More for Less: Primary Care and the Quality Equation

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About AUCH

The Association for Utah Community Health (AUCH) is the Federally recognized Primary Care Association in the state, supporting Health Center grantees and other safety-net healthcare providers





Objectives

- Learn about how primary care investment can support cost-effective high-quality care
- Understand current opportunities and challenges in primary care
- Identify ways to engage with primary care offices to support your patients



Question for Audience



What is High Quality Primary Care?

"The provision of whole-person,* integrated, accessible, and equitable health care by interprofessional teams who are accountable for addressing the majority of an individual's health and wellness needs across settings and through sustained relationships with patients, families, and communities."



The Essence

Prevention and early management of health problems

Reductions of unnecessary and harmful specialist interventions

Coordination and integration across multiple conditions, treatments, medications



Decreased health expenditures

Equal or better health outcomes

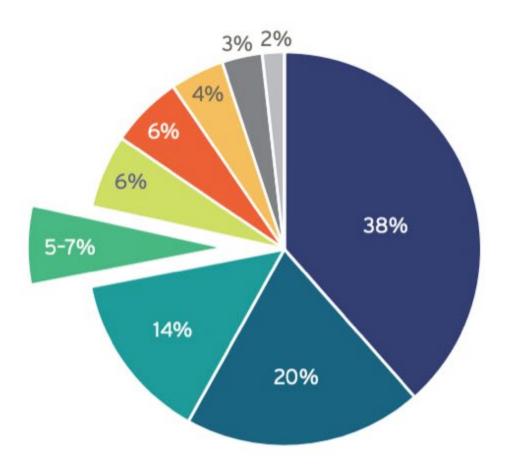
Better patient experiences and increased satisfaction



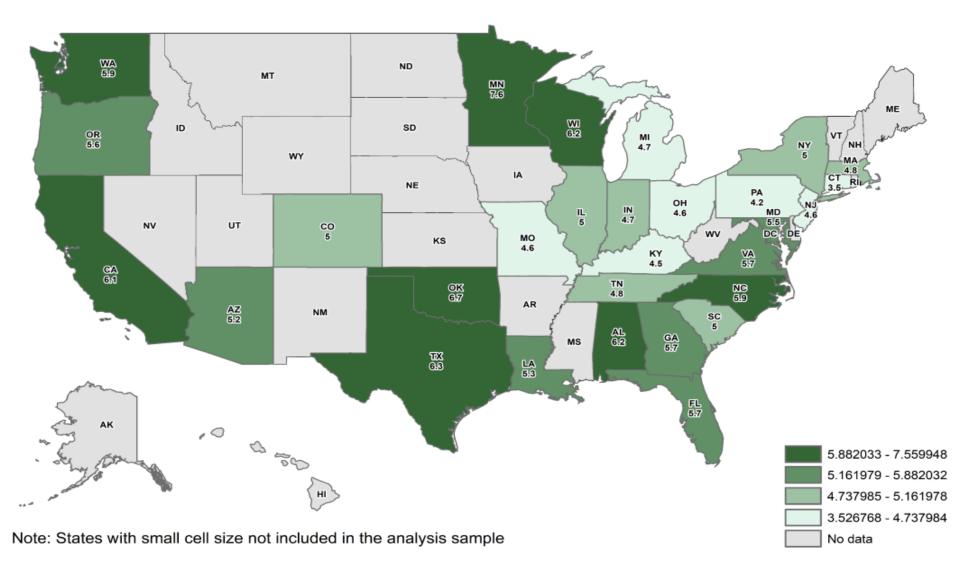
Primary Care as a Percent of Total Spend

Health Care Spending

- Hospital care
- All other physician and professional services
- Prescription drugs and other medical nondurables
- Primary care
- Nursing home care
- Other health, residential, and personal care
- Dental services
- Home health care
- Medical durables



Percent PC Spend Variation Across States (Narrow Definition)



Investing in Primary Care, a state-level analysis, 2019https://www.milbank.org/programs/primary-care-spend/

Utah Primary Care Spend 2018-2019

Age Group	Narrow	Broad	Unclassified
0-17	15.4%	18.2%	0.6%
18-24	6.0%	8.9%	1.3%
25-34	5.0%	8.1%	0.8%
35-44	5.2%	7.8%	1.4%
45-54	4.5%	6.6%	0.8%
55-64	3.6%	5.4%	0.6%
65-74	4.7%	7.5%	0.6%
75-79	4.5%	7.1%	0.6%
80-84	4.5%	7.2%	0.4%
85+	4.4%	7.0%	0.4%
Unknown	1.0%	1.6%	0.2%
Combined	6.6%	9.1%	0.8%



Primary Care Providers See the People

Outpatient visits

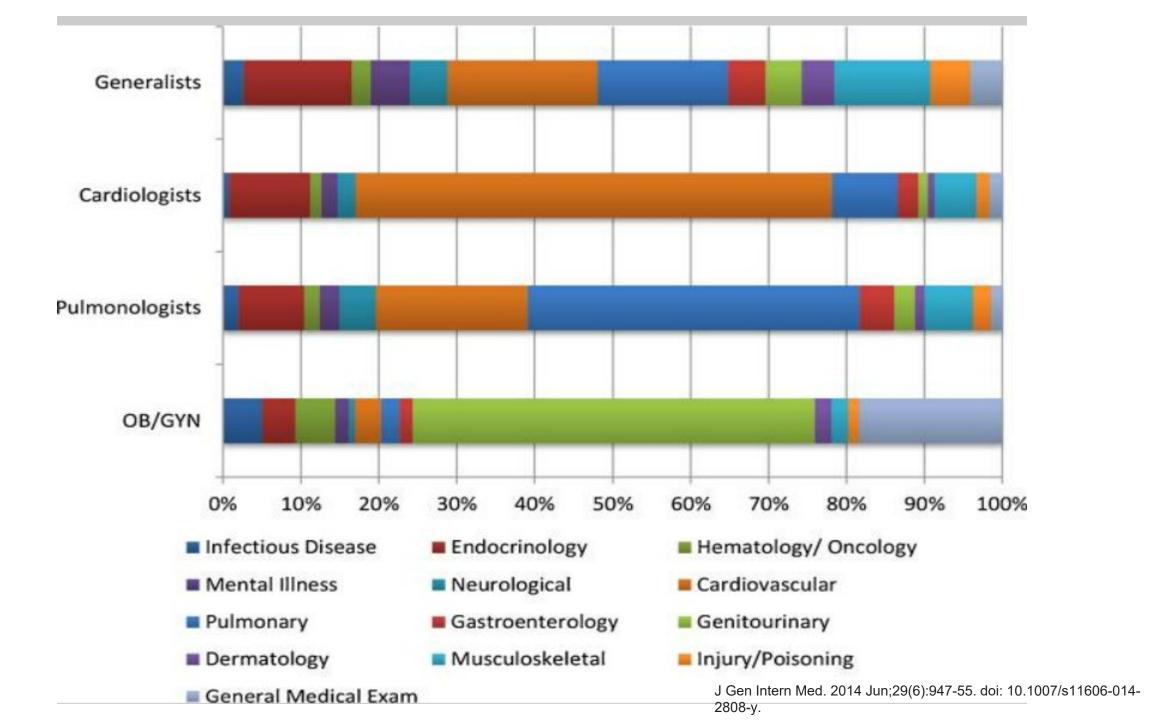
47% of total visits to PCP or generalist provider

71% all visits for HTN

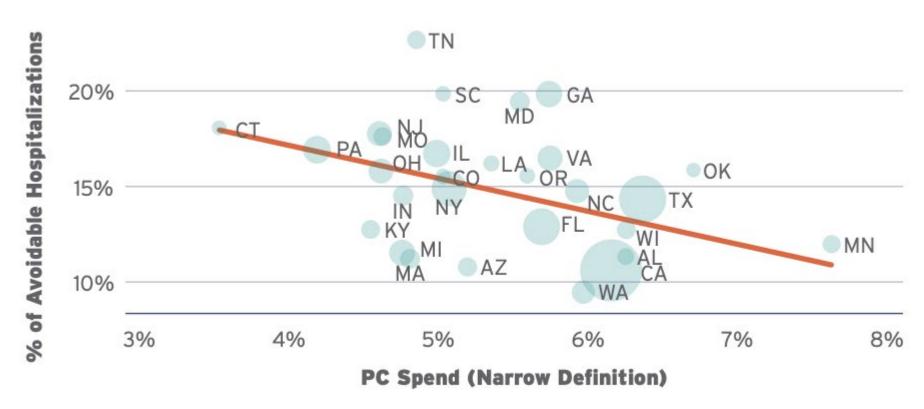
67% all visits for DM

68% all visits for COPD





% Primary Care Spend and Avoidable Hospitalizations



R = -0.44. Note: Size of circles represents the population size of the state.

Teams Mandatory to Deliver High Quality Primary Care

PCP Alone

26.7 h/day

14.1 h/day for preventive care

7.2 h/day for chronic disease care

2.2 h/day for acute care

3.2 h/day for documentation/inbox

Team-based Care

9.3 h/day

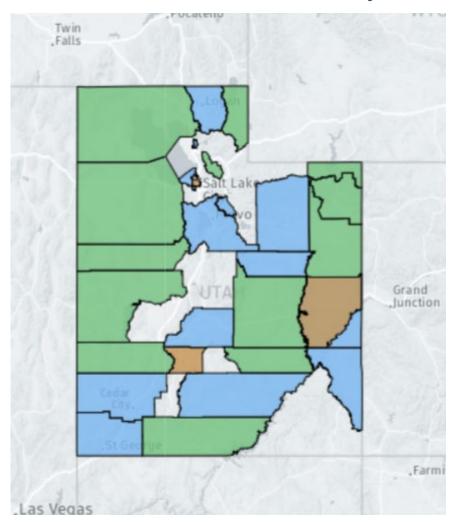
2.0 h/day for preventive care

3.6 h/day for chronic disease care, 1.1 h/day for acute care

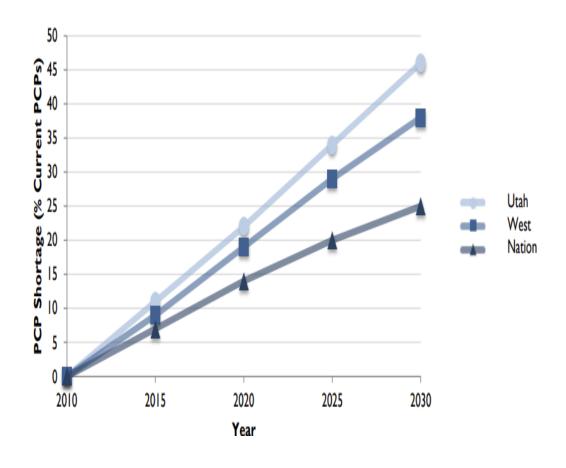
2.6 h/day for documentation/inbox



Primary Care Workforce Shortage



Physician Demand Comparison - State, Region, Nation





Opportunity



Implementing High-Quality Primary Care Rebuilding the Foundation of Health Care (NASEM 2021)

- 1. Pay for primary care teams to care for people, not doctors to deliver services.
- 2.Ensure that high-quality primary care is available to every individual and family in every community.
- 3. Train primary care teams where people live and work.
- 4. Design information technology that serves the patient, family, and the interprofessional care team.
- 5. Ensure that high-quality primary care is implemented in the United States.





One Utah Health Collaborative

- Equity
- Outcomes (Healthiest people)
- Affordability





Our Role



Connect to the Usual Source of Care

- Develop a relationship with a generalist or a system that looks after your health
- Ask if your patients have a usual source of care, "doctor", clinic
 - Connect to them, get their data
- If a patient cannot connect, consider why
 - Advocate for investment to increase access
 - Innovate in delivery of high-quality primary care
 - Make this an agenda for your quality team



Engage at Transitions of Care

- Ask for records to take with you
 - Medication lists, testing needed, numbers for follow up visits,
 - Ask for an appointment with your usual source of care, or at least update them
- Ensure follow-up access for patients
 - Get that back line number for practices in the area
 - Check that they got in
 - Send vital transition information to the offices
- Assist to develop a transitions of care workforce



Share the Data

- Community Health Information Exchange (cHIE)
- Reduce the burden to obtain data for care, payment, or improvement
- Encourage relationships between health systems that increase transparency and find mutual solutions to common problems



High Quality Primary Care For Everyone



Questions?

