Figure 1. Procedure design selection of a P4P program by target users

<table>
<thead>
<tr>
<th>Method and participants</th>
<th>Discussion components and response rate</th>
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| PANEL 1                 | Round 1: *Performance measurement clinical care*  
Questionnaire: N=25 general practitioners  
Meeting: N=18 general practitioners |
| Consensus procedure with questionnaires and meetings  
N=27 practices, 2 health insurance companies |  |
| PANEL 2                 | Round 2: *Performance measurement practice management and patient experience*  
Questionnaire: N=25 general practitioners, 13 health insurance representatives  
Meeting: N=20 general practitioners, 6 health insurance representatives |
| Consensus procedure with questionnaires and meetings  
Questionnaire: N=65 general practitioners, 2 health insurance companies  
Meetings: N=30 practices, 2 health insurance companies |  |
| Field test              | Round 3: *Appraisal and reimbursement*  
Questionnaire: N=25 general practitioners, 10 health insurance representatives  
Meeting: N=25 general practitioners, 7 health insurance representatives |
| N=24 practices           |  |
| Field test              | Round 4: *Fine-tuning appraisal and reimbursement*  
Questionnaire: N=51 general practitioners, 2 health insurance representatives  
Meeting: N=22 general practitioners, 2 health insurance representatives |
| N=22 practices #         |  |
| Field test              | Round 5: *Fine-tuning regarding quality level and improvement of performance*  
Questionnaire: N=41 general practitioners  
Meeting: N=8 general practitioners, 2 health insurance representatives |

# Two practices dropped out, one due to illness and the other due to disassociation of practice owners