

# Promoting Health Equity Through Primary Care



**ESTABLISHING EQUITY IN OUR HEALTH CARE SYSTEM** means working to ensure everyone has the resources and opportunity to be as healthy as possible. *But a history of underinvestment in primary care has hindered our ability to address disparities in access and quality of health care for all communities.* That's why health equity must be front and center in future health care reforms, with primary care at the core of the change.

## key points:

Health disparities result in:

**\$93 billion**  
in excess medical care costs

**\$42 billion**  
in lost productivity

## Elimination of disparities in health care not only improves overall health, but also enables economic prosperity.

Many factors affect a person's ability to be as healthy as possible, including geographic location, income, race and ethnicity, gender, religion, sexual orientation and ability. Other factors are related to social circumstances, called **social determinants of health**, which include housing, food security, education, built and neighborhood environment, access to transportation, employment opportunities and access to health care.

**Inequitable differences in these determinants cause health disparities, and these differences are costly.** In addition to poorer health outcomes, health disparities result in approximately \$93 billion in excess medical care costs and \$42 billion in lost productivity for America each year. And as our nation's population becomes more diverse, with people from historically marginalized populations projected to account for over half of the population by 2050, it is increasingly important to address these disparities to improve overall health and manage excess costs.<sup>1</sup>

## Primary care is the solution for achieving health equity.

Primary care physicians care for the broadest range of conditions and illnesses and deliver an outsized proportion of outpatient care in the U.S. compared to other specialists.<sup>2</sup> According to a recent study, people living in U.S. counties with fewer than one primary care physician per 3,500 residents had a shorter life expectancy than people living in counties above that threshold.<sup>3</sup> **Primary care physicians are the foundation for building stronger health in our communities.**

Expanding access to primary care physicians and care teams not only extends life expectancy, but also improves overall patient experience. For patients who regularly engage with primary care services, a greater percentage have had a more positive experience while receiving important care like cancer screenings, diabetes management, vaccinations, and blood pressure monitoring when compared to those who did not regularly receive primary care.<sup>4</sup>



## Many health equity issues can be addressed by greater investment in primary care:



### ISSUE:

*The U.S. health care system is complex, and factors like social determinants of health and language barriers can make the system difficult for patients to navigate. This can limit access to care and/or decrease the quality of care patients receive.*

### SOLUTION:

Primary care serves as the entry point into the health care system for many patients and creates a longitudinal relationship between patients and primary care teams. Primary care physicians are members of their communities who are best positioned to understand the populations they serve – helping patients understand their health and breaking down barriers by guiding them through the complex health care infrastructure.

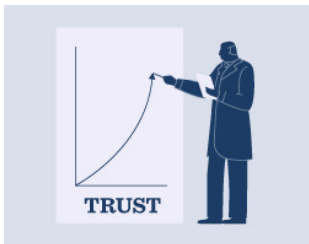


### ISSUE:

*The U.S. has the highest rate of preventable maternal mortality compared to other similar countries.<sup>5</sup>*

### SOLUTION:

Primary care offers critical prenatal care, an essential part in reducing maternal death, and can identify risks pregnant people may be exposed to - working across longitudinal teams within the community to implement early actions to ensure a safe and uncomplicated delivery.<sup>6</sup>

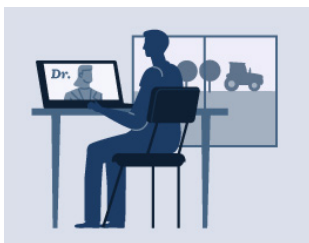


### ISSUE:

*A long history of racial disparities in health care delivery and outcomes have eroded trust in our health care systems from marginalized populations.<sup>7</sup>*

### SOLUTION:

Primary care physicians were rated the most trusted during the pandemic and are uniquely positioned to provide community-oriented care and serve as a natural point of integration among clinical care, public health, behavioral health and community-based services.<sup>8</sup>



### ISSUE:

*In rural or underserved areas, location barriers and lack of transportation restrict vulnerable populations from accessing clinicians and care.*

### SOLUTION:

Digital health technologies have helped primary care physicians expand their reach and reduce geographic disparities in preventative care, enabling patients to remain within their health care home and maintain continuity of care.<sup>9</sup>

## What do we do now?

To restore and improve the health of Americans, focused attention should be placed on new policies and infrastructures that consider social determinants of health to ensure equitable care and access for people disproportionately impacted by health disparities.

1.



### Move Away from the Fee-For-Service Payment Model

Primary care, like most of the health care system, is reimbursed based on each service provided. This system, called fee-for-service, encourages higher, less efficient usage of services or procedures and creates financial incentives that reinforce patients only seeking health care when they are sick.

*Policymakers should prioritize implementing value-based payment models where primary care is resourced to provide high-quality care with an incentive toward wellness and population health. Shifting away from the fee-for-service system will improve access, align incentives and improve health outcomes for the most vulnerable populations.*

2.



### Invest in Digital Health Technologies

Telehealth visits are an example of leveraging technology to allow patients to continue to see their regular primary care doctor or care teams when time away from work or transportation may be barriers to seeking timely care. Therefore, digital health technologies have great potential to address health disparities.

*Policymakers must first eliminate barriers that restrict access to these technologies by investing in broadband access and ensuring there is coverage for digital health services when used within a patient's usual source of care – inclusive of all platforms (i.e., phone, video conference, etc.). This will incentivize developers to create platforms with inclusive features, such as multiple language options and content designed to combat language barriers, low literacy rates, visual accessibility, and other accessibility considerations.*

3.



### Strengthen Community Health Center Funding and Expand Essential Primary Care Services

Community health centers provide access to low-cost critical primary care services for 29 million under-served patients and improve community-wide health. Patients who rely on community health centers often do so because they experience barriers such as costs, lack of insurance, geographical limitations and language barriers.

*Policymakers should increase investment in community health centers to further decrease health disparities.*

4.



## Incentivize Primary Care Careers to Grow and Diversify the Workforce

Primary care provides important support such as preventive care and diagnosing and managing acute and chronic disease. There is a projected shortage of 17,800 to 48,000 primary care physicians by 2034.<sup>10</sup> Today, approximately 25% of the workforce is over the age of 60 years old. In addition, fewer medical graduates are selecting primary care as a specialty and others are leaving the field.<sup>11</sup> Investing in integrated primary care and embedding a robust primary care workforce across the country will ensure that a person's outcome and quality of care are not determined by zip code.

*Policymakers are integral in securing the future health workforce. Federal, state, and local governments can play a key role in expanding and diversifying the primary care workforce by 1) creating broader training opportunities in areas that reflect our diverse needs and investing in the development of culturally competent curricula, 2) closing the income gap between primary care and other specialties through value-based payment models and 3) incentivizing careers in primary care through grants, loan forgiveness, and financial assistance.*

## OUR COLLABORATION:

*Primary Care for America (PCfA) is a diverse collaboration of key partners focused on educating policymakers and health policy influencers about the value of comprehensive, continuous, and coordinated primary care. Its formation serves as a commitment to our continued effort to help improve the well-being of the individuals, families, and communities that we proudly serve.*

*PCfA is comprised of a diverse group of founding partners in the American health care industry: agilon health, Aledade, American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, Catalyst Health Network, ChenMed, Elation Health, Everside Health, MDVIP, National Association of Community Health Centers, One Medical, and VillageMD.*

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