

Physician-Focused Payment Model Technical Advisory Committee

Roundtable Physician Panel Discussion: *Enhancing Specialty Integration*

Panelists:

Subject Matter Experts

- ❖ [John Birkmeyer, MD](#), President, Medical Group, Sound Physicians
- ❖ [Nichola Davis, MD, MS](#), Vice President and Chief Population Health Officer, NYC Health & Hospitals
- ❖ [Carol Greenlee, MD, MACP](#), Endocrinologist and Owner, Western Slope Endocrinology
- ❖ [Jackson Griggs, MD, FAAFP](#), Chief Executive Officer, Waco Family Medicine
- ❖ [Art Jones, MD](#), Principal, Health Management Associates (HMA)

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John Birkmeyer, MD

President, Medical Group

Sound Physicians

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Nichola Davis, MD, MS

Vice President and Chief Population Health Officer
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Carol Greenlee, MD, MACP

Endocrinologist and Owner
Western Slope Endocrinology

Carol Greenlee MD MACP
Western Slope Endocrinology

ACP Medical Neighbor & High-Value Care Coordination

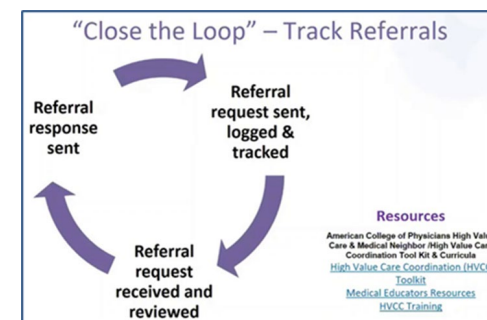
The Medical Neighborhood –

defines an ***approach*** to connecting care & working together
Fosters a mindset of cooperation, collaboration & cohesion

ACP High Value Care Coordination (HVCC) ***tool kit*** –

defines *expectations & critical elements* for a high value *referral process*

- High Value Referral Request & Referral Response
- Critical Processes for a High Value Referral Process
 - Pre-visit Advice (“enhanced referrals”)
 - Pre-visit Review (referral triage)
 - Close-the Loop & Referral Tracking



[High Value Care Coordination \(HVCC\) Toolkit | ACP \(acponline.org\)](https://www.acponline.org/high-value-care-coordination/hvcc-toolkit)

Patient-Centered Connected Care: *the patient's medical neighborhood – beyond the referral*

Medical Neighbor
defined:

Communicates, collaborates
& integrates

Appropriate & timely
consultations

Effective flow of information

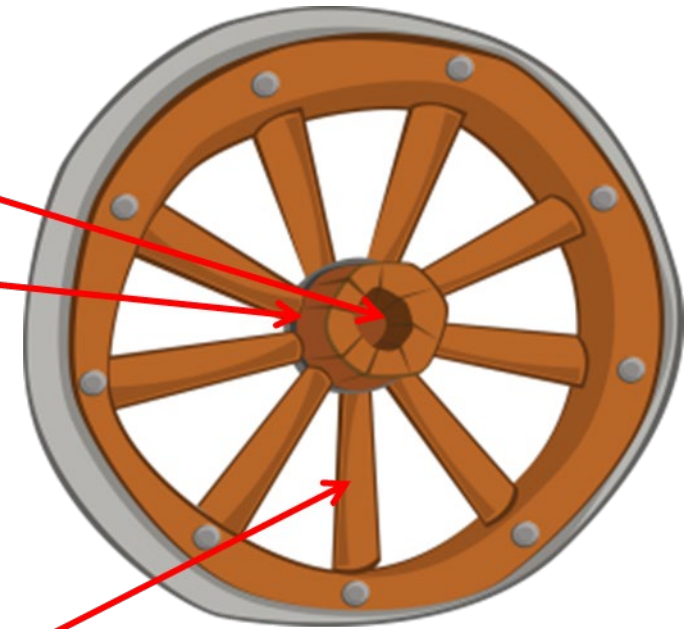
Responsible co-managing

Patient-centered care

Support primary
care/medical home as hub
of care

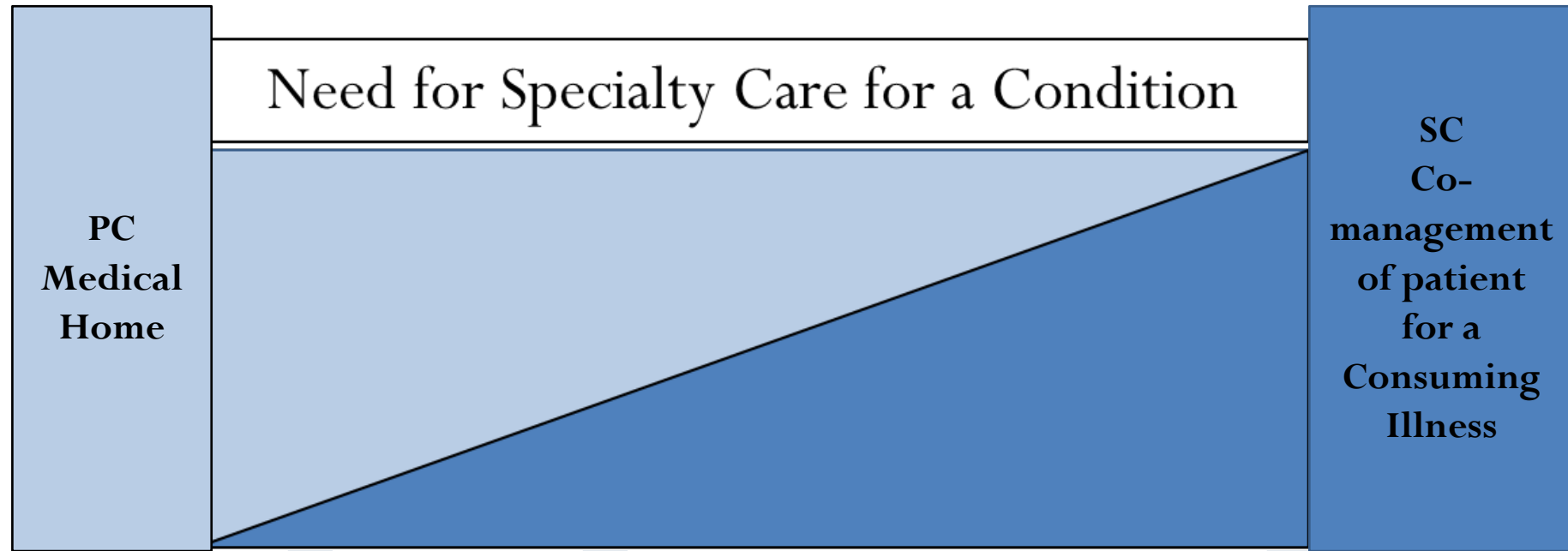
The patient is the **center** of care

Primary Care is the **hub** of care



Specialty/Subspecialty Care is an **extension** of care

- assisting with care to meet patient needs

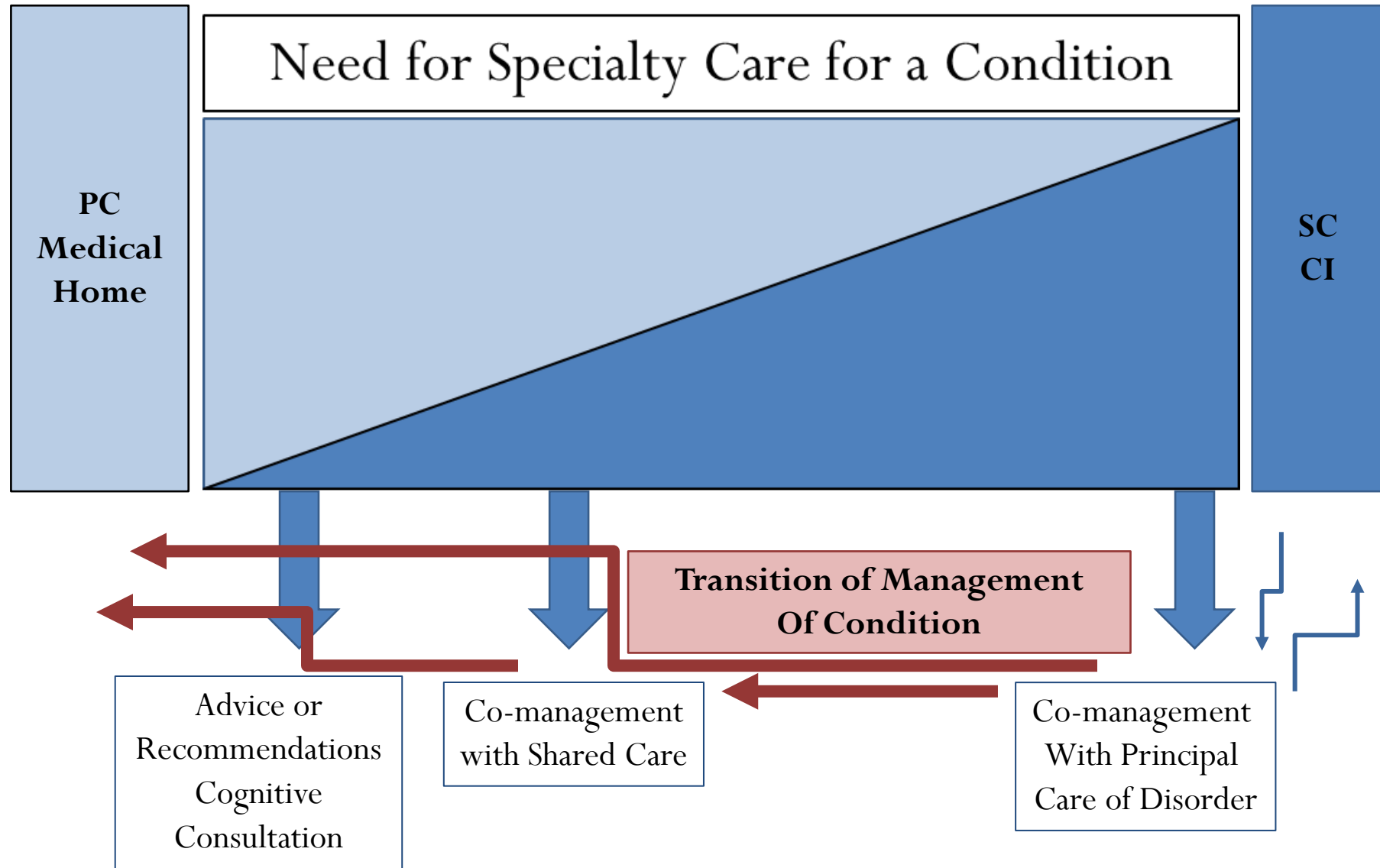


Advice or
Recommendations
Cognitive
Consultation

Co-management
with Shared Care

Co-management
With Principal
Care of Disorder

**Spectrum or Continuum of Roles in the Medical
Neighborhood to meet the Spectrum of Needs**



Sometimes as a condition / patient stabilizes –
management can Transition back to Primary Care

References – Policy Papers & Tool Kit

- Medical Neighborhood
 - [ACP \(acponline.org\)](https://www.acponline.org)
- High-Value Care Coordination
 - <https://www.acponline.org/clinical-information/high-value-care/resources-for-clinicians/high-value-care-coordination-hvcc-toolkit>
- Beyond the Referral: Principles of Effective, Ongoing Primary and Specialty Care Collaboration
 - https://www.acponline.org/acp_policy/policies/beyond_the_referral_position_paper_2022.pdf
 - https://assets.acponline.org/acp_policy/policies/beyond_the_referral_playbook_2022.pdf

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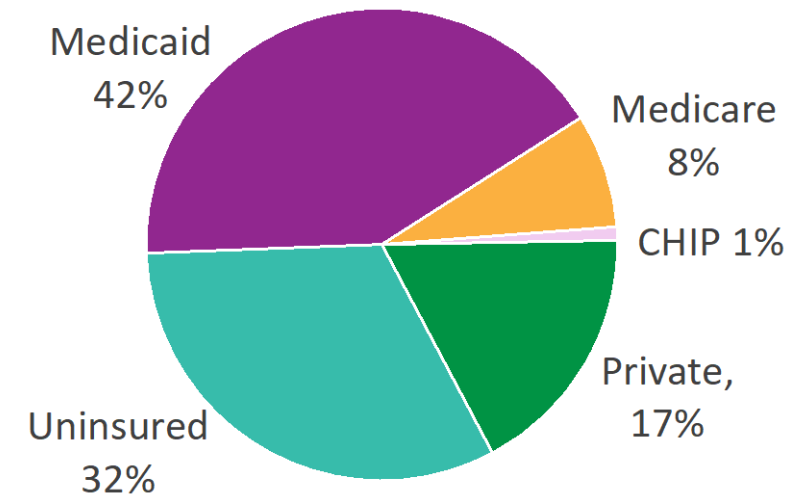
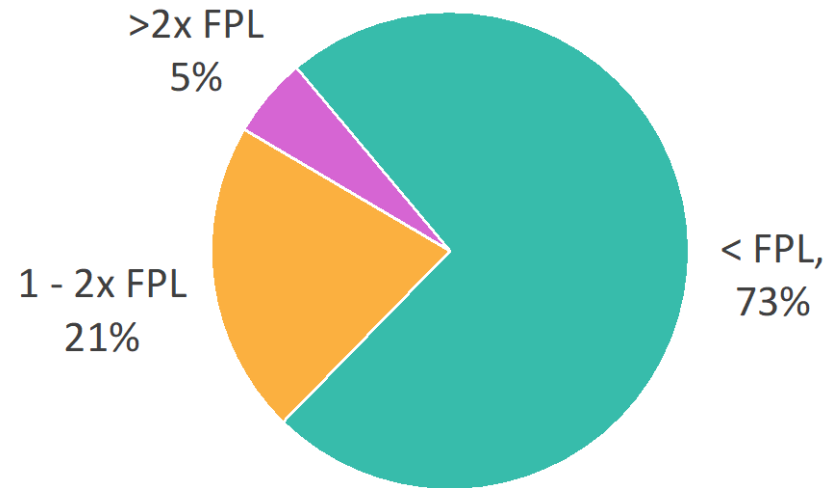
Jackson Griggs, MD, FAAFP

Chief Executive Officer

Waco Family Medicine

Jackson Griggs, MD

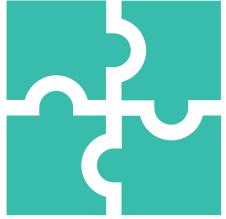
- 15-site FQHC in Central Texas
- 24 yrs as FQHC | 53 yrs as FMRP
- 61,600 patients | 233,000 visits



Value

- Upside Only Shared Savings Plans
 - Local ACO / commercially insured
 - Medicaid MCO
 - Medicare Advantage
- Two-sided Shared Savings Plans
 - Medicaid MCO
 - FQHC-only ACO (LLC) MSSP

Delivery Transformation in Behavioral Health



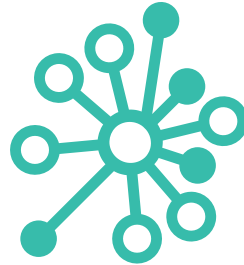
Integrated Behavioral Health

- Shared care for primary care panel
- 1:3 LCSW to PCP
- **G**eneralist
- **A**ccessible
- **T**eam-based
- **H**igh Productivity
- **E**ducator
- **R**outine



Counseling Co-located

- Stepped care treatment paths for common disorders needing intensive intervention
- Evidence-based treatment building on primary care treatment (e.g. full course of CBT, ACT)



PCAM Primary Care Addiction Medicine

- Consultation and Intervention (MD and LCSW)
- Opioid & Stimulant Use Disorders
- Special populations (e.g., SUD in pregnancy)



Pediatric Behaviors Program

- Internal Stepped Care Model
- Pediatric Disruptive Behavior Disorders and Trauma and Stressor-related Disorders

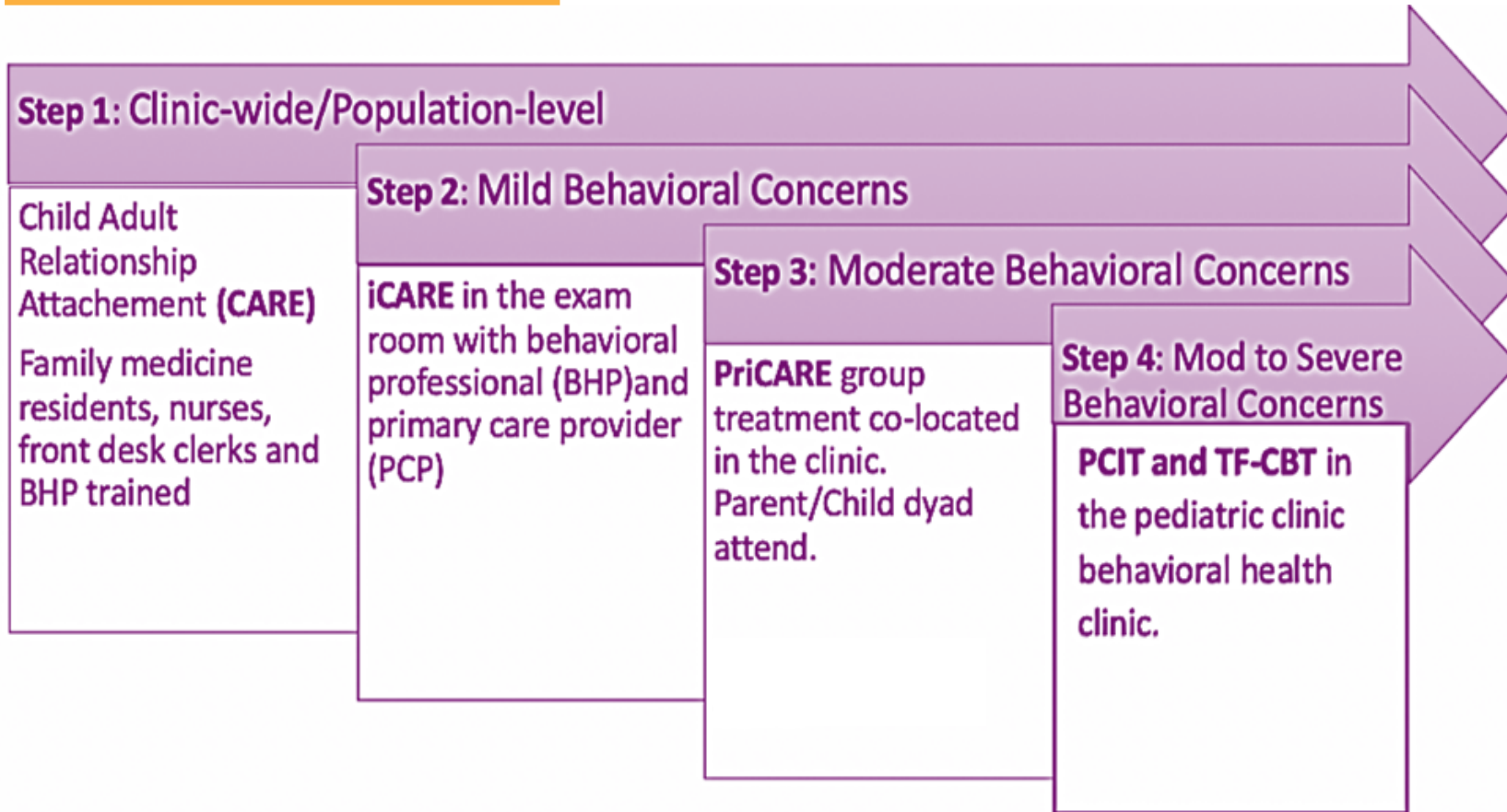


HBMH Human Behavior and Mental Health Consultation Clinic

- Clinical psychologist + FM resident
- Referral for diagnosis clarification, plan development & treatment initiation
- Pt returns to PCP
- Increases treatment capacity for all conditions across the system



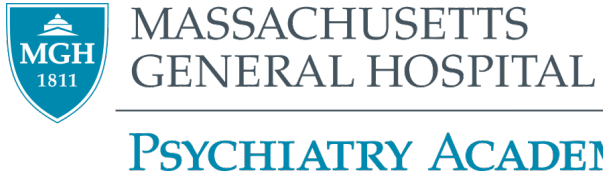
Pediatric Behaviors Program



Clinical Pediatrics, 2021



doi:10.1177/0009922820959938



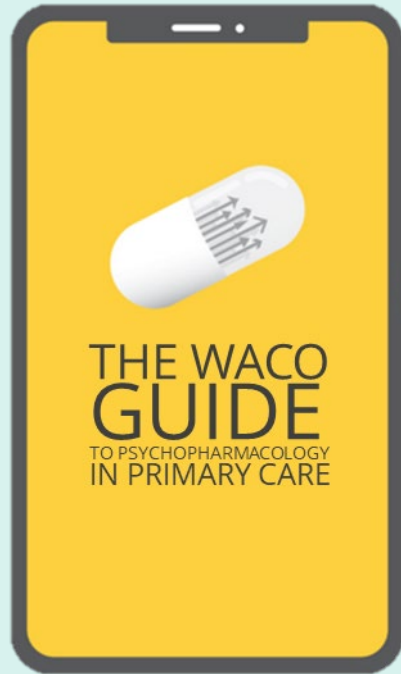
Reliable: Combines top level evidence and expert opinion with real world primary care experience

Succinct: without compromising quality

Cost: Respect to cost and funding sources

Scope: Adult, pediatric, and perinatal psychopharmacology

Ethical: not industry funded



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Acronyms

ACO: Accountable Care Organization

ACT: Acceptance and Commitment Therapy

BHI: Behavioral Health Integration

BHP: Behavioral Health Provider

CHIP: Children's Health Insurance Program

CBT: Cognitive Behavioral Therapy

FM: Family Medicine

FMRP: Family Medicine Residency Program

FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center

LCSW: Licensed Clinical Social Worker

LLC: Limited Liability Company

MCO: Managed Care Organization/Plan

MSSP: Medicare Shared Savings Plan

PCIT: Parent-Child Interaction Therapy

PCP: Primary care provider

Pt: Patient

SUD: Substance Use Disorder

TF-CBT: Trauma-Focused Cognitive Behavioral Therapy

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Art Jones, MD

Principal

Health Management Associates (HMA)



Arthur Jones, MD
Chief Medical Officer
Medical Home Network

Medical Home Network (MHN): Integrating Primary and Specialty Care Specialists

