

Initiative to Strengthen Primary Health Care

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Immediate Office of the Assistant Secretary for Health

(on detail from the Health Resources and Services Administration)



OASH

Office of the
Assistant Secretary
for Health

Why We Need to Strengthen Primary Health Care



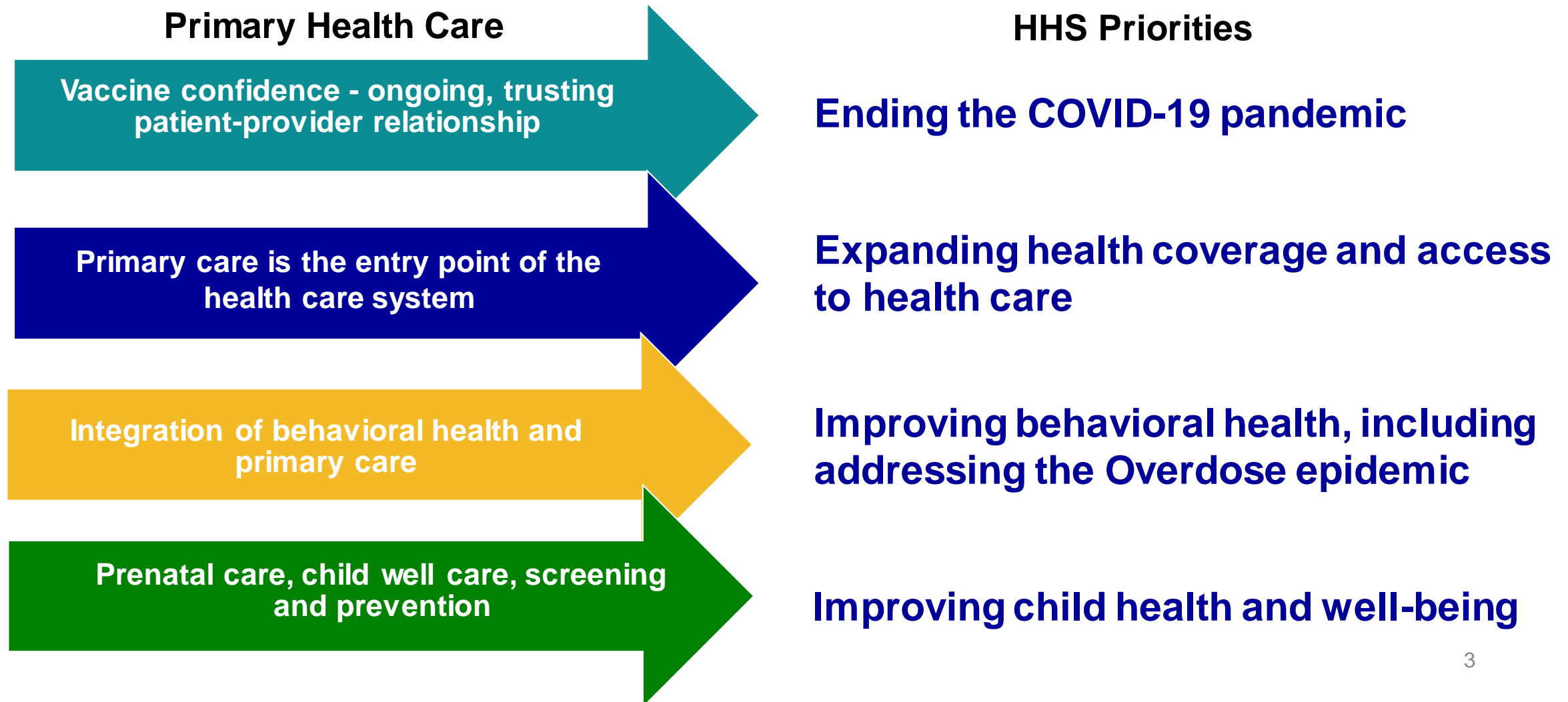
- Primary health care is the foundation of and entry to our health care system
- Primary health care results in longer lives and more equity^{1,2}
- The primary care foundation is weakening

Strengthening primary health care is essential to achieving HHS priorities and goals

[1. Shi, Scientifica 2012](#)

[2. Basu et al. Jama Int Med 2020](#)

Strengthening Primary Health Care Advances HHS Priorities



NASEM Report: *Implementing High-Quality Primary Care*



[NASEM May 2021](#)

High-quality primary care is the provision of whole-person, integrated, accessible, and equitable health care by interprofessional teams that 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.

5 Objectives for Achieving High-Quality Primary Care

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

Initiative to Strengthen Primary Health Care: Overview

- Launched by the Office of the Assistant Secretary for Health (OASH) in September 2021
- **Aim:**
 - Achieve a federal foundation to strengthen primary health care for our nation that will provide high quality primary health care for all, improve the health of individuals, families and communities, and advance health equity
- **Task:** Develop an initial HHS Plan to Strengthen Primary Health Care
 - Submit to Secretary Becerra
 - Target delivery date: Summer 2022
 - HHS role in steering, coordinating, and overseeing implementation of a plan to strengthen primary health care
 - Specific actions to be taken by HHS and across HHS agencies
 - Deliverables with timeline

Office of the Assistant Secretary for Health

HEALTH
FOR ALL

Everybody has a fair and realistic opportunity to optimize their health.

HEALTH
BY ALL

Distribute and democratize health care knowledge, capabilities, and delivery.

HEALTH
IN ALL

Prioritize health considerations in all sectors and policy areas.

Vision

- **Provide trusted data and information**
to serve HHS, the federal government, states and localities, and the general public
- **Convene partners**
federal agencies, state and local, professional societies, NGOs, academia, civil society, commercial partners, patient advocates
- **Develop novel initiatives**
gain situational awareness, identify gaps, build teams, set a common agenda, support infrastructure, transition to Operational Divisions
- **Organize and lead national initiatives**

Initiative to Strengthen Primary Health Care: Status Update

- **Federal Leadership Advisory Group**
 - Provides consultation and forum for inter-agency collaboration at leadership level
- **Landscape analysis**
 - Meeting with federal partners and external stakeholders
 - Identifying successful models, priorities, and initiatives
 - Completing assessment of current HHS activities aligned with NASEM Primary Care Report
- **Agency Action Planning**
 - Using NASEM Primary Care Report as a guide
 - Aiming for high priority strategies/actions that expand on current activities
 - Holding cross agency meetings to identify joint and aligned actions
 - Using NASEM Webinar on Strengthening Primary Health Care: March 22, 23
 - Developed in collaboration with OASH
- **Community Engagement: Request for Information, Spring 2022**

Initiative to Strengthen Primary Health Care Has The Support of HHS Leaders At The Highest Levels

- Weekly meetings with OASH Executive Leadership
- Monthly updates with ADM Levine, Assistant Secretary for Health, and HHS agency administrators
- Routine briefings for Secretary Becerra and Secretary's Counselors
- Monthly Primary Health Care Initiative HHS Leadership Advisory Group meetings
- Working with White House Office of Science and Technology Policy, Domestic Policy Council, and other federal executive departments

Collaborating on a Plan to Strengthen Primary Health Care



Office of Science and Technology Policy
Domestic Policy Council



Guiding Principles



NASEM Report Goal Statement for Workforce

It is essential to train primary care teams where people live and work. This will require reshaping training programs and aligning a payment and financial system that provides incentives and rewards to create effective, integrated primary care.

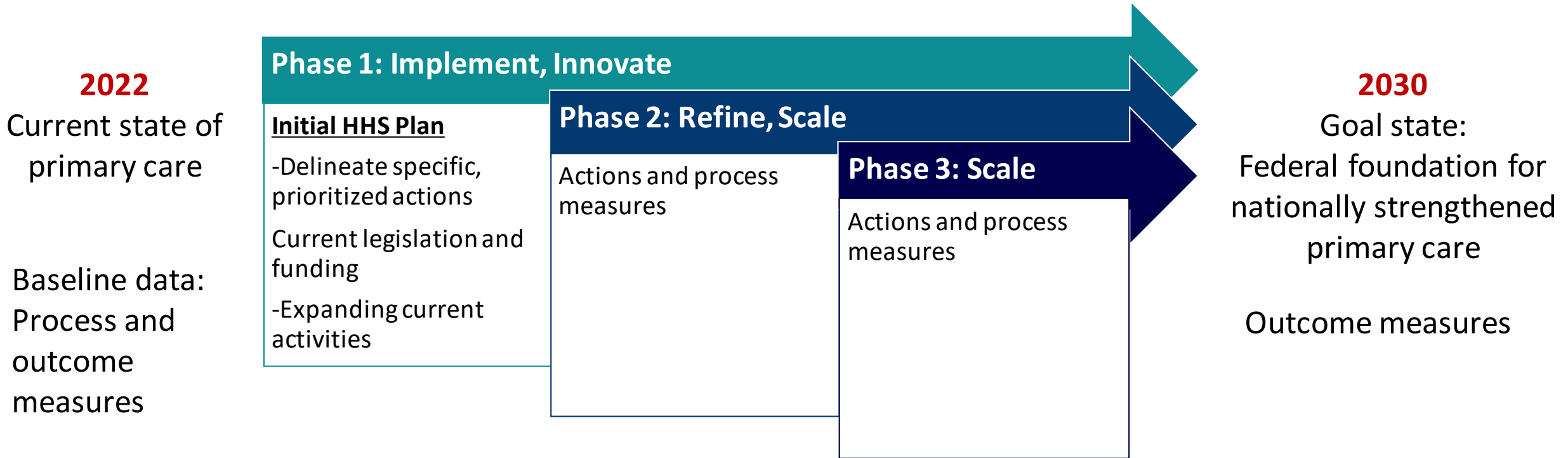
NASEM Primary Care Report Recommended Action 3.1

- Health care organizations and local, state, and federal government agencies should expand and diversify the primary care workforce, particularly in federally designated shortage areas, to strengthen interprofessional teams and better align the workforce with the communities they serve.
 - Public and private health care organizations should ensure inclusion, support, and training for family caregivers, community health workers, and other informal caregivers as members of the interprofessional primary care team.
 - The U.S. Department of Education and the U.S. Department of Health and Human Services should partner to expand educational pipeline models that would encourage and increase opportunities for students who are under-represented in health professions.
 - The Health Resources and Services Administration, state and local government, and health care systems should redesign and implement economic incentives, including loan forgiveness and salary supplements, to ensure that interprofessional care team members, especially those who reflect the diverse needs of the local community, are encouraged to enter primary care in rural and underserved areas.
 - Health systems and organizations should develop a data-driven approach to customizing interprofessional teams to meet the needs of the population they serve.

NASEM Primary Care Report Recommended Action 3.2

- CMS, VA, HRSA, and states should redeploy or augment funding to support interprofessional training in community-based, primary care practice environments. The revised funding model should be sufficient in size to improve access to primary care and ensure that training programs can adequately support primary care pipeline needs of the future.
 - HRSA funding (via Title VII and Title VIII programs) for other health professions training should be increased and prioritized for interprofessional education.
 - HHS, enabled by Congress as needed, should redesign GME payment to support training primary care clinicians in community settings and expand the distribution of training sites to better meet the needs of communities and populations, particularly in rural and underserved areas. Effective HRSA models (e.g., Teaching Health Centers, Rural Training Tracks) should be prioritized for existing GME funding redistribution and sustained discretionary funding.
 - GME funding should be modified to support the training of all members of the interprofessional primary care team, including but not limited to nurse practitioners, pharmacists, physician assistants, behavioral health specialists, pediatricians, and dental professionals.

Agency Action Planning Will Use Phased Approach

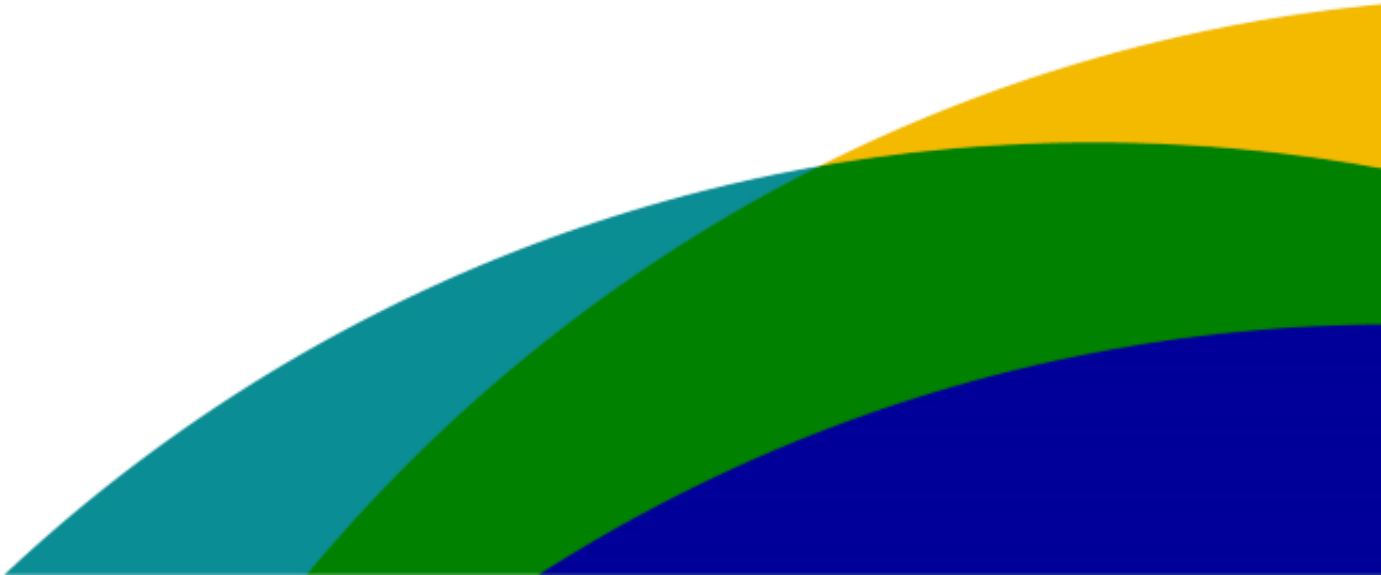


Listening Sessions

Includes:

- Advocates for patients and families
- Professional societies/trade organizations
- Centers for primary care; primary care coalitions
- Academia
- Provider organizations
- Foundations
- Care transformation programs and technical assistance organizations
- Payers, purchasers; employer associations
- NASEM

Comments and Questions



Discussion Question 1

What recent COGME recommendations could be elevated to support the NASEM Primary Care Report recommendations?



Discussion Question 2

What additional action steps could HHS take right now to advance toward the NASEM Primary Care Report goal state?



Discussion Question 3

What else should HHS consider when planning actions to strengthen primary health care through workforce strategies?





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