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**PBGH**

**Pacific Business  
Group on Health**

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Walter Stone  
CMS Privacy Officer  
Office of Information Services  
Centers for Medicare and Medicaid Services  
7500 Security Boulevard, Room N2-04-27  
Baltimore, MD 21244-1850

Re: Comments on "Performance Measurement and Reporting System,"  
Systems No. 09-70-0584

Dear Mr. Stone:

The Pacific Business Group on Health (PBGH) is writing in support for the new system of records (SOR), Performance Measurement and Reporting System (PMRS). Broad access to meaningful information on physician-level performance is essential to improving the quality and affordability of health care. We believe that CMS must be a leader in this arena and the Performance Measurement and Reporting System is one component to helping us realize this.

The Pacific Business Group on Health (PBGH), a business coalition of 50 large health care purchasers, seeks to improve the quality and availability of health care while moderating cost. Since 1989, PBGH has played a leading role both nationally and statewide in health care measurement, trend moderation, and system accountability through public reporting.

We applaud CMS's commitment to developing a **"master system of records to assist in projects that provide transparency in health care on a broad-scale enabling consumers to compare the quality and price of health care services so that they can make informed choices among individual physicians."** In making that goal a reality, we believe it is critical to underscore a number of points:

- The System of Records must incorporate as much information as possible (e.g., data from Medicare Parts A, B, and D).
- The application of the goal of "making informed choices among individual physicians, practitioners and providers of services" to the routine uses outlined in sections III.3., III.4., and III.6 must be done in a manner that truly enables the broad dissemination of performance results to consumers.
- The standards and procedures for releasing data should be open and flexible, while protecting patient privacy. The PRMS rightly recognizes the CMS cannot and should not be either the only source of performance reporting or the arbiter of how the needs of diverse consumers across the country can best be met. CMS should not limit innovation in performance measurement by restricting or micro-managing the use of performance measures. Individuals or organizations requesting Medicare data should rightly be held to CMS' assessment of whether

the proposed uses have “reasonable probability that the objective for the use would be accomplished” (III.6(a)(3), but not to any application of CMS judging “right measures” or “right uses.” Development of performance measures is a complex and evolving field. There is a need for multiple approaches and active experimentation for developing relevant and meaningful performance measures that can be used in consumer decision-making.

Additionally, beyond the procedures outlined in the state of records, we believe CMS should undertake creating patient de-identified records that maintain privacy but allows the linking of multiple record of the same patient. This information can be lawfully released without the need for the system of records requirements and would avoid potential HIPAA complications by being stripped of patient identifying information.

Thank you for the opportunity to comment on this very important initiative. If you have any questions, please feel free to contact me.

Sincerely,



Peter V. Lee  
Chief Executive Officer  
Pacific Business Group on Health

Cc: Kerry Weems, Acting Administrator, CMS  
Herb Kuhn, Acting Deputy Administrator, CMS  
Barry Straube, MD, Chief Medical Officer and Director of Office of Clinical Standards & Quality, CMS  
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