

April 3, 2024

Investing in Primary Care - Lessons from a Multi-State Network

Webinar Agenda

- Welcome
- Overview of the Primary Care Investment Landscape: Federal and State Initiatives
- Panelist Presentations
 - **Betsy Boyd-Flynn**, Oregon AAFP
 - **Hanna Nagy**, Connecticut Office of Health Strategy
 - **Louise Cohen**, Primary Care Development Corporation
- Moderated Q&A
- Closeout

Primary Care Investment – A National Call to Action



2021

Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care

High-quality primary care is the foundation of the health care system. It provides continuous, person-centered, relationship-based care that considers the needs and preferences of individuals, families, and communities. Without access to high-quality primary care, minor health problems can spiral into chronic disease, chronic disease management becomes difficult and uncoordinated, visits to emergency departments increase, preventive care lags, and health care spending soars to unsustainable levels.

[Read Full Description](#)

Primary Care Investment – A National Call to Action



ISSUE BRIEF

November 7, 2023

HHS IS TAKING ACTION TO STRENGTHEN PRIMARY CARE

The U.S. Department of Health and Human Services (HHS) is taking action to strengthen primary care. Recognizing the importance of having a strong primary care foundation to our healthcare system, HHS collaborated across Divisions to develop a coordinated set of actions to strengthen primary care in our nation and has moved forward with implementing these actions. This issue brief outlines the critical actions that HHS has taken and its future work to strengthen primary care. In addition to sharing HHS primary care activities, with this issue brief, HHS aims to foster collective action among stakeholders and across the healthcare system and other sectors. Together, we can maximize individual and population health and well-being; ensure access to affordable, comprehensive, whole person primary care throughout the country; and make it possible for all communities to be served by trusted primary care clinicians and multidisciplinary teams who reflect the communities they serve.

CMMI Responds with New PC Models

Making Care Primary (MCP)

- ▶ **Improves care management, community connections, and care integration** by providing capacity building resources to those new to value-based care.
- ▶ **Increases access to care and creates sustainable change in underserved communities** by facilitating partnerships with state Medicaid agencies, social service providers, Federally Qualified Health Centers (FQHCs) and specialty care providers.

States Advancing All-Payer Health Equity Approaches and Development (AHEAD)

- ▶ **Creates a new pathway to invest in primary care** via statewide primary care investment targets.
- ▶ **Provides Enhanced Primary Care Payments** to increase investment in primary care.
- ▶ **Uses a flexible framework of care transformation activities** to align with existing Medicaid value-based-payment arrangements.

ACO Primary Care Flex (ACO PC Flex)

- ▶ **Focuses on improving funding and other resources** to support primary care delivery in the Medicare Shared Savings Program.
- ▶ **Utilizes a flexible payment design** to empower participating ACOs and their primary care providers to use more innovative, team-based, person-centered and proactive care approaches.
- ▶ Incentivizes the **development of new ACOs**, particularly those that will support underserved communities, and addresses health disparities.

The PCDC Primary Care Investment Network

A Review of Progress

The Primary Care Investment Network (PCIN) brings together state policymakers and advocates to increase interaction and connectivity among states that are pursuing or considering pursuing primary care investment legislation or regulation. The objectives of the PCIN are as follows:

- Develop leadership capacity at the state level, both in and outside of government;
- Increase political salience of primary care investment by supporting interested state leaders; and
- Make progress in individual state efforts to increase investment through these conversations.

The PCDC Primary Care Investment Network

A Review of Progress

December 2022: exploratory roundtable event of 9 states demonstrated interest for meeting regularly. Several state legislators and advocates described their strategies and experiences in working toward passing bills, with general and breakout session discussions.

April 2023: PCI Network launch with 23 states and ~50 participants. Held 5 virtual meetings and several more focused workgroup sessions on topics such as messaging (with various audiences), definitions, spending measurement mechanisms, and accountability

January 2024: 25 states and ~75 participants. In-person meeting in DC focused on creating and sustaining coalitions across states and internally, measurement and accountability and a multi-day messaging workshop.



Health Strategy
April 3, 2024

Hanna Nagy, MPP, GCSR
Lead Planning Analyst

Healthcare Benchmarks Initiative

**Executive Order
No. 5**

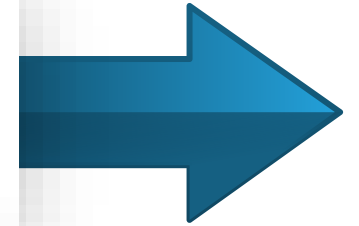


**Public Act 22-118
§§217-223**

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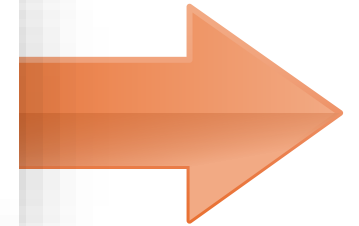
Cost Growth Benchmark



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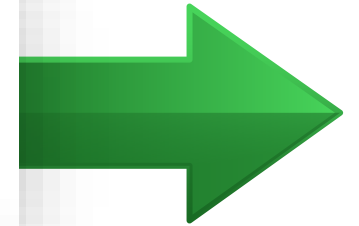
Primary Care Spend Target



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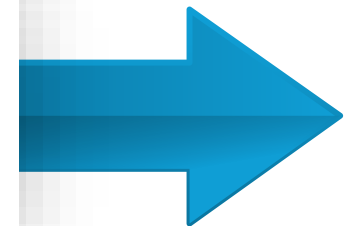
Data Use Strategy



4



Quality Benchmarks



Primary Care Spending Target

Connecticut's Primary Care Spending Target

Calendar Year	Target Values
2021	5.0%
2022	5.3%
2023	6.9%
2024	8.5%
2025	10.0%

- Connecticut's primary care spending target aims to **increase primary care spending** to 10 percent of total healthcare expenditures by 2025.
- The target is intended to rebalance and strengthen Connecticut's healthcare system by supporting improved primary care delivery.

Primary Care Spending Definition (1 of 2)

- OHS and the predecessor advisory body to the Steering Committee established a definition of primary care spending in 2020 that built upon a methodology established in collaboration with other New England states.
 - **Claims-based spending:** spending for care management; care planning; consultation services; health risk assessments, screenings and counseling; home visits; hospice/home health services; immunization administrations; office visits and preventive medicine visits.
 - **Non-claims-based spending:** capitation or salaried expenditures, PCMH and HIT infrastructure payments, performance-based payments, risk-based reconciliation, COVID-19 support payments.

Primary Care Spending Definition (2 of 2)

- Primary care providers:
 - **MDs and DOs:** family medicine, pediatric and adolescent medicine, internal medicine (when practicing primary care) and geriatric medicine (when practicing primary care)
 - **NPs and PAs** when practicing primary care

Note: OHS is also measuring primary care spending associated with OB/GYNs and midwifery for monitoring purposes

Primary Care Spending Analysis Methodology

- To assess primary care spending at the state, market and payer levels, OHS calculates primary care spending per member per month (PMPM) as a percentage of total medical expenses (TME) PMPM.
- TME for the primary care spending target includes all the spending categories for the cost growth benchmark **except for long-term care** so that calculations across commercial, Medicaid, and Medicare markets are comparable.

Total Statewide Primary Care Spending and Per Person Per Month

Year	Total Statewide Primary Care Spending	Statewide Primary Care Spending Per Person Per Month
2021	\$995,572,927	\$29
2022	\$1,056,133,091	\$30

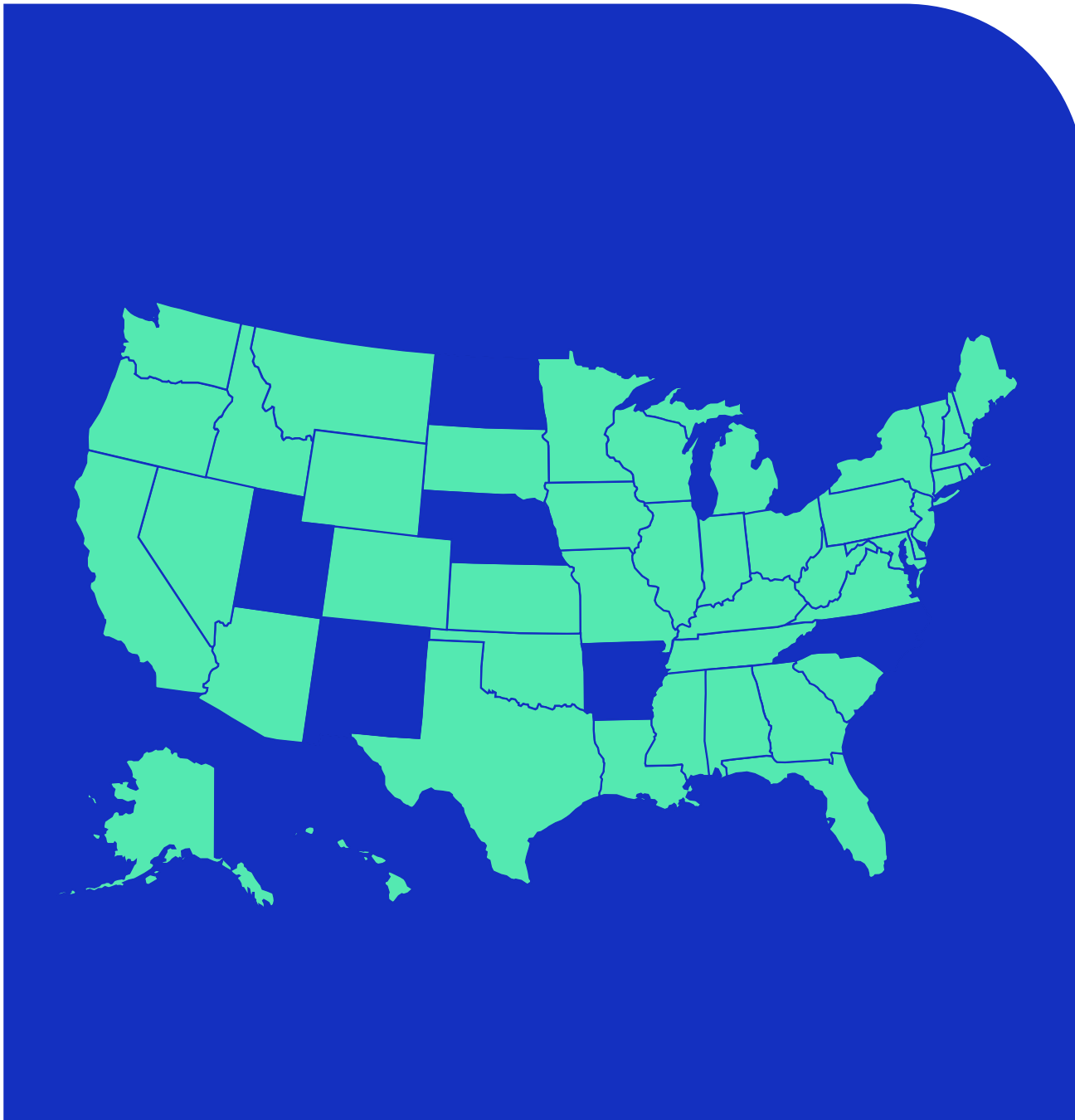
Data Source: OHS collected data from insurance carriers and the Connecticut Department of Social Services (DSS).

Primary Care Investment Policy in New York

April 3, 2024

Louise Cohen, MPH
Chief Executive Officer





Since 1993, PCDC has:

- Leveraged \$1.5 billion in financing
- Provided capital and services in 44 states, D.C., Puerto Rico, and the Virgin Islands
- Created or maintained 2.8 million square feet of clinic space
- Advocated for sustainable patient-centered care models in value-based payment
- Convened leaders from across the health sector to discuss trends and challenges
- Helped 1,100+ practices reach Patient-Centered Medical Home (PCMH) recognition

PCDC's Approach

Capital Financing

We provide capital financing to increase primary care capacity and advance health equity in underserved communities, with a staff of mission-driven financial experts who provide advisory services and affordable financing, using a variety of financial tools.

Consulting, Technical Assistance, and Training

We partner with health centers and primary care practices, focusing on financial health and sustainability, effective operations, and integration of care.

Advocacy

We drive and support primary care policy initiatives at the federal, state, and local levels that increase investment and prioritize equity in primary care access, quality, and funding, as well as to support and expand the primary care workforce, particularly in historically marginalized communities.

Investing More In Primary Care

Overview

Addressing underinvestment in primary care requires systemic change, including:

Improved ways to pay for care delivery

Higher reimbursement for primary care

Investing in primary care infrastructure

Investing in the workforce and pipeline

Deliberately investing in primary care is one of the most effective ways to increase access to and quality of care, save lives, improve individual and community health, and move toward health equity.

Investing More In Primary Care

New York's Track Record

NYS FFS Medicaid historically is one of the lowest payors for primary care.

No publicly available All Payor Claims Database, making it difficult to determine how much is being spent on primary care across payers.

Executive branch advocacy beginning in 2016 or earlier.

Lack of vision about creating a primary care-centric health care system.

Investing More In Primary Care

Proposing Primary Care Investment Policy

- In 2021, with strong support from Health Committee leadership in the NYS Senate and Assembly, PCDC introduced legislation to create a Primary Care Reform Commission. This would have:
 - Brought together stakeholders to study investment in primary care in New York, with access to New York State's primary care spending data
 - Created concrete recommendations for policymakers about how to create a primary care-centered health system and rebalance health care spending
- Legislation passed legislature in June 2022 and months of discussions with stakeholders thereafter revealed strong support and interest in making change.
- BUT – Governor Hochul vetoed in late November 2022.



Investing More In Primary Care

Building Momentum for Primary Care Investment

- In 2024, working with some new and some continuing champions in the legislature, introduced legislation to:
 - Require payors (both public and private) to report their spending on primary care as a percentage of their total spending on care.
 - Require the relevant state agencies to publish that data publicly.
 - Require payors that are not already spending at least 12.5% on primary care to increase spending 1% each year until they hit that target.

Investing More In Primary Care

Building Momentum for Primary Care Investment

- Ongoing lobbying to move that bill forward, while also pursuing other activities:
 - Educating stakeholders and policymakers about the value of primary care and how investing in primary care will impact access, workforce and integration
 - Publishing resources, such as the 2022 and 2023 policy trend reports, and upcoming New York State primary care scorecard.
 - Bringing stakeholders in coalition together to identify and amplify shared concerns.

Increasing Access to Primary Care in New York State

Other Policies to Increase Investment

- Capital Investment in new points of access
 - Massive state investment in the Health Care Transformation Fund in 2023, \$1B, including \$500M for technology, but none earmarked for primary care.
 - Ongoing advocacy to ensure capital funding for primary care.
 - PCDC administers a fund called the Revolving Loan Fund, established with a \$17M investment from the state in 2015, with \$10M more invested in 2023.

Other New York State Context

- The future of the New York State health commission
- Federal Medicare programs
 - Making Care Primary – Upstate
 - AHEAD – Downstate
 - ACO Flex

Thanks for attending!

Please reach out to Jordan Goldberg, PCDC's Director of Policy with any questions on today's webinar or the Primary Care Investment Network.

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