



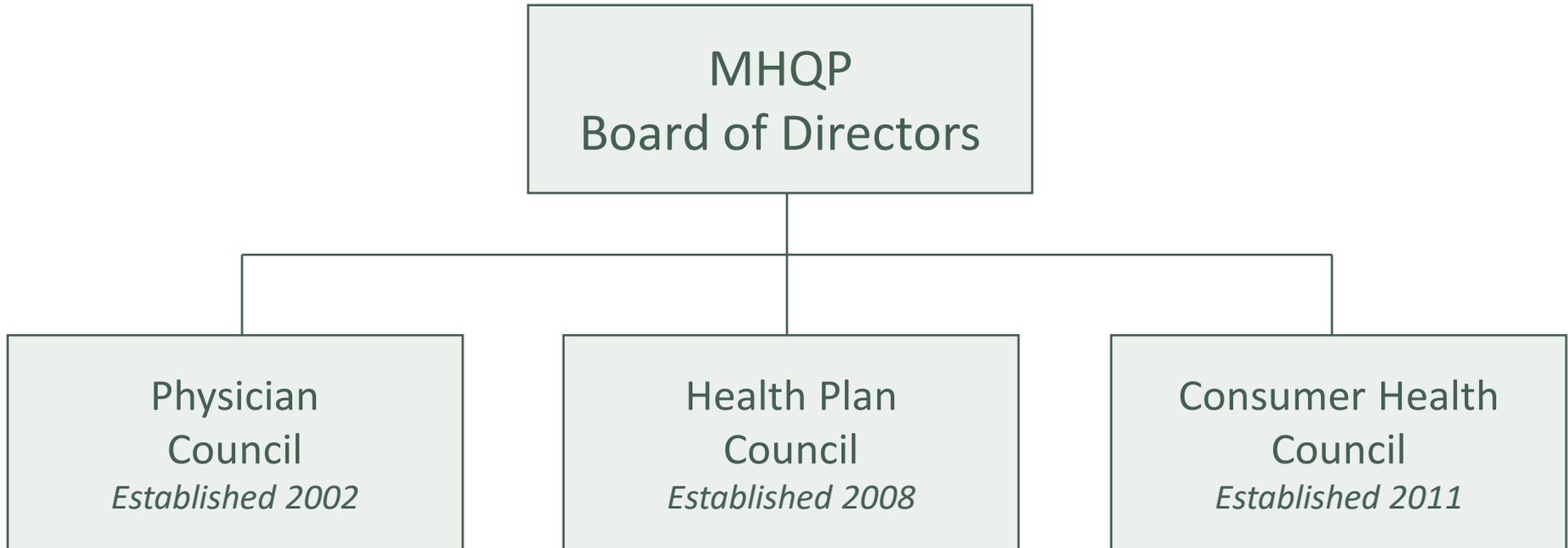
*Together for good measure*

# The Health of Primary Care in Massachusetts

*Barbra G. Rabson  
President and CEO*

# MHQP Background and Governance

Established in 1995, MHQP is an independent coalition of key stakeholder groups in Massachusetts working to improve the quality of patient care experiences through collaboration.



<http://www.mhqp.org/about/board/>

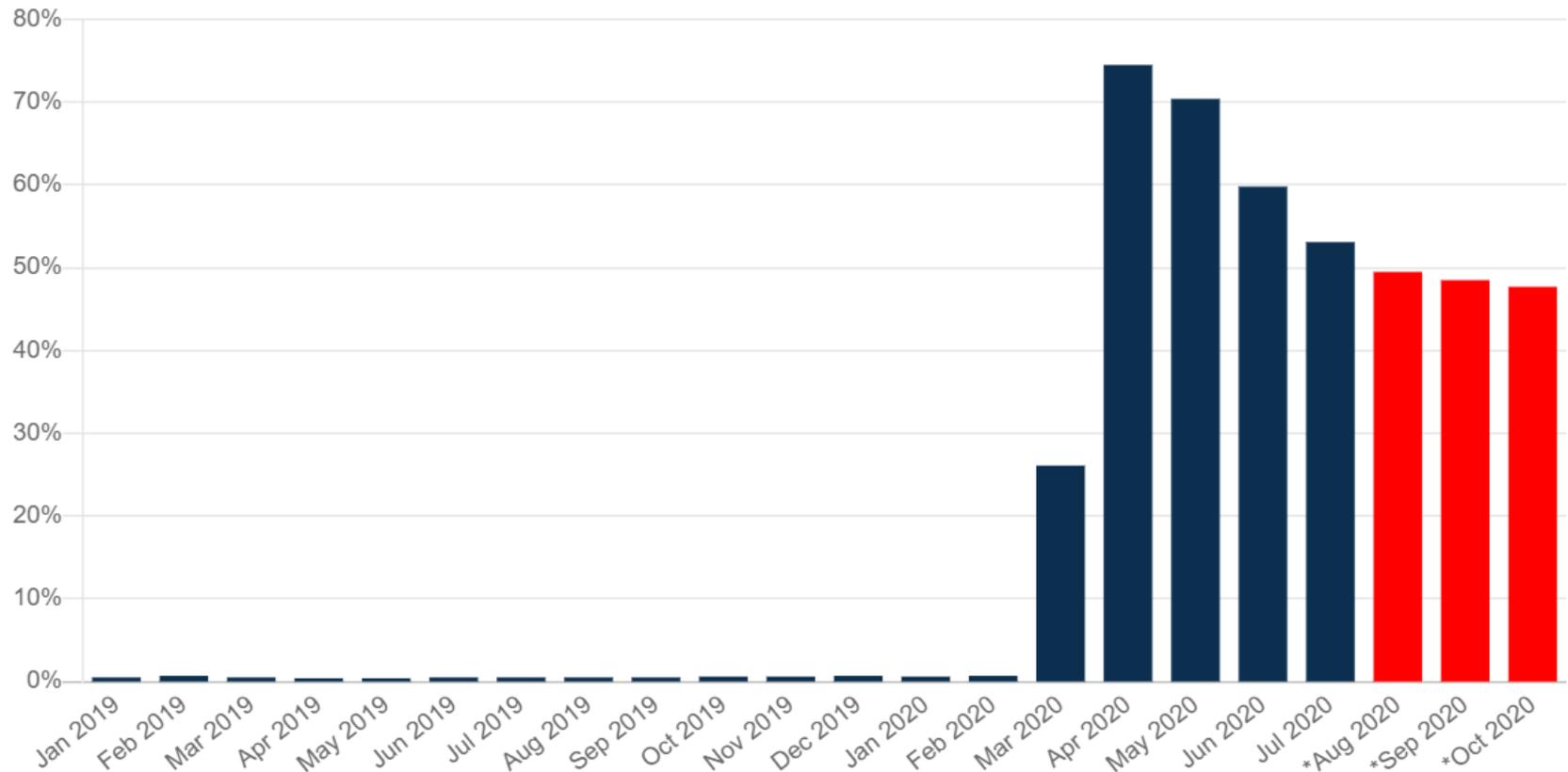
# Pre-COVID Trends in Primary Care

- **Primary care visits declined by 6-25% nationally between 2008-2016**
  - *Evidence and Implications Behind a National Decline in Primary Care Visits*, in the Journal of General Internal Medicine, Ishani Ganguli, Thomas Lee, and Ateev Mehotra
- **Primary care's value system (first contact, comprehensive, coordinated and continuous as per Starfield) is being disrupted by innovative entrants looking to exploit opportunities to address gaps in value.**
  - *The Evolution of Primary Care: Embracing Innovation While Protecting the Core Value*, NEJM Catalyst, Steve Strongwater and Joe Kimura
- **Primary care is trying to do too many things to be effective at any of them.**
  - In his book, *Reframing Healthcare*, Zeev Neuwirth identifies five “brands” he believes primary care is attempting to fulfill; on-demand urgent care, wellness care, complex-chronic care, continuity care and condition-specific care.

# Post- COVID Trends: Percent of Healthcare Encounters in Massachusetts are via Telehealth

In April 2020, **74.5%** of healthcare claims in MA were telehealth claims.

Telehealth Claims as a Percent of Overall Healthcare Claims, Massachusetts



COVID-19 Healthcare Coalition. 2021. *COVID-19 Healthcare Coalition*. [online]

Available at: <<https://c19hcc.org/telehealth/claims-analysis/>> [Accessed 13 January 2021].

# Covid-19 Impact on Primary Care: March-April 2020

- “Visits decreased by about 75%, given we are limiting well visits and sick visits to minimize exposure. **We are now furloughing/laying off staff and cutting nursing staff hours by 50% and owners are likely going to go without pay in order to stay afloat.**”
- Lack of staff, equipment, and financial strains are real, with **61% primary care practices reporting uncertainty about their ability to remain open after 4 weeks.**
- **Nearly 8 in 10 primary care clinicians report their practices are under high levels of strain.**
- The economic pain experienced and seen by practices is significant: **close to half are unsure if they have enough cash to keep their practices open; 42% have experienced layoffs and furloughed staff; and most (85%) have seen dramatic decreases in patient volume.**

**Source: COVID-19 PRIMARY CARE SURVEY (National survey)  
Larry Green Center & Primary Care Collaborative**

# MHQP Primary Care Roundtable Vision – *We Seek a Primary Care System in Which:*

---

- 1. Payment Methods Empower Practices to Meet Patient Needs**
  - The payment system allows practices to move beyond the FFS construct that ties payment to in-person visits and makes practices susceptible to shocks in volume such as those experienced with the COVID-19 pandemic.
- 2. Payment Incentives Are Aligned with Desired Attributes of Care**
  - E.g., provider organizations are rewarded for improving coordination/integration of care and patient-provider relationships.
- 3. Care Is Team-Based**
  - Inclusion of behavioral health professionals, social workers, health coaches, community health workers
- 4. Practices Have Tools and Resources to Promote Health Equity**
  - Practices have the needed tools, resources, and meaningful data to address inequities
- 5. Technology Is Fully Leveraged to Improve Care and Access**
  - Telehealth platforms and patient-provider communications systems offer a range of visits modes, creating a continuum of services to improve care

# How Do We Monitor the Health of Primary Care in MA?

---

- What level(s) should we monitor performance?
  - State, system, health plan, medical school?
- How should primary care health be judged?
  - The value of primary care differs by stakeholders
- Who should be the main audience for a “primary care “dashboard”?
- How do we make sure it is useful?

# PHCPI\* Vital Signs Profile

Each Vital Signs Profile Provides answers to some of the most critical questions about a country's primary health care system:

- **Financing:** How much does your government spend on primary health care?
- **Capacity:** Does your system have the policies, infrastructure and other physical and human resources required to deliver primary health care?
- **Performance:** Does your primary health care system deliver quality care that meets people's health needs?
- **Equity:** Does your primary health care system effectively serve the most marginalized and disadvantaged groups in society?

**\*Primary Health Care Performance Initiative** is a partnership dedicated to transforming the global state of primary health care (including WHO, Ariadne Labs, Bill and Melinda Gates Foundation)

# Polling Question

---

Are there formal discussions going on within your organization about the future of primary care in Massachusetts?

- A. Yes
- B. No
- C. Don't know