Submits proposal (rolling review process, no set deadline)
<b>Step 3</b>	<u>PTAC</u> : Initiates proposal review process (estimated at 16 weeks) <ul style="list-style-type: none"><li>• Identification of PTAC reviewers without conflicts</li><li>• Appointment of a preliminary review committee</li><li>• Review of proposal by preliminary review team</li><li>• Public comment period</li><li>• Report from preliminary review team</li><li>• Public meeting on the proposal</li><li>• Discussion and vote by PTAC on the proposal</li></ul>
<b>Step 4</b>	<u>PTAC</u> : Submits report to Secretary of Health and Human Services (HHS)
<b>Step 5</b>	<u>PTAC</u> : Posts public report

**HHS will make final decision on which models to implement.  
Models will be implemented by the Innovation Center.**

# + Proposal Criteria from MACRA Regulations

While all criteria should be addressed in the proposal, PTAC has identified three **High Priority** areas.

1. Value over Volume

2. Flexibility

3. Quality and Cost

**High Priority**

4. Payment Methodology

**High Priority**

5. Scope of PFPM

**High Priority**

6. Ability to be Evaluated

7. Integration and care coordination

8. Patient choice

9. Patient Safety

10. HIT

# + Submission Requirements

## LOI

### Format

- Two pages or less, single-spaced, with Times New Roman font no less than 12 point

### Components

- Expected participants: types of patients and expected number
- Goals of the payment model: the improvements in clinical quality, patient outcomes, and/or health care spending that would result from the proposed payment model compared to the current payment system
- Model overview: description of the basic structure of the payment model, an indication of whether the submitting organization believes the proposed payment model would be likely to meet MACRA requirements for an Alternative APM
- Implementation strategy: a brief description of the organization submitting the proposal, and if the submitting organization is not a provider organization, the names of any provider organizations that are committed to implementing the proposed payment model
- Timeline: the date that the organization expects to submit the proposal, and the earliest date the provider organizations involved believe they could be ready to implement the payment model if it is approved

## Proposal

### Format

- The main body of the proposal should be no more than 20 pages, all text should be Arial or Times New Roman font, no less than 12 point, with one-inch margins and single-spaced lines, Pages should be numbered and graphics and tables may be included.
- The proposal must include a title page, table of contents, and abstract. This information will not count against the page limit discussed below

### Components

- The main body of the proposal should provide background on the model and describe how it addresses the 10 criteria (value over volume, flexibility, quality and cost, payment methodology, scope, ability to be evaluated, integration and care coordination, patient choice, patient safety, and HIT)
- While essential information must be covered in the main body of the proposal, additional information may be included in appendices, which do not count toward the page limit, with the understanding that PTAC members are not obliged to review it
- Letters of support and submission checklists (if included) should be placed in appendices.

# + Types of Recommendations Made by PTAC

- + The vote by PTAC will result in one of the following decisions directed to the Secretary:
  - Not recommended
  - Recommended for
    - Limited-scale testing of the proposed payment model
    - Implementation of the proposed payment model
    - Implementation of the proposed payment model as a high priority
- + Practically Speaking, HHS is still working to determine the internal dynamic for selection and implementation of PTAC-approved models
  - How to evaluate which models move forward?
  - What are the options for deploying models?
  - How do they interact with other CMMI projects?
  - How does PTAC fit into broader policy strategy and priorities?

# + Proposal Submission Recommendations

***PTAC has published a list of characteristics of PFPMs that are more likely to be recommended by them. Highlights from this list include:***

- + **Goals and Focus of PFPMs:** PTAC encourages innovative proposals for PFPMs that will control health care spending and/or improve health care quality
- + **Services Supported by a PFPM:** In general, PTAC will only recommend PFPMs that directly affect the method and/or amount of payments for one or more services delivered, ordered, managed, or coordinated by one or more types of physicians or other eligible professionals
- + **How the Method of Payment Differs from the Physician Fee Schedule:** In general, PTAC will be unlikely to recommend a proposed PFPM if the only change it makes is to give a physician or other eligible professional the ability to bill for a single type of service that is not currently eligible for payment under the Medicare Physician Fee Schedule or to alter the fee level for a service that is currently billable
- + **Relationship of Eligible Professionals to Entity Receiving the Payment:** PTAC will not limit the types of entities that can submit proposed PFPMs and it will consider proposals for PFPMs that would need to be implemented through entities other than practices or groups consisting of one or more physicians or other eligible professionals
- + **Accountability for Spending and Quality:** In general, PTAC will only consider PFPMs that change the method of payment for physicians or other eligible professionals if the payment model also requires the eligible professionals or the entity receiving the payment to take accountability for controlling the costs and quality of care for the patients affected
- + **Financial Risk:** PTAC will be more likely to recommend a PFPM in which the eligible professionals or the entity receiving the payment accept more than nominal financial risk for achieving the desired results on the measures of spending and quality/outcomes

Source: <https://aspe.hhs.gov/system/files/pdf/226776/RFP.pdf>

# + Helpful Links

- + PTAC website
  - <https://aspe.hhs.gov/meetings-physician-focused-payment-model-technical-advisory-committee>
- + Guide for Uploading Letters of Intent and Proposals to the PTAC Submission System
  - <https://aspe.hhs.gov/system/files/pdf/244471/GuideLOIProposalsSubmissionSystem.pdf>
- + PTAC Request for Proposals
  - <https://aspe.hhs.gov/system/files/pdf/226776/RFP.pdf>
- + Information for the Submission of LOIs
  - <https://aspe.hhs.gov/system/files/pdf/207966/InstructionsLOI.pdf>
- + Publically available data sources that could be used in the development of PFPM proposals
  - <https://aspe.hhs.gov/sites/default/files/pdf/207891/publicData.pdf>
- + McDermottPlus MACRA Resource Center
  - [http://www.mcdermottplus.com/uploads/1334/doc/MACRA\\_Resource\\_Center.pdf](http://www.mcdermottplus.com/uploads/1334/doc/MACRA_Resource_Center.pdf)

*For more information visit the [McDermottPlus MACRA Resource Center](#) or contact Sheila Madhani at 202-204-1459, [smadhani@mcdermottplus.com](mailto:smadhani@mcdermottplus.com).*