

Results-Based Payment System Initiative Update

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The Results-based-Payment System initiative (RPS) was originated three years ago by the American Medical Group Association (AMGA) to seek a new way to reimburse for medical care that is linked to quality and outcomes rather than the existing methods that pay only for numbers of encounters or services rendered.

AMGA assembled a stellar group of individuals as the Steering Committee to deliberate and guide the direction of this initiative. (See earlier press release regarding the Committee on this webpage.)

At the end of 2006, the Steering Committee requested development of position papers focused on select “drivers” or “means” that would lead to optimal quality care and result in meaningful outcomes.

Currently, these “drivers” are neither practiced consistently nor incentivized nor rewarded.

Work Group

A Work Group of physicians from AMGA medical groups was organized to further dissect and develop the concepts underlying the select “drivers.” Each of these physicians has responsibilities that are 50 percent administrative and 50 percent clinical. The administrative responsibilities include those of chief medical officers and chief quality officers. The clinical duties include internal medicine, family practice, pediatrics, or primary care subspecialties.

Three position papers were developed by the Workgroup and presented to the Steering Committee at its final meeting, October 2007. The papers addressed incentivizing and rewarding: (1) expansion of the primary care capacity, (2) the coordination of care and (3) improved efficiencies in healthcare services.

The Next Phase

During the Committee meeting, a charter sponsor of the RPS proposed its interest in working with AMGA to take the initiative to a next phase of designing and developing select demonstration projects to test the principles and recommendations in the position papers. Other charter sponsors and participating organizations subsequently indicated their interests in participating in this next phase.

The position papers will be published in forthcoming issues of the *Group Practice Journal*.

Further updates will define the parameters and methods to be employed in this next phase of the RPS.

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