



# Promoting High Value Primary Care: An Action Guide for Employers

Strengthening primary care is central to employer-driven efforts to **lower health spending, enhance patient experience, and improve population health outcomes**. The empirical evidence on the contribution of primary care to better cost and quality performance is compelling.<sup>1,2</sup> Four concrete steps employers can take to increase receipt of high value primary care include:



## 1. Change your benefit design to encourage stronger relationship between patients and a primary care physician

- ✔ **Encourage employees to select a primary care provider—or personal physician—even if they are in a PPO.** Many employers already do this, and some are even mandating PCP selection at open enrollment. Covered CA is mandating that all members choose a PCP, otherwise one will be assigned to them by their health plan.<sup>3</sup> Some health plans assign premium discounts for this practice in fully insured products.
- ✔ **Create benefit designs that encourage PCP use.** For example, some employer-sponsored medical plans provide their enrolled employees (and each enrolled family member) with a number of free primary care visits every year,<sup>4</sup> or waive primary care copays for members enrolled in their direct-contract ACO.

### References

1. [http://www.commonwealthfund.org/usr\\_doc/Starfield\\_Milbank.pdf](http://www.commonwealthfund.org/usr_doc/Starfield_Milbank.pdf)
2. <http://content.healthaffairs.org/content/23/5/165.full>
3. [http://hbex.coveredca.com/toolkit/webinars-briefings/downloads/PCP\\_Assignment\\_Quick\\_Guide\\_Final.pdf?v=2.0](http://hbex.coveredca.com/toolkit/webinars-briefings/downloads/PCP_Assignment_Quick_Guide_Final.pdf?v=2.0)
4. <http://www.mypgebenefits.com/physical-health-account.shtml>

### Early employer pilots that target enhanced primary care access yield important lessons.<sup>3</sup>

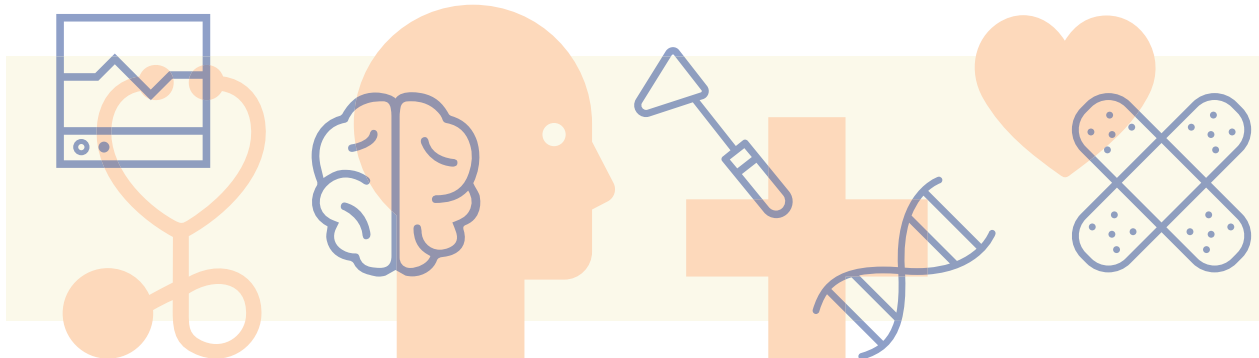
IBM's primary care medical home interventions have produced promising results on a national level, including a 36.3 percent decrease in number of days for hospital stays; a 32.2 percent decrease in emergency room use; and a 10.5 percent decrease in specialty care costs.

A GE pilot population in Cincinnati, OH, improved quality scores signifying better management of chronic conditions, resulting in fewer complications and 14 percent fewer admissions.

## 2. Work with your carrier or TPA to change provider payment

Many insurance carriers and third party administrators (TPAs) make additional payments to primary care practices that are charged back to healthcare purchasers.

The magnitude of these additional payments vary widely among payers and regions.<sup>5</sup> Despite the additional up-front cost, several studies show investments in primary care return significant savings in subsequent years.



- ✔ **Ask your carrier or TPA if they make infrastructure or care coordination payments to primary care practices.** If they do, ask them what performance guarantees are included and what the PMPM charges amount to. If they are not, consider providing financial support to primary care practices to enhance access to team-based care or infrastructure support for high risk patients.
- ✔ **Ask your carrier or TPA if they make performance-based payments to primary care practices that meet certain quality or efficiency targets (P4P).** Ensure that performance on health status, patient-reported outcomes, and patient experience are included in any P4P metrics.
- ✔ **Ask your carrier or TPA if there are shared savings if Total Cost of Care (TCC) is moderated or reduced.** Encourage use of both upside and downside incentives that promote care coordination and collaboration with hospital partners to reduce inpatient and emergency department use.
- ✔ **Encourage your carrier and/or TPA to contract with those practices that provide enhanced (e.g., after hours) access to care and ensure patients and caregivers have electronic access to an interoperable medical record.** Such capabilities usually indicate a practice delivers better access, superior quality, and lower costs to patients and purchasers.

### References

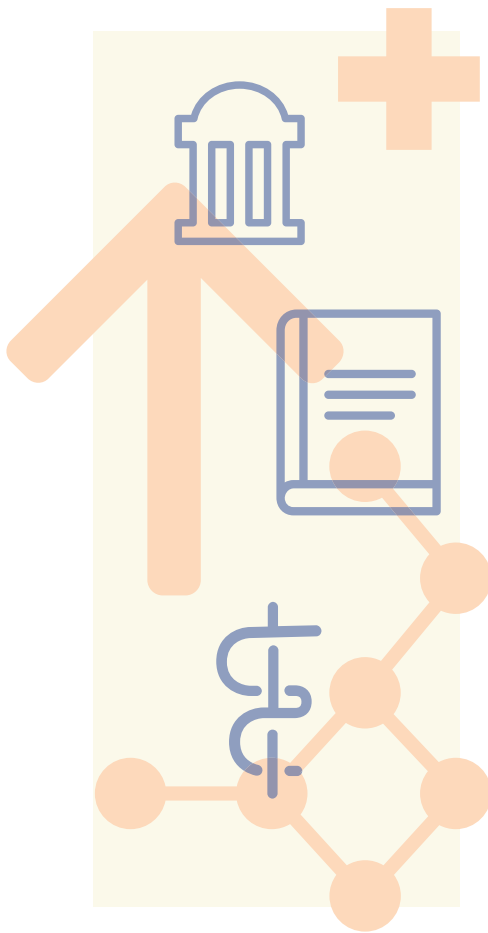


**3.** Engage your employees by promoting transparency among primary care practices

- ✔ Ask your carrier or TPA to provide information on clinical quality, utilization, and patient experience measures for primary care practices included in their network. Make sure this information is included in online provider directories.
- ✔ Provide employees with information on the importance of primary care and how to identify high value primary care practices. Help consumers assess whether a doctor and his/her practice is the right fit for their needs by providing a list of questions a consumer can ask (Appendix).

4. Support state and federal policies that strengthen primary care

Changing primary care policy at the state and federal level is key to supporting a stronger primary care foundation across the health system.



- ✔ **Allow the use of pre-deductible coverage in High-Deductible Health Plans (HDHPs).** Encourage your government relations team, business coalitions, and trade associations to support legislation that allows employers to exempt primary care services from the deductible in HDHPs (i.e. waive cost-sharing for primary care services even if beneficiary has not met deductible).
- ✔ **Increase the number of Graduate Medical Education (GME) training slots for Family/Internal Medicine.** Combat the shortage of PCPs by supporting legislation that increases the number of Medicare-supported training slots for family medicine and internal medicine.
- ✔ **Encourage your carrier or TPA to participate in multi-payer primary care initiatives.** Public programs, commercial insurers, and self-insured employers are experimenting with multi-payer primary care payment initiatives, including the federal Comprehensive Primary Care Plus program, Vermont Blueprint for Health, and Arkansas Payment Improvement Initiative.<sup>6</sup>

For more information on these and other employer-driven primary care strategies, please visit [www.pvnetwork.org](http://www.pvnetwork.org).

References

# APPENDIX

## Questions for Patients to Consider When Choosing a Primary Care Practice



When choosing a primary care doctor, it is important to gather information about whether the practice is providing high-value care (high quality at a reasonable cost).

Information from your health plan or the internet should be able to tell you whether the physician is in your network, speaks your language, is in a convenient location, and is accepting new patients.

After that, here are a few questions you should ask your prospective primary care doctor's office over the phone:

Will I be able to see my medical record (e.g., lab tests, medication list, prescription refills) online?

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Can I message my doctor or care team (e.g., nurse, medical assistant) through email or an online patient portal?

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Is there someone other than the doctor (such as a medical assistant) who can help me with tasks like refilling medications, learning about a condition or diagnosis, or managing a chronic disease?

*Note about this question: You're hoping the answer is yes because it tells you the doctor is likely using his or her team members effectively, and not believing every task associated with your care is the sole responsibility of the doctor.*

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Can the doctor and care team do the following in the office: 1) freeze a wart, 2) inject a knee with cortisone to treat arthritis, 3) conduct women's health procedures such as inserting an IUD?

*Note about this question: The items listed in the question are some of the more common things that high value primary care should be able to do in the office without having to refer you to a specialist for a separate appointment.*

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Will someone from the care team contact me to help remind me when screenings or regular blood tests are due before my next appointment (to avoid having to come back for an extra visit to review the results)?

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Is there a doctor, nurse or other person available to speak to me after hours? Does that person have the ability to access my medical record?

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Do you hold appointments in your schedule every day for same-day visits?

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Do you have a method of staying informed when I receive care outside of the clinic – such as care received from the Emergency Department or specialists?

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Do you have onsite counseling services to help patients who are experiencing stress or emotional problems, or ways to help patients with referrals to a counselor?

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