

PRIMARY CARE REFORM COLLABORATIVE

MARCH 18TH, 2024

VIRTUAL MEETING- HOUSEKEEPING

- Public- please send your name, email contact, and organization affiliation (if applicable) to <u>dionna.reddy@delaware.gov</u> or write in the meeting chat box.
- Please keep your computer/phone on mute unless you are making a comment, and
 if you are not on visual, please identify yourself as well.
- This meeting will be recorded for minutes.



AGENDA

- I. Call to Order
- II. Feb 12, 2024, Meeting Minutes Approval
- III. Final recommendations for Strategic Priorities and Delaware Enhanced PC Payment Model
- IV. Next Steps workgroups, legislative actions
- V. Public Comment
- VI. Next Meeting April 15, 2024 4:30pm -6:00pm



CALL TO ORDER

- Dr. Nancy Fan, Chair
- Senator Brian Townsend, Chair Senate
 Health & Social Services Committee
- Rep. Kerrie Evelyn Harris , Chair Health & Social Services Committee
- Andrew Wilson, Division of Medicaid and
 Medical Assistance
- Dr. James Gill, Medical Society of Delaware
- Dr. Rose Kakoza, Delaware Healthcare Association
- Vacant, Delaware Nurses Association

- Kevin O'Hara, Highmark Delaware
- Steven Costantino (Proxy for Secretary Josette Manning)
- Faith Rentz, State Benefits Office/DHR
 - Deborah Bednar, Aetna
- Maggie Norris-Bent, Westside Family Healthcare
- Christine Vogel (Proxy for Department of Insurance)



MINUTES APPROVAL

Review and Approve Feb 12, 2024, Meeting Minutes



FINAL RECOMMENDATIONS FOR THE PCRC STRATEGIC PRIORITIES

Recommendations

- 1) The PCRC should focus on increasing multi-payer participation and buy in for primary care spending
- 2) The PCRC should inform policies that will work on primary care investments, without increasing overall healthcare costs
- 3) The PCRC should promote and advocate for quality measures aligned across payers based on the highest cost of care drivers.
- 4) The PCRC will develop a more comprehensive communications strategy, such as an annual report, to increase transparency around the vision, goals, and progress of the PCRC.
- 5) The PCRC should explore a more inclusive strategy across the spectrum (i.e., employed practices, ACOs, etc.) to reflect the needs of all practices within primary care specialties.

Delaware Primary Care Payment Model: Initial Design Framework





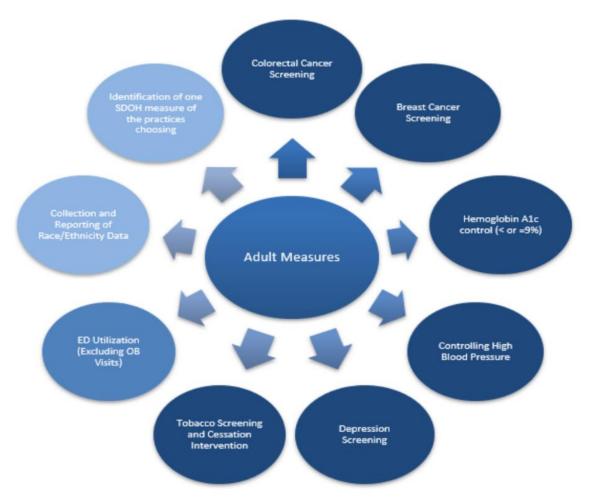
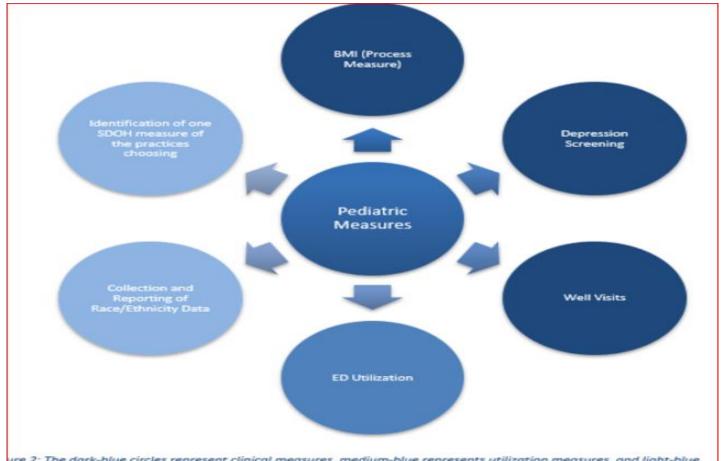


Figure 1: The dark-blue circles represent clinical measures, medium-blue represents utilization measures, and light-blue represents SDOH measures





ure 2: The dark-blue circles represent clinical measures, medium-blue represents utilization measures, and light-blue resents SDOH measures



CQI Background and Benefits

Continual Quality Investment (CQI)

State of Delaware, DHCC, PCRC, and OVBHCD focus on triple aim of healthcare:

• Improving quality of care, improving health outcomes, and reducing costs.

Senate Bill 120 promotes primary care by setting two metrics:

- By 2025 60% of Delawareans attributed to VBP models
- Primary care must be at least 10% of total cost of care in 2024 and 11.5% in 2025.

Potential Uses for the Continual Quality Investment (CQI) Payment



FINAL RECOMMENDATIONS FOR DELAWARE ENHANCED PC PAYMENT MODEL

Executive Summary





NEXT STEPS

- Workgroups
- Legislative actions



PUBLIC COMMENT



NEXT MEETING

Primary Care Reform Collaborative Meeting

Monday, April 15th, 2023

4:30 p.m. – 6:00 p.m. (need time Confirmed)

Anchor Location:

The Chapel

Herman M. Holloway Sr. Health and Social Services Campus

1901 N. DuPont Highway

New Castle, DE 19720





THANK YOU