

January 14, 2013

Physician Compare Team
PhysicianCompare@westat.com

Re: Feedback on the Physician Compare Website Redesign 2013

Dear Physician Compare Team,

The American College of Physicians (ACP), the largest medical specialty organization and the second-largest physician group in the United States, appreciates the opportunity to provide feedback regarding the Physician Compare Website Redesign 2013 issued by the Centers for Medicare and Medicaid Services on January 7, 2013. ACP members include 133,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

ACP Policy Related to Physician Compare

The College supports efforts to improve transparency in the health care system. Transparent healthcare information is useful for a wide range of stakeholders and can help a patient and their families make informed health care choices. In the 2010 paper *Healthcare Transparency – Focus on Price and Clinical Performance Information*, ACP recommended that evaluation of physician performance be based on a number of important criteria including information being reliable and valid; transparent in its development; open to prior review and appeal by the physicians and other healthcare professionals referenced; minimally burdensome to the reporting physician and other healthcare professionals; and comprehensible and useful to its intended audience including a clear statement of its limitations. In addition, in the 2011 paper *The Role of Performance Assessment in a Reformed Health Care System*, the College reaffirmed the importance of physicians and other health care professionals having timely access to performance information prior to public reporting and a fair chance to examine potential inaccuracies. In addition, in the content of the professionals having timely access to performance information prior to public reporting and a fair chance to examine potential inaccuracies.

Physician Compare Website Redesign 2013

The College is impressed with the new website design as it appears to be user friendly and intuitive and is appreciative of work CMS has done to improve the quality, currency, and accuracy of the general information included on the website. The Physician Compare website contains a great deal of information posted in a concise format, with various options for users to expand the information. The College is supportive of evaluating Medicare claims to help enhance the use and accuracy of PECOS data. In addition, including Board Certification and secondary specialties is important to ensuring that beneficiaries have accurate information on physicians. Internal medicine physicians often specialize and the College is supportive of including this information on the website.

The new intelligent search functionality, including the ability to search by condition, body type, or other keyword as demonstrated on the webinar, will make it easier for beneficiaries to find information on physicians. ACP would be interested in using the system to see which conditions are

associated with Internal Medicine in order to ensure that internal medicine physicians are appropriately identified in the suggested lists and search results.

Public Reporting on Physician Compare

ACP is supportive of using nationally recognized performance measures and data collection methodology in public reporting. In addition, the College is supportive of the Physician Quality Reporting System (PQRS) and alignment among various CMS programs. ACP recommends that CMS ensure that the measurement targets remain patient centered and reflect potential differences in risk/benefit for specific populations.

As noted in the background material the way in which the measures are reported on Physician Compare is as important as the measures reported. ACP is generally supportive of the proposed display of GPRO and patient experience measures. In regards to the star ratings, it would be helpful to include the actual number of respondents used to calculate the star rating. For example, a 4 star rating with 30 responses could be perceived differently than a 4 star rating with 300 responses. This additional information would be helpful for beneficiaries to better understand the rating and help them to compare physicians.

In regards to displaying comparative data on Physician compare, College policy states that performance information presented to consumers should include context, discussion of data limitations, and guidance on how to consider other factors in choosing a physician (e.g., talking with your physician). The rationale and methodologies supporting the unit of analysis reported should be clearly articulated. In addition, the College supports increased efforts to determine and employ the most effective means of presenting performance information to patients/consumers and to educate these information users on the meaning of performance differences among providers and on how to effectively use this information to make informed healthcare choices. ACP supports public reporting of physician performance data in a manner that emphasizes differences between physicians should take into account the ability to provide reliable, valid, and actionable differences.

Thank you for considering ACP's comments. Please contact Shari Erickson, Vice President, Governmental and Regulatory Affairs, by phone at 202-261-4551 or e-mail at serickson@acponline.org if you have questions or need additional information.

Sincerely,

Robert A. Gluckman, MD, FACP

Chair, Medical Practice and Quality Committee

ⁱ American College of Physicians. Healthcare Transparency—Focus on Price and Clinical Performance Information. Philadelphia: American College of Physicians; 2010: Policy Paper. Accessed online January 11, 2013 at http://www.acponline.org/advocacy/where_we_stand/policy/transparency.pdf

American College of Physicians. The Role of Performance Assessment in a Reformed Health Care System. Philadelphia: American College of Physicians; 2011: Policy Paper. Accessed online January 11, 2013 at http://www.acponline.org/advocacy/where we stand/policy/performance assessment.pdf