

# Consumer Advisory Council

## July 13, 2021

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# Agenda

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## Topics

- |   |            |
|---|------------|
| 1. Background                           | 5 minutes  |
| 2. Consumer Representative Perspectives | 20 minutes |
| 3. OHS' Primary Care Initiative         | 10 minutes |
| 4. Questions and Discussion             | 10 minutes |
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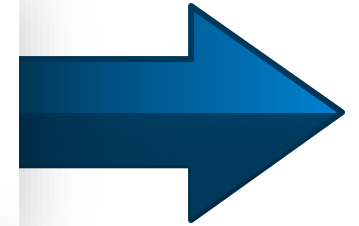
# Connecticut's Healthcare Benchmark Initiative

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## Cost Growth Benchmark

A cost growth benchmark that covers all payers and all populations for 2021-2025.

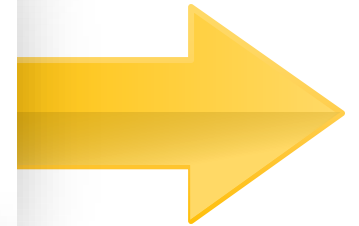


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## Primary Care Spend Target

Getting to a 10% primary care target that applies to all payers and populations as a share of total healthcare expenditures for CY 2021-2025.

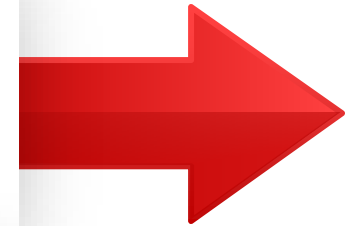


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## Data Use Strategy

A complementary strategy that leverages the state's APCD to analyze cost and cost growth drivers.



4



## Quality Benchmarks

Beginning in CY 2022, quality benchmarks applied to all public and private payers.



# Why are we focusing on primary care?

- High-quality primary care should be accessible to all Connecticut (CT) residents in all communities
- Strengthening primary care is a priority of Governor Lamont and Connecticut's Office of Health Strategy (OHS)
- Primary care in CT has room for improvement:
  - Connecticut spends less than other states on primary care relative to total health care spending
    - Health systems with a foundation of comprehensive primary care achieve better, more equitable health outcomes and are less costly<sup>1</sup>
  - Connecticut faces challenges recruiting and retaining primary care physicians<sup>2</sup>
    - Nationwide, the number of trainees entering primary care professions is inadequate<sup>3</sup>

<sup>1</sup>Primary Care Collaborative: Primary Care Spending: High Stakes, Low Investment [https://www.pcpcc.org/sites/default/files/resources/PCC\\_Primary\\_Care\\_Spending\\_2020.pdf](https://www.pcpcc.org/sites/default/files/resources/PCC_Primary_Care_Spending_2020.pdf)

<sup>2</sup>Robert Graham Center: Connecticut: Projecting Primary Care Physician Workforce <https://www.graham-center.org/content/dam/rgc/documents/maps-data-tools/state-collections/workforce-projections/Connecticut.pdf>

<sup>3</sup>National Academies of Sciences, Engineering, and Medicine 2021. Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25983>

# We want to hear from you!

- What do patients value most in their primary care experience?
- What are barriers to high-quality primary care that warrant further examination?
- What would make it easier for you to access primary care?
- What changes would you like to see in your experience utilizing primary care?



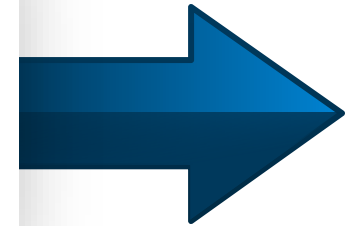
# Goals of OHS' Primary Care Subgroup

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## Primary Care Spending Targets

Make recommendations for primary care spending targets, an important step towards rebalancing health care system investments towards primary care

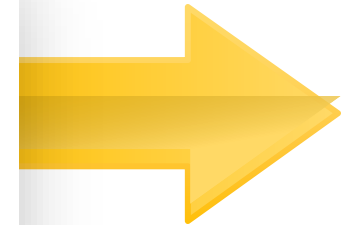


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## Roadmap for Strengthening Primary Care

Develop a roadmap for sustainably strengthening primary care practices and care delivery to improve the health of Connecticut residents (December 2021)



# Roadmap for Strengthening and Sustaining Primary Care

- The Primary Care Subgroup began meeting monthly in April 2021
- OHS is meeting with stakeholders to ensure it hears a broad array of perspectives
- The Roadmap will make recommendations for:
  1. More effective and efficient primary care to better meet the needs of patients and support primary care professionals
    - e.g., care that is relationship-centered, team-based, planned, accessible, evidence-based
  2. More flexible ways to reimburse primary care practices so they can spend more time with patients
  3. Resources and supports to help primary care practices
  4. A plan to implement starting in 2022

# What does “high-quality” primary care look like?

- The next slide will introduce 11 functions which the Primary Care Subgroup believes will lead to high-quality primary care.
- As we review the functions, consider whether these functions would improve your experience with primary care.





# Proposed High-Quality Primary Care Functions

1. Care is centered around the patient, including developing **trusted relationships**
2. Care is **team-based**
3. Practices designate a **lead clinician** for each patient
4. Practices **coordinate all care** for its patients
5. **Behavioral Health** is integrated into the practice
6. Practices deliver “**planned care**” at every visit
7. Care is **easily accessible and prompt**
8. Care follows **evidence-based** guidelines
9. Patients are **engaged and supported**
10. Practices **use data** to identify care needs and inform quality and equity improvement
11. Care is **community-oriented**

Are these functions likely to improve a patient’s experience with primary care? Is anything missing?

# How can you help OHS support this work?

- Review recommendations of the Primary Care Subgroup and provide feedback
- Help identify key patient groups OHS can engage in Roadmap design



# Questions and Discussion