

# Measures That Matter



Person-Centered  
Primary Care

Continuity of Care

Comprehensiveness  
of Care

Low Value Care

The Measures That Matter are a suite of four clinical quality measures that the American Board of Family Medicine endorses for simplifying and improving measurement of Primary Care.

## A More Meaningful Standard for Primary Care

Whole-person clinical quality measures are the underpinning of what matters in primary care. They are relevant to all communities, in all public health situations, and across all diseases, providing a way to quantify patient-centered quality care.

Measures That Matter focus on more personalized care, taking into account what matters to both patients and clinicians. While current clinical quality measures focused on disease specific care have value, they are not aligned with the foundations of primary care or the needs of patients, communities, and health systems.

Measures That Matter are designed for use across multiple levels of the health care system:

### Primary Care Practices

- › Meet patient needs by focusing attention on what matters
- › Reduce burnout and burden by organizing practice around the reason they went into patient care

### Employers

- › Assess if the care they are purchasing is doing what patients, clinicians and payers have identified as what matters
- › Require that systems support aspects of primary care that matter

### Patients

- › Participate in health care improvement
- › Provide information important for caring for them as a whole person

### Insurers and Healthcare Systems

- › Identify where to invest to support those delivering high quality primary care
- › Develop systems that support integrating, personalizing and prioritizing care

› *Continued*



THE CENTER FOR  
PROFESSIONALISM & VALUE  
IN HEALTH CARE

## What is the Future of Measures That Matter?

### Our aim is to have:

- > Primary care clinicians use our suite of measures as their core measure set.
- > Public and private payers support these measures for quality measurement.
- > Researchers quantify the value of primary care using these measures and communicate that value to policy makers to effect positive change.

## Join us

Visit [professionalismandvalue.org](http://professionalismandvalue.org) or email us at [jshuemaker@theabfm.org](mailto:jshuemaker@theabfm.org) for information on opportunities to collaborate and support Measures That Matter.

## Using the Measures in Primary Care Practice

To implement the available measures in your primary care practice, join PRIME Registry at [primeregistry.org/enroll/](http://primeregistry.org/enroll/)

## Our Partners

We are grateful for the collaboration and support of our current partners in this initiative.

American Board of Family Medicine (ABFM)

The ABFM Foundation

The PRIME Registry

The Robert Graham Center

The Larry A Green Center

Stanford University

Mount Sinai Health System

American Academy of Family Physicians (AAFP)

[professionalismandvalue.org](http://professionalismandvalue.org)

# Measures That Matter

## > Person-Centered Primary Care Measure

Person-Centered Primary Care Measure (PCPCM) is a patient-reported outcome measure (PROM) of exemplary primary care that has been developed by the Larry A. Green Center based on the extensive input of patients, clinicians, and employers. The PCPCM PROM focuses attention and support on the integrating, personalizing, and prioritizing functions that patients and clinicians say are important. The PROM captures facets of continuity and comprehensiveness, as well as elements of advocacy and allegiance. The PCPCM, which won the National Quality Forum's 2019 Patient-Reported Outcomes Next-Generation Innovator Abstract Award, is available in the PRIME Registry Measure Set and is endorsed by CMS for use in the Merit-Based Incentive Payment System (MIPS) quality payment program.

## Continuity of Care

Continuity of Care is defined as seeing the same primary care clinician over time and it remains one of the pillars of a high functioning health care system. Continuity of Care is shown to improve patient outcomes and clinician well-being, decrease hospitalization risk and decrease levels of spending. When continuity is poor, it suggests fragmented care and an associated lack of a trusting relationship in primary care. The Continuity of Care clinical quality measure, developed in collaboration with the Robert Graham Center, is available in the PRIME Registry Measure Set and is endorsed by CMS for use in the MIPS quality payment program.

## Comprehensiveness

Comprehensiveness is lauded as one of the five core virtues of primary care, and higher comprehensiveness is associated with lower costs and hospitalization. The Institute of Medicine defined comprehensiveness as "...the provision of integrated, accessible health care services by clinicians who are accountable for addressing a large majority of personal health care needs." Comprehensiveness is more complex since it overlaps scope of practice and sites of care. The Comprehensiveness clinical quality measure is being developed in collaboration with the Robert Graham Center.

## Low-Value Care

Key to the measurement and reporting of total cost of care is our effort to develop a Low Value Care clinical quality measure. The Low Value Care clinical quality measure can help clinicians identify modifiable behaviors as a mechanism to improve primary care's well documented moderation of total health care spending and sets up capacity for long term evaluation on total cost of care by clinicians. The Low Value Care clinical quality measure is being developed in collaboration with Stanford University and Mount Sinai Health System. <