

Family Medicine

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Appendix A From:

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Appendix A: Stakeholder-Informed Conversation Starters

These vignettes are sample conversation starters should you encounter one of our key stakeholders. They begin with a question, presume a “yes” answer and then have a single paragraph that encapsulates the items developed in our Team’s elevator speech exercise that was led by Mike LeFevre.

Physicians and practices

Great to see you again! We haven't talked since last year's physicians' holiday party when we talked about how you were struggling in your practice. Can I tell you more about what I'm learning about practice transformation that I think will really excite you?

The new models of care that are coming were actually designed to decrease the hassles of your practice. A lot of docs aren't feeling "the joy" anymore and that really is starting to change as these updates take hold. Docs all over are reporting that they are able to take better care of their patients and that it is improving relationships not just with those patients but within the office team as well. Best of all, the insurance companies are actually willing to pay for us to practice like we've wanted to practice from the beginning. It's awesome.

ASK: Can I send you a link from my Practice Transformation App so you can get started, too?

Payers

I see you work for an insurance company; can I tell you more about why helping the specialty of family medicine transform to the new models of care is something you should be interested in?

In places where these new models of care are thriving, the insurers there are reported way healthier patients, which of course means lower costs and better profit margin. The patients in these plans are telling everyone about the value they are getting for their dollar and employers are starting to notice, too. When docs are relieved of the "red tape" associated with fee for

service and can finally just "do their job" for a fair wage, these family docs do great work - and you can measure it easily - it's an insurance dream.

ASK: If you're interested I'd take one of your cards and pass it along to our payment gurus...they can be in touch and see what other information and research data you need to learn more about it.

Patients

Thanks for asking what I do. I'm a family physician, can I tell you more about how our specialty is changing to better serve our patients?

You may or may not know this, but being a family doctor has been hard work the last few years. There have been lots more regulations and hoops to jump through to keep doing the important work I was trained to do. With these new ways of working, I can get back to focusing on taking care of the whole patient. Freed to do that, I'm seeing the right patients at the right time for the right reasons. When patients are in the office to see me now, I can really work with them to make sure we understand each other and are getting all the work done we need in order to get them healthier.

ASK: Is it OK if I send you a link to how you can share with our organization your favorite story about what's great (or not so great) about the relationship you have with your doctor? We're cataloging those so we know what's making a difference and what isn't.

Employers

I know you have a lot of employees over there at company ABC, can I tell you for a moment about how the changes in the specialty of family medicine are going to be important to you?

Many of us are working in new ways in family medicine. We're seeing patients more efficiently and working in teams to do a better job. We know that costs are high for the employees who are paying the bills, but we're finding that these new care models are resulting in fewer lost work hours, healthier patients and, ultimately, price stabilization for employers. I know of some employers who were thinking of no longer paying for health insurance, but when they found the plans with the best family docs, it raised their employee loyalty to their company and lowered employee turnover. I think companies and docs working toward the same goal is a win-win.

ASK: Do you have a business card? If you want, I can make sure the right people get it so you can hear from them what the first steps you'll need to take are to make sure you can maximize the health of your employees.

Educators

I think it's great that you've committed yourself to training future family docs. Can I tell you for just a moment about how FMAHealth is transforming the practice of medicine in ways that will make your life easier?

The advance practice models you've been reading about are really happening out there and new residency grads love them! We're even finding that training toward these new models is allowing programs to continue to innovate in how they have their own clinics set up AND still support their bottom line. We're actually seeing some penetration of this "advance primary care" message that is driving how students are seeking out their training programs. Even though GME funding reform will hopefully be coming, leveraging these new payment and practice models is worth taking seriously.

ASK: Are you already working with STFM/AFMRD/etc. on any of this? I've got the link right here to their website that has a lot more about this on it.

Policy Makers

Thanks for finding time to talk with me while I am here in the capital. I want to start with just a short bit of information about how our specialty of family medicine is changing the way we do business that should make life easier for you.

We know budgets are tight, but restructuring healthcare on a foundation of family medicine can be a budget-neutral move if it is based on cost savings and even minimal shifting of local budgets. Paying for family docs to transform into practice models that focus squarely on the whole person does that – we call it the Triple Aim. The value of family medicine to the financial system coupled with the cost savings, even for the government as a purchaser of health services, is a huge upside for everyone. In communities that are really on the bandwagon with this, we find healthier communities, healthier workforces and major community economic gains because of it. Companies are looking to invest in communities where the workforce is healthier and cheaper to insure, and where there are enough family docs to support the goal of keeping it that way.

ASK: I know you get asked by a lot of organizations if they can “educate” you more about their pet projects. Let me just give you this card with some contact information for our professionals. Pass it on to your health legislation aide and they can scan the QR code and get more info or link to one of our staffers.

Communities

I guess I haven't seen you since the last school board subcommittee meeting with the public health nurses and the town counsel. Can I tell you just a bit about the big thing happening with family medicine? I think you'll love what it means for our community.

Family Physicians have always addressed the social determinants of health - at least indirectly. Now, though, we are tackling these issues like never before and looking for ways to

work with, for, and in our communities to make sure "the community" is healthy, not just our patients. We know that if our community is healthy, it's good for everyone - employers, schools, places of worship and on and on. Even helping recruit one new family doc is an economic win on multiple levels and some communities are seeing renewed interests from businesses in locating there based on community health and insurance cost metrics. We should start working together to do some mutual recruitment, what do you think?

ASK: Here, take this card and check out some of the stats on our website. There's even a QR code if you just want to scan it and get some testimonials from other community leaders.

Health Systems

I don't get into the C-Suite here at XYZ Health System very often since I'm out at the new clinic seeing patients all day. I'm sure you're up to date with all the new things happening with family medicine practice transformation, but I wonder if you have a second for me to tell you how it's going to affect you folks here at the health system?

You certainly know you can improve profit margins on every doc in an advance practice model, so smart systems are investing in the transition on the practice processes side to leverage that. Not only that, but even in a non-fee-for-service environment, the bigger family physician catchment you have the more inpatient and specialty services you can capture at a time when those numbers are shrinking due to better primary care and prevention. Sure your inpatient and specialty care acuity will be a little higher, but the enhanced reimbursement for that is great and will keep those folks all working at the top of their licenses just like we're trying to do with our teams on the outpatient side.

ASK: I have a link to some information some of your peers have already posted on our website about how they are leveraging family medicine better. Can I count on you to go check some of that out? Here's a card with the direct link to that part of the website.

Students and Residents

- A) It's awesome that you're here on rotation with us this month and I've heard that you're really thinking that Family Medicine might be the right specialty for you. During this rotation I want to make sure you see how excited I am about the future of our specialty, but before we start I want to know how much you know about the transformation that is coming in how we take care of patients.
- B) We're glad to have you with us on your Primary Care rotation. I'm not sure how much you know about family medicine and the exciting things that are happening in our specialty but I want to make sure we spend some time talking about that this month. Even if you aren't going into family medicine, knowing more about how we are trying to do better for our patients can only help you be a better doc no matter where you land.

C) Welcome to the office Dr. Resident, we're glad you're going to roll up your sleeves and help us this month. One of the things I'd love to coach you through is how to talk to patients in the office about what family medicine is and how it's changing to be proactive to the needs of families. There is a lot of stuff changing in how we do our work and how we're getting paid and I want to make sure you don't finish this rotation without staying on the cutting edge in this area, too.

ASK: Here, grab your smartphone and let me pull up a QR code you can scan that will get you some more easy information about all this. You should really consider registering for updates or at least link to our Twitter feed and Instagram.