



2020 Annual Forum

Advanced Primary Care Goes Mainstream
Tuesday, November 10, 2020 | 2:00 PM- 3:00 PM ET



Karen Johnson

MODERATOR

Director
Performance, Improvement,
and Innovation
Washington Health Alliance



Shawn Martin

Executive Vice President / CEO
American Academy of Family Physicians



Norman Chenven, MD

Founding CEO
Austin Regional Clinic



E. John Rott, MD

Regional Assistant
Medical Director
Kaiser Permanente



Linda Brady

ACO Portfolio and Network
Strategy Manager
The Boeing Company



#NatAllForum

Advancing Primary Care

STEPS PURCHASERS CAN TAKE TO GET WHAT THEY WANT

Advancing Primary Care

What Makes Primary Care **ADVANCED** Primary Care? National Alliance Identified **SEVEN** Key Attributes

1

Enhanced access for patients

Convenient access, same day appointments, walk-ins, virtual access, no financial barriers to primary care

2

More time with patients

Enhanced patient engagement and support, shared decision-making, understanding preferences, social determinants of health

3

Realigned payment methods

Patient-centered experience and outcomes, quality and efficiency metrics, deemphasize visit volume

4

Organizational & Infrastructure backbone

Relevant analytics, reporting and communication, continuous staff training

5

Disciplined focus on health improvement

Risk stratification and population health management, systematic approach to gaps in care

6

BH Integration

Screening for BH concerns (e.g., depression, anxiety, substance use disorder) and coordination of care

7

Referral Management

More limited, appropriate and high-quality referral practices, coordination and reintegration of patient care



YOU KNOW WHAT YOU WANT...

ACHIEVING VALUE THROUGH ADVANCED PRIMARY CARE

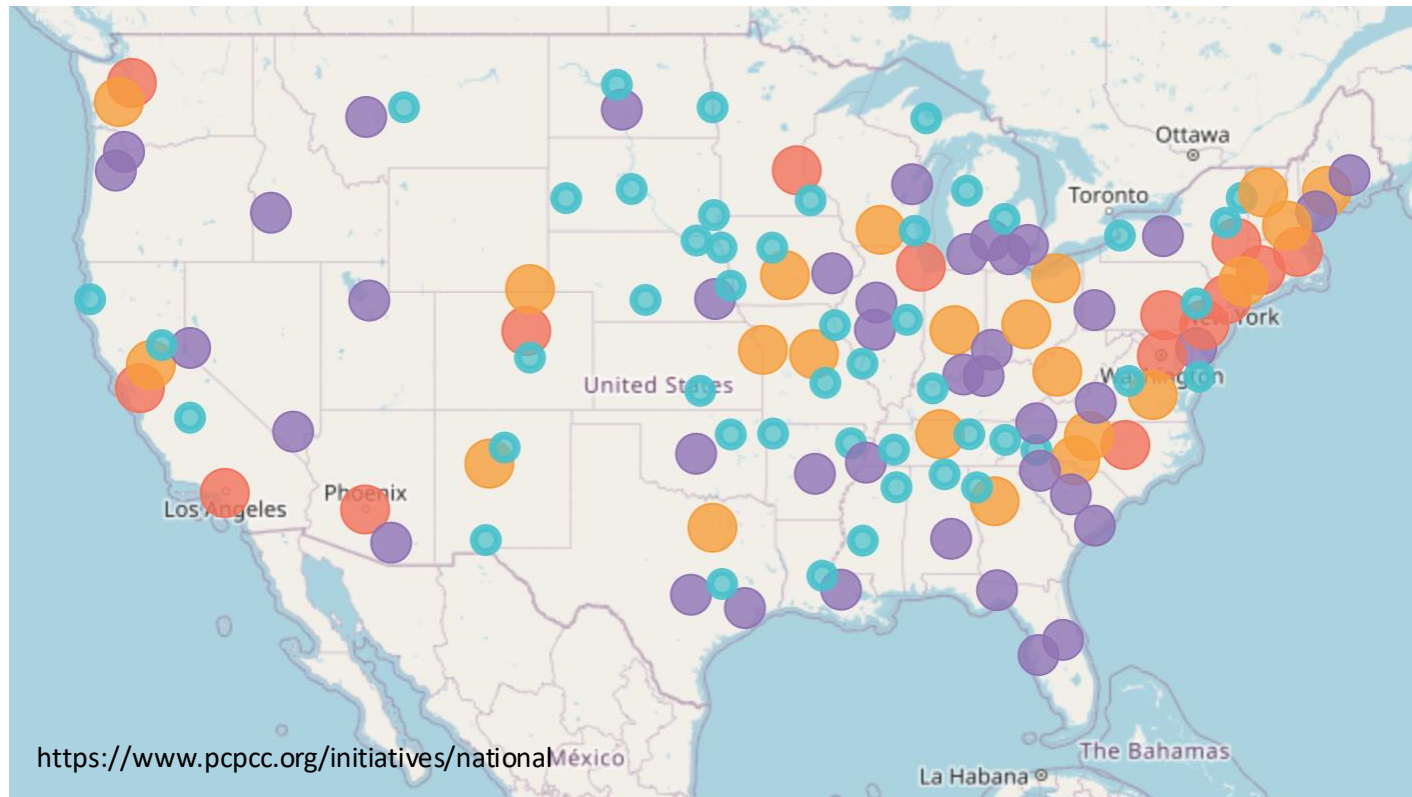
A Deep Dive Powered by eValue8™



HOW TO GET IT...

Advancing Primary Care

LOTS OF GOOD INTENTIONS...LOTS OF MODELS

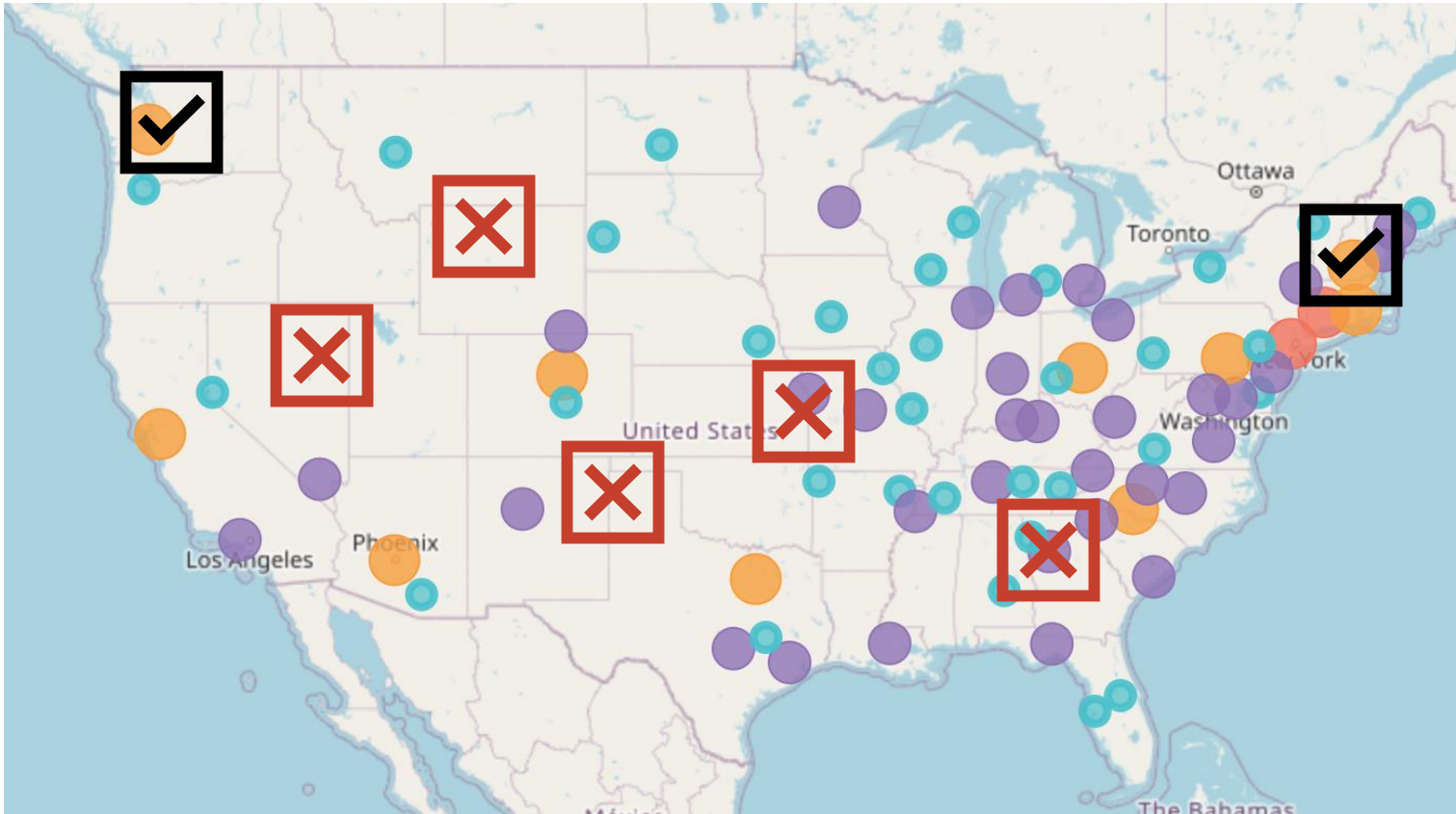


NEW MODELS ABOUND:

- ✓ **GEOGRAPHIC** (States/Regions)
- ✓ **MARKET** (Commercial, Medicare, & Medicaid)

- Patient-Centered Medical Home
- Health Homes
- Comprehensive Primary Care Plus
- Primary Care First
- Direct Primary Care
- Stand-alone Primary Care
- Health Plan clinics

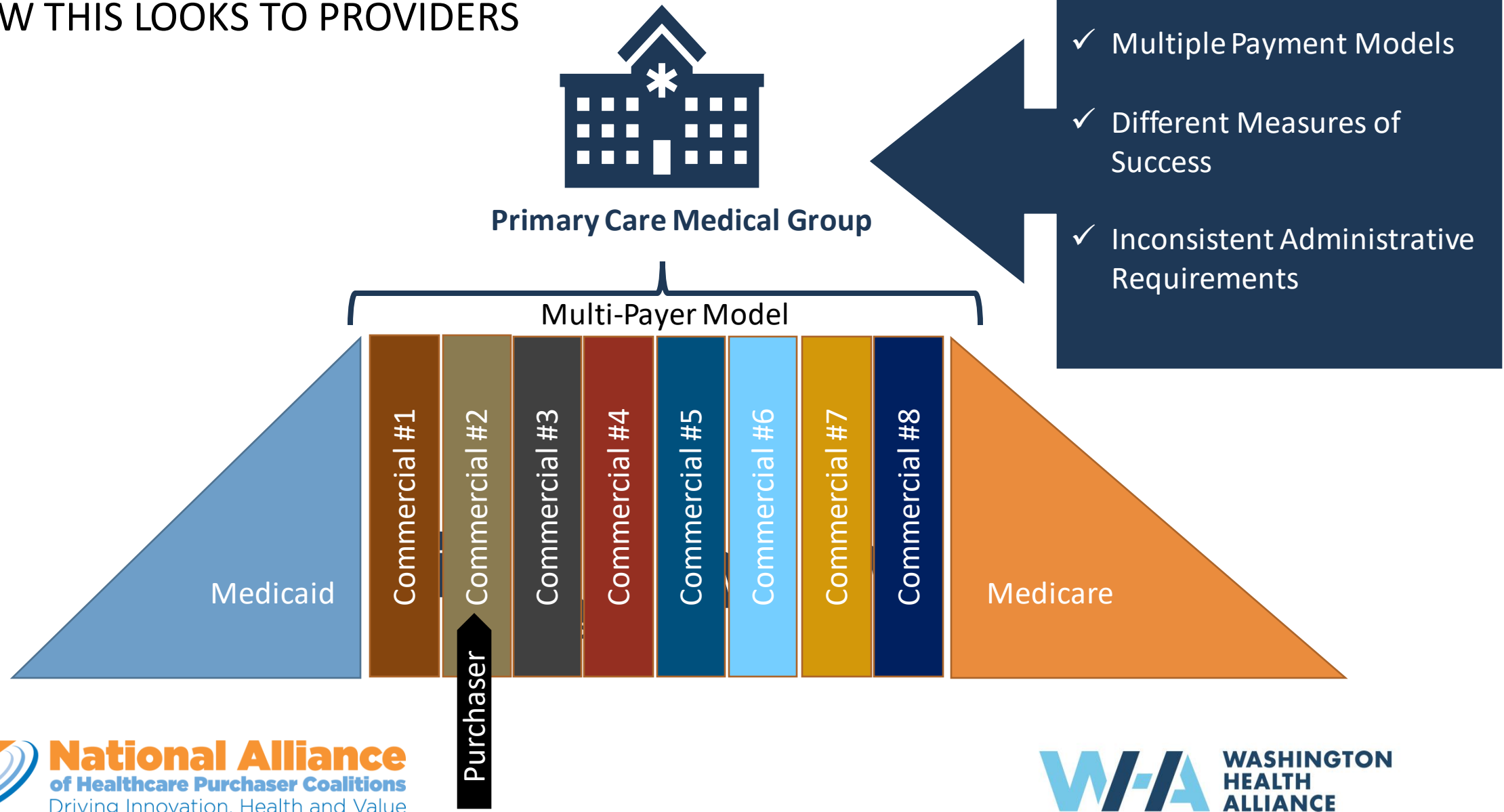
HOW THIS LOOKS TO PURCHASERS



CHALLENGES FOR PURCHASERS:

- Geographic variation
- Inconsistency across providers within a geography
- Different settings prioritize different features of primary care
- Primary care transformation is a work in process – that cannot happen without your support

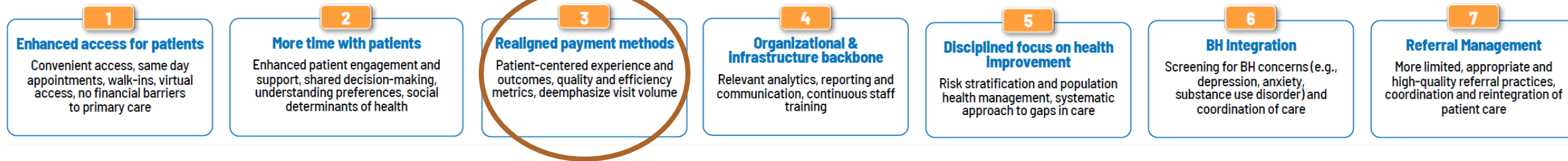
HOW THIS LOOKS TO PROVIDERS



Advancing Primary Care

TWO IMPORTANT STEPS PURCHASERS CAN TAKE...

What Makes Primary Care **ADVANCED** Primary Care? National Alliance Identified **SEVEN** Key Attributes



1. Advocate for multi-payer strategies that support primary care:
 - Prospective (not fee-for-service)
 - Accountable (tied to measures of success you care about)
 - Comprehensive (provides the resources required to deliver the care you want)
 - Aigned (reduce administrative complexity)
2. Ensure communication and benefit design strategies signal the importance of primary care



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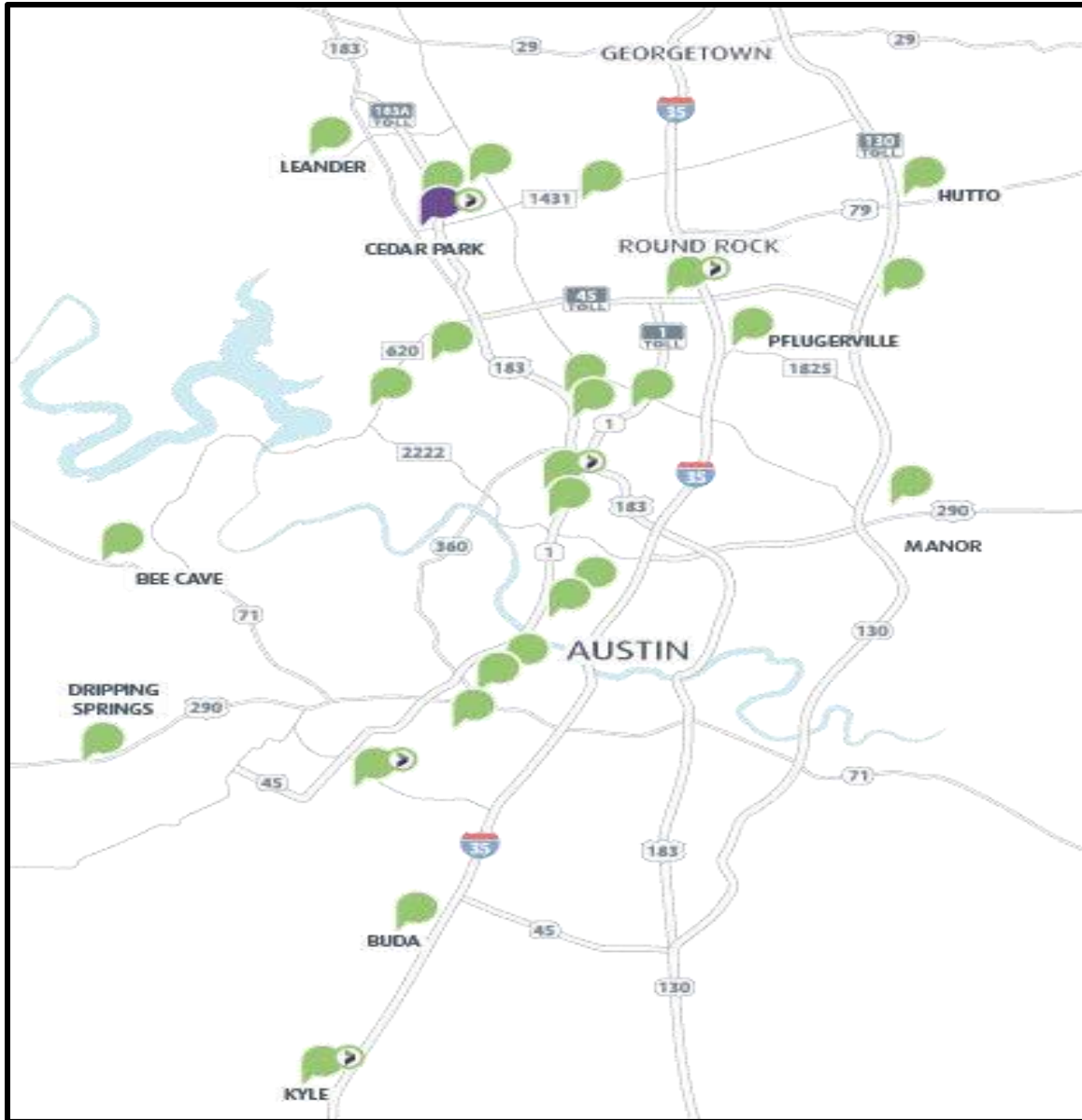
Our Mission

Austin Regional Clinic's mission is to provide comprehensive, accessible health care to individuals and families in Central Texas, with sensitivity to the cost of that care. We believe that each doctor/patient relationship is unique. We are committed to high professional standards in providing personalized care and promoting healthy lifestyles.

Our Vision

- To remain the premier multispecialty group in the larger Austin area.
- To remain physician led and governed and to remain in control of our destiny.
- To maintain a healthy working environment that engages the loyalty of our physicians and staff to take pride in being a member of our medical group.
- To remain innovative, nimble, adaptable and long term focused on providing cutting edge, convenient, accessible and cost effective care utilizing new communication systems, information and state of the art digital technology.

2020 numbers at a glance



- **1,300,000+** patient visits
- **500,000+** active patients
- **25%** Commercial market share
- **12%** Medicare market share
- **2,000+** employees
- **340** physicians & APCs
- **26** locations (*and counting*)
- **20** specialties
- **70/30** PCPs to Specialists ratios
- **10** cities
- **3** counties
- **1** multispecialty medical group since 1980

ARC Is A Primary Care Dominant Multispecialty Group (Approximately 75%)

- Family Medicine -- 110 physicians
- Pediatrics -- 75 physicians
- Internal medicine -- 38 physicians
- OB-Gyn -- 37 physicians
- Other Specialties (GS, Allergy, Dermatology, Endocrinology, Rheumatology, ENT, Orthopedics, Podiatry, Sports Medicine, etc.) -- 80 physicians

ARC – our medical group evolved to provide value based care and is therefore not structured like a traditional multispecialty medical group.

ARC in 2020



What Do We Mean By Primary Care Provider (PCP)?

- Trained in Internal Medicine, Family Practice or Pediatrics
- Committed to continuity of care – and an ongoing relationship
- Assuring access to care with the patient's longitudinal record
- Committed to coordination of care

What Doesn't Meet Those Requirements?

- Urgent Care Clinics
- A national telemedicine service
- Most retail clinics (There can be exceptions)
- Dr. Google

What Options Are Available Today?

- Free standing Urgent Care Clinics
- Emergency departments
- Pharmacy and retail based clinics
- Employer sponsored clinics at the workplace
- Small independent practices and independent practice associations (IPAs)
- Large multispecialty practices
- Hospital employed practices and integrated systems
- Concierge practices
- Cash pay direct care
- Coming soon: artificial intelligence (AI) driven virtual care (bots)

Where Will The Long Term Value Reside?

- Relationships based on the premise that continuity of care is important.
- Practices that are integrated across specialties.
- Practices that allow for interoperability and easy transfer of clinical information.
- Practices that allow for measurement and tracking of timely access, patient satisfaction, quality measures and efficiency (cost).
- Contracts that incentivize & reward the care system for achieving superior outcomes.
- These characteristics are most likely to be consistently achieved if the care is delivered by an organized system of care.

What Barriers Do We Face?

- National shortage of PCPs
- Medical school and residency trainings are lagging
- Rural/urban disparities
- Complicated, inadequate and conflicting business models
- Consolidation of health care providers: hospitals, health plans, private equity
- Lack of functional, convenient or affordable EMR interoperability
- Employer based coverage creates churn and lack of continuity
- Lack of national political consensus
- Ongoing legislative and bureaucratic disarray
- Middlemen complicate the dialogue between the payer (employers) and the providers

What Is Needed In Order To Make Incremental Progress Towards Successfully Promoting Primary Care?

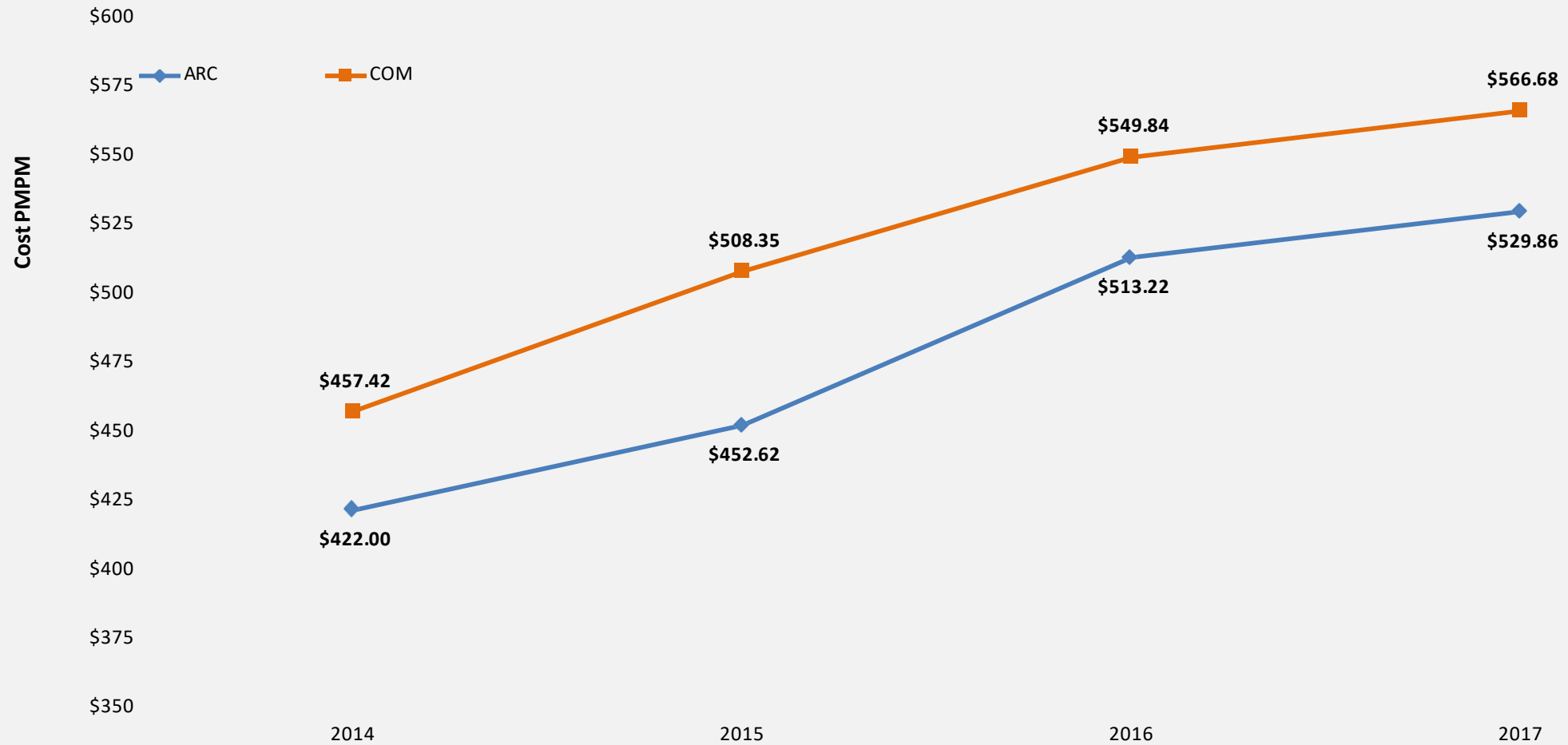
- Work with PCPs that are embedded in an organized system that espouses value based care.
- Work with PCPs that have interoperable EMR capabilities with regard to hospital, specialty and post-acute care.
- Enhanced primary care requires a significant infrastructure to be optimally effective (Population health staff and analytic capability).
- 24 x 7 access to advice and care to avoid OON and OOC (out of control) utilization.
- Longer term relationships and commitments (More than a single plan year) will lead to enhanced results.
- Ideally establish employer to provider relationships to shorten the chain of communication.

ARC Quality Scorecard - BCBS ERS Plan

Measure Name	Target Rate	ARC Rate	National 90th Percentile*	Texas State Average *
HbA1C Testing	90.63%	97.46%	97.08%	89.4%
Breast Cancer Screening	66.6%	83.77%	83.25%	65.79%
Cervical Cancer Screening	74.33%	81.19%	81.76%	72.80%
Colorectal Cancer Screening	53.53%	82.84%	82.48%	50.44%
How Well Providers Communicate	80%	97.00%	79%	79%
Timely Appointments, Care, Info	80%	88.00%	62%	66%
Follow-up on Test Results	80%	91.00%	56%	64%

* Source: NCQA 2018 Quality Compass for all Lines of Business

ARC vs Market Commercial PMPM



ARC Patient Satisfaction



4.8 out of 5

80,000

Reviews



A photograph showing an elderly couple in the foreground, out of focus. In the background, a hand holds a tablet displaying a smiling male doctor in a white lab coat, who is waving. The setting appears to be a home or a private care facility.

Advanced Primary Care at Kaiser Permanente

E. John Rott MD MPH
Regional Assistant Medical Director
Southern California Permanente Medical Group



Kaiser Permanente's mission is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve



22,000+
Physicians



217,000+
Employees



39
Hospitals



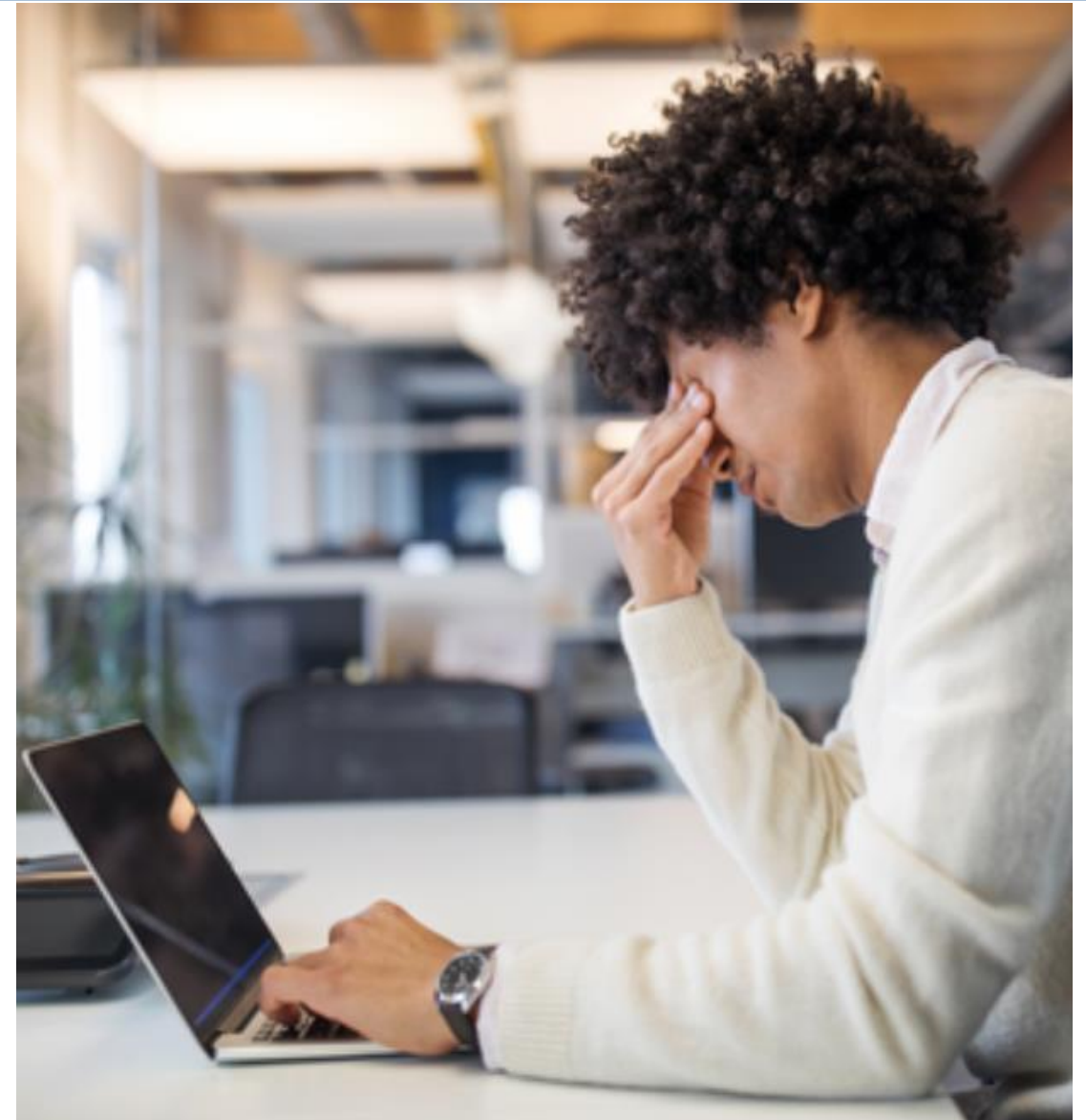
694
Medical Offices

Kaiser Permanente national snapshot

As of January 2019



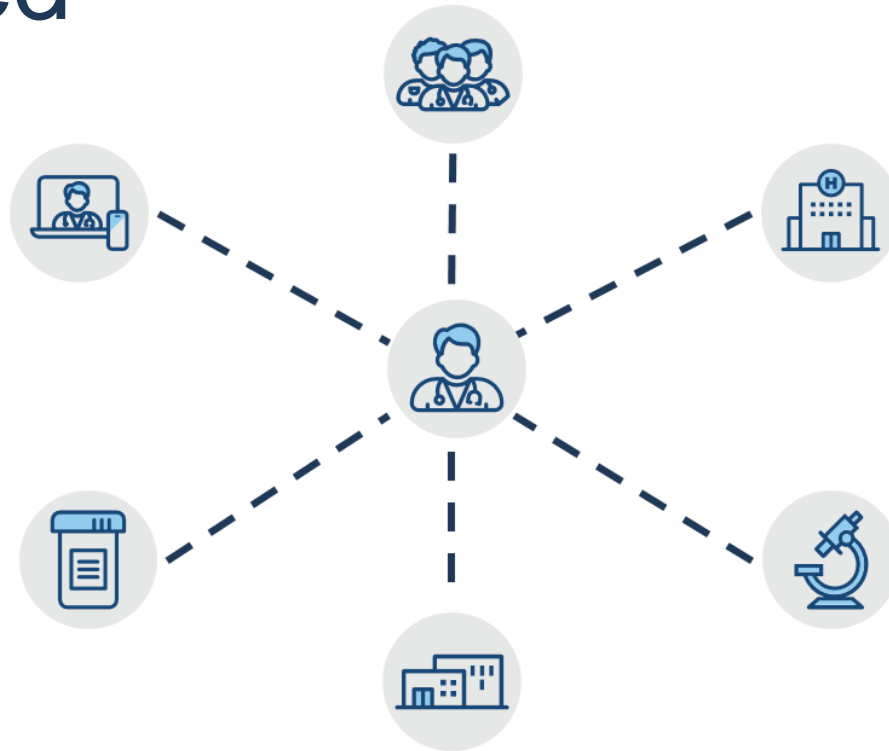
Being a Primary
Care Physician
is challenging
and stressful





Primary Care
doctors need a
robust support
structure

Advanced Primary Care is at its best in an integrated system



Advanced Primary Care is superior to point solutions for Chronic Disease Management



**Enhanced
Access**



**More time
with patients**



**Realigned
payment
methods**



**Organizational &
infrastructure
backbone**



**Disciplined
focus on health
improvement**



**Mental Health
integration**



**Referral
Management**



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