

Draft Clinician Expert Workgroup Charter

Project Title: Physician Cost Measures and Patient Relationship Codes (PCMP) – Breast Cancer Screening Clinician Expert Workgroup

Workgroup Expected Time Commitment and Dates:

Members will attend 3 meetings throughout 2025 and 2026. Meetings are anticipated to be 3-4 hours each. The meeting dates are as follows:

- **Meeting #1** (July 2025): Members will review the history of the Breast Cancer Screening episode-based cost measure and discuss potential refinements to the draft measure components by providing clinical input and reviewing empirical analyses and other materials.
- **Meeting #2** (September 2025): Members will provide clinical input on targeted components of the measure upon review of testing results for the measure as specified in consideration of their earlier input. The input provided during this meeting will help inform refinements to the measure prior to a national field test.
- **Meeting #3** (March 2026): Workgroup members will review field testing feedback and empirical analyses to provide input on final refinements to the measure.

Below is a list of tasks expected of all workgroup members:

- Review preparatory materials shared ahead of each meeting and complete any pre-meeting survey, if applicable (estimated time between 2 and 4 hours)
- Attend and participate in all 3 of the meetings described above (3-4 hours each)
- Vote in a post-meeting survey (estimated time between 1 and 2 hours per meeting)

Project Overview:

The Centers for Medicare & Medicaid Services (CMS) contracted Acumen, LLC (“Acumen”) to develop episode-based cost and value measures. The contract name is Physician Cost Measures and Patient Relationship Codes (PCMP). The contract number is 75FCMC18D0015, Task Order 75FCMC24F014. As part of its measure development process, Acumen convenes groups of interested parties who contribute direction and thoughtful input to the measure developer during measure development and maintenance.

Project Objectives:

The project’s overall objective is to develop episode-based cost and value measures suitable for use in the Quality Payment Program. Acumen convenes Clinician Expert Workgroups (“workgroups”) to provide input on the specifications of these measures through cycles or Waves of development. This workgroup is being convened as part of Wave 7 of development.

Workgroup Objectives:

The objective for the workgroup is to provide clinical input on each aspect of the specifications of the Breast Cancer Screening episode-based cost measure being developed as part of Wave 7. This measure is being developed for intended use in the Merit-based Incentive Payment System (MIPS).

Workgroup Requirements:

A workgroup of approximately 10-15 individuals will provide input to build out specifications for the Breast Cancer Screening episode-based cost measure. The workgroup will be composed of individuals with differing areas of expertise and perspectives, including:

- Clinicians with experience relevant to Breast Cancer Screening
- Specialties who provide care in the area being measured, including: oncology, diagnostic radiology, internal medicine, family practice, nurse practitioner, physician assistant, and others
- Familiarity with medical coding
- Expertise in performance measurement, quality improvement, or value-based care

Scope of Responsibilities:

The role of the workgroup is to provide clinical input on the specifications for the episode-based cost measure. Members will review empirical testing, clinical practice guidelines, program needs and priorities, input from persons with lived experience, and other relevant information as part of their deliberations.

Guiding Principles:

Participation as a workgroup member is voluntary and the measure developer records the participant's input in the meeting minutes, which the measure developer will summarize in a report that they may disclose to the public. If a participant has chosen to disclose private, personal data, then related material and communications aren't covered by patient-provider confidentiality. Patient/caregiver participants may elect to keep their names confidential in public documents. Workgroup organizers will answer any questions about confidentiality.

All potential workgroup members must disclose any significant financial interest or other relationships that may influence their perceptions or judgment. It's unethical to conceal (or fail to disclose) conflicts of interest. However, there's no intent for the disclosure requirement to prevent individuals with particular perspectives or strong points of view from serving on the workgroups. The intent of full disclosure is to inform the measure developer, other workgroup members, and CMS about the source of workgroup members' perspectives and how that might affect discussions or recommendations.

The workgroup will make decisions on input by discussions facilitated by a workgroup chair. Where decisions are needed to provide direction to the measure development contractor, an online poll will be conducted.

Estimated Number and Frequency of Meetings:

Three meetings will take place throughout 2025 and 2026. See the information above under “Workgroup Expected Time Commitment and Dates” for more information.

Date Approved by Workgroup:

TBD

Workgroup Membership:

TBD