

Standing Committee on Primary Care: May 2024 Public Meeting

MEETING AGENDA

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Monday, May 20, 2024 (9:00 AM – 4:15 PM EDT); Tuesday, May 21, 2024 (9:00 AM - 12:50 PM EDT)

Meeting Objectives

- Discuss the Standing Committee's role as a resource to the federal government on issues of primary care
- Provide a brief overview of the primary care crisis
- Address key primary care issues relevant to federal programs and policies, including exploring potential solutions and next steps for action
- Engage in dialogue with federal partners about additional opportunities for Standing Committee input and possible collaboration

- 9:00 AM** **Welcome and Overview of Agenda**
Standing Committee on Primary Care: Overview of the origin, task, and value
Mary Wakefield, Co-Chair, Standing Committee on Primary Care
- 9:05 AM** **Department of Health and Human Services: Primary Care Priorities and Future Directions**
Rose Sullivan, Counselor to the Secretary, Department of Health and Human Services
- 9:10 AM** **2024 Health of the US Primary Care Scorecard Summary: No One Can See You Now**
Yalda Jabbarpour, Director, Robert Graham Center, Standing Committee Member (10 minutes)
- Discussion: Opportunities and solutions to strengthen primary care**
Lauren Hughes, State Policy Director, Farley Health Policy Center, University of Colorado, Standing Committee Co-Chair (15 minutes)
- 9:35 AM** **Primary Care Financing for Infrastructure and Payment for Delivery of High-Quality, Whole Health Services**
Kevin Grumbach, Professor, University of California San Francisco, Standing

Committee Member

9:40 AM

Centers for Medicare and Medicaid Services: Lessons learned and implications for future policies to strengthen primary care

Kevin Grumbach, UCSF, Standing Committee Member (Moderator)

Christiane Labonte, Senior Advisor, Center for Medicare (10 min)

Purva Rawal, Chief Strategy Officer, Center for Medicare and Medicaid Innovation (10 min)

- **Medicare Advantage**
- **Accountable Care Organizations / Shared Savings Programs**
- **Innovation Center Demonstrations**
- **Traditional Medicare, including reforms to Medicare RVU valuation and new CPT codes**

Diane Marriott, Director of Multipayer Initiatives, University of Michigan (10 min)

Eugene Rich, Senior Fellow, Mathematica (10 min)

Discussion and Questions from the Audience

Session Questions

- What has worked for CMMI that CMS should scale in Medicare? What are the lessons learned from CMMI models that should be more broadly adopted?
- How can CMS identify and maintain longitudinal patient-provider relationships? Care management is in the fee schedule now, and while CMMI can attribute patients, in Medicare it is more difficult.
- How should CMS be measuring quality, especially with the newer models? What data is needed to manage patients better?
- What can CMS do to get to 100% Accountable Care in Medicare?

10:40 AM

Moderated discussion: Determining Valuation for Primary Care: External inputs and provider observations

Asaf Bitton, Executive Director, Ariadne Labs, Standing Committee Member (Moderator)

Ryan Howe, Director Hospital and Ambulatory Policy Group, Center for Medicare

Bob Berenson, Institute Fellow, Urban Institute

Andrea Anderson, Associate Professor, George Washington School of Medicine, Standing Committee Member

Tom Weida, Associate Dean for Clinical Affairs and CMO, University of Alabama

Sarah Candler, Physician Advocate, American College of Physicians

Discussion and Questions from the Audience

Session Questions

- In 45 seconds or less, is there anything to add about the RUC and the fee schedule that the audience should know?
- What are the areas where current coding in payment for primary care is not accurately accounting for the resources expended? What are the resource costs that the current system does not account for?
- What different types of input could / should CMS consider regarding primary care valuation decisions (alternatives to the RUC)?
- Are there other groups besides AMA that provide guidance that have NDAs?

- What does CMS consider when making valuation decisions for primary care? What are the limitations?

11:40 AM

BREAK

11:50 AM

Frontline Perspectives on Financing Infrastructure and Enhancing Payment to Deliver High-Quality Primary Care

Ramon Cancino, Associate Professor, University of Texas, Standing Committee Member (Moderator)

Yvonne Davis, Health Care Partners of South Carolina, Standing Committee Member (10 min)

Alex Krist, Professor, Virginia Commonwealth University, Standing Committee Member (10 min)

Kimberly Herek, Director of Quality Improvement, Rocky Mountain Health Plans (10 min) (virtual)

Discussion and Questions from the Audience

Session Questions

- What are clinicians looking for in an ideal payment model? What are the features?
- What are the barriers preventing skeptics from joining shared savings models? How can CMS make it easier to join and decrease the associated burden? How can CMS streamline and consolidate the incentives?
- How can CMS identify and maintain longitudinal patient-provider relationships? Care management is in the fee schedule now, and while CMMI can attribute patients, in Medicare it is more difficult.
- How should CMS be measuring quality, especially with the newer models? What data is needed to manage patients better?
- What can CMS do to get to 100% Accountable Care in Medicare?

12:50 PM

BREAK

1:30 PM

State-Level Primary Care Innovations and Implications for Federal Policy: Waivers, payment alignment, and primary care spend targets

Beth Bortz, President and CEO, Virginia Center for Health Innovation, Standing Committee Member (Moderator)

Lauryn Walker, Chief Strategy Officer, Virginia Center for Health Innovation (10 min)

Kristen Dubay, Chief of Population Health, NC Medicaid (10 min)

Laura Fox, Director of Payment Innovation, BlueShield of California (10 min)

Discussion and Questions from the Audience

Session Questions

- What are best practices at the state level to encourage payer alignment? What can the federal government do to better support payer alignment?
- What do you think CMS could do to help your state get to 100% accountable care?
- What about measuring quality in your state? How can CMS support what you are doing in terms of measuring quality? What can CMS learn from your state?
- What are the federal barriers that make payment alignment difficult in your state?
- What can the federal government do to better assist you in your work?

2:30 PM

BREAK

2:45 PM

Federal and State Primary Care Access Standards Enforcement

Tumaini Coker, Seattle Children's Hospital, Standing Committee Member (moderator)

Ellen-Marie Whelan, Chief Population Officer, Center for Medicaid and CHIP Services (10 min)

Craig Kennedy, President and CEO, Medicaid Health Plans of America (10 min)

Sara Rosenbaum, Emerita Professor Health Law and Policy, Milken Institute School of Public Health, George Washington University (10 min)

Discussion and Questions from the Audience

Session Questions

- What do you see as the area of greatest opportunity in Medicaid, either at the state or federal level, that could have the most impact on patient's ability to access and receive high quality primary care?
- What is currently missing from the recent Final Rule for Medicaid and CHIP and its potential to improve access, quality, and transparency in Medicaid? What would you have liked to see in it that could make a big difference for primary care access and quality for Medicaid insured populations?
- What are the biggest challenges or barriers you anticipate in the final rule's implementation?
- How can Medicaid encourage primary care providers to maximize benefits of team based care?
- What needs to happen at the federal level for Medicaid to ensure that populations across states have access to high quality primary care?
- How can Medicaid managed care further leverage and support primary care? What policy directions could help to advance that focus?

3:45 PM

Summary Discussion

Mary Wakefield, Standing Committee Co-Chair

Discussion and Questions from the Audience

4:15 PM

ADJOURN DAY 1 OPEN SESSION

MAY 21, 2024 (DAY 2) – OPEN SESSION

9:00 AM

Welcome and Overview of Agenda

Lauren Hughes, State Policy Director, Farley Health Policy Center, University of Colorado, Standing Committee Co-Chair

9:10 AM

Short, Medium, and Long-term Challenges and Opportunities to Strengthen the Primary Care Workforce

Deborah Cohen, Professor, Oregon Health & Science University, Standing Committee Member

9:15 AM

Federal Perspectives on Training the Future Primary Care Workforce: Long term solutions for growth

Deborah Cohen, OHSU, Standing Committee Member (Moderator)
Carole Johnson, Administrator, Health Resources and Services Administration
(10 min)
Ing-Jye Cheng, Acting Deputy Director, Center for Medicare (10 min)

Discussion and Questions from the Audience

9:45 AM

Frontline Perspectives on Training the Future Primary Care Workforce: Long term solutions for growth

Deborah Cohen, OHSU, Standing Committee Member (Moderator)
Linda Thomas-Hemak, President and CEO, Wright Center for Graduate Medical Education (10 min)
Ted Epperly, President and CEO, Full Circle Health, (10 min) (virtual)

Discussion and Questions from the Audience

Session Questions

- How can GME shift away from hospitals and into community settings? What would / should that shift look like specifically. For example, should GME limit other specialties and favor primary care? And should it include other advanced practice professions?
- Can HRSA invest differently and better in Teaching Health Centers? Should nursing and other professions be included? Right now, it is only physicians and dentists.
- What do we and don't we know about outcomes of THCs. For example, what do we know about where people practice after. Do they stay in the community / underserved settings or go elsewhere?
- What else do community-based facilities need if they are going to train people where we think they need to be trained, such as FQHCs and Teaching Health Centers? If training is shifted to these settings, what can HRSA do to help make individual and team-based training feasible?

10:15 AM

Leveraging Interdisciplinary Teams to Improve Access to High-Quality Primary Care, Including Mitigating Primary Care Shortages: Medium term solutions for growth

Cheryl Giscombe, Associate Dean of Academic Affairs, University of North Carolina School of Nursing, Standing Committee Member (Moderator)
Eboni Winford, Director of Research and Health Equity, Cherokee Health Systems, Standing Committee Member (10 min)
M. Shawn McFarland, National Program Manager for Clinical Pharmacy, Department of Veterans Affairs (10 min)
Dawn Alley, Head of Scale, IMPaCT (10 min)
Nicole Seagriff, Vice President Western Region, Community Health Center, Inc. (10 min)

Discussion and Questions from the Audience

Session Questions:

- What is the best way to integrate extended team members (pharmacists, CHWs, coaches, etc) into interprofessional primary care teams? What is the best way to measure outcomes / impact of extended members on teams? What are the policy barriers that make it difficult?

- What are the features of and factors that contribute to high-functioning interprofessional primary care teams?
- What is the role of primary care for maternal and child health and behavioral health integration models? What does the optimal integration model for this look like?
- What are the best practices for behavioral health integration with primary care?

11:15 AM

BREAK

11:30 AM

Leveraging Primary Care Innovations to Improve Primary Care Access: Short term solutions for growth

Ishani Ganguli, Associate Professor, Harvard Medical School, Standing Committee Member (Moderator)

Kyu Rhee, President and CEO, National Association of Community Health Centers (10 min) (virtual)

Kameron Matthews, Chief Health Officer, Cityblock Health, Standing Committee Member (10 min)

Seiji Hayashi, Lead Medical Director of Government Programs, CareFirst BlueCross BlueShield (10 min)

Discussion and Questions from the Audience

Session Questions

- What is the role of alternatives to traditional primary care (e.g., retail clinics, virtual-first commercial primary care models, payer-led services) in the current and future primary care landscape?
- How do these new entrants support or weaken the core functions of primary care?
- What partnerships are needed or possible between new entrants and traditional primary care to ensure the core functions of primary care are met?
- What should the federal government do to support the role of these new entrants? What, if anything, should or could it do to regulate their role?

12:30 PM

Summary Discussion

Lauren Hughes, Standing Committee Co-Chair

12:50 PM

ADJOURN OPEN SESSION