Greetings, colleagues! We hope you and your family are well and looking forward to the upcoming holidays!

MTM Updates

Two Big Wins for Primary Care Physicians!

New Primary Care Focused Performance Measure Accepted by CMS

On November 3, 2021, the Centers for Medicare & Medicaid Services accepted a new clinical quality measure into their Quality Payment Program (QPP) Merit-Based Incentive Payment System (MIPS) for 2022. The “Person-Centered Primary Care Measure” (PCPCM) is part of a broader Measures That Matter to Primary Care initiative and better represents primary care physicians’ care quality. The PCPCM is a patient reported outcome performance measure (PRO-PM) developed by the Larry A. Green Center and Center for Professionalism and Value in Healthcare, with support from the American Board of Family Medicine Foundation.

This brief, 11-item questionnaire allows patients to assess their relationship with their clinician and how that impacts their health. Items on the questionnaire include statements such as “The practice makes it easy for me to get care,” “This doctor or practice knows me as a person,” and “Over time, my practice helps me to stay healthy.” Thousands of primary care clinicians say that this feedback is more meaningful for them than typical patient-reported quality assessments.

ABFM encourages family physicians to consider the PCPCM PRO-PM when choosing measures for reporting to the QPP.

The Measures That Matter to Primary Care effort aims to provide family physicians more meaningful measures for use in their reporting to the QPP.

Another Measure That Matters to Primary Care Received NQF Endorsement

On December 1, 2021, the National Quality Forum (NQF) voted unanimously to endorse our Continuity of Care clinical quality measure. Continuity of Care, defined as seeing the same primary care clinician over time, remains one of the pillars of a high functioning health care system. Continuity of Care is shown to improve patient outcomes and clinician well-being, decrease hospitalization risk and decrease levels of spending. When continuity is poor, it suggests fragmented care and an associated lack of a trusting relationship in primary care.

For more information, visit Measures That Matter | The Center for Professionalism and Value in Health Care or contact Jill Shuemaker at jshuemaker@theabfm.org.
Pisacano Leadership Foundation In-Person Meeting!

The Pisacano Scholars met in 2020 virtually, but after much time and consideration (and triple checking to make sure we followed all COVID-19 protocols) decided to get together and celebrate 2020 and 2021 scholars in person this year. The symposium, titled "Advocacy for Family Physician Leaders," hosted many wonderful speakers, including Jason Jordan, Dr. Andrew Bazemore, Dr. Jack Westfall, Hope Wittenberg, Dr. Lauren Hughes, Dr. Warren Newton, Dr. Bob Phillips, Dr. Winston Liaw, Dr. Robert Rock, and Dr. Andrea Anderson. Please see a few pictures from the event below!
Should Healthcare Payment Be Adjusted to Support Patient Social Needs?

When clinicians find that patients have social needs, they often heroically help, but expecting them to assess and address social needs without resources is a recipe for frustration and burnout. In January of 2021, The Center collaborated with Social Innovation Ventures with support from the ABFM Foundation to convene federal health agencies, health plans, and clinician organizations to work on policy options for adjusting healthcare payments for patients’ social risk. The goal is to provide more resources to practices caring for people with social needs that affect their health. That produced a Health Affairs Blog last June and a request from CMS to keep going! With support from partners listed below, we will hold two more workshops in 2022 to work on policy options for Medicaid and Medicare.

Two-Part Workshop Series: Developing Medicaid/Medicare Policy Options for Social Risk Payment Adjustment January 27, 2022 and March 31, 2022

This invitation-only workshop series will be include key staff and influencers from the Centers for Medicare & Medicaid Services, US Department of Health and Human Services, safety net health plans, clinicians, states, and patient stakeholders. These convenings will provide a unique forum to design potential new approaches to risk adjustment.

Discussion topics will include:

- Use of small-area deprivation indices as a mechanism for payment adjustment
- How much to titrate payment adjustments with the goal of meeting social needs
- Assessing accountability for and outcomes associated with payment adjustments

Acknowledgment of Support: The workshop convenings have been made possible through generous support from The Commonwealth Fund, a national, private foundation based in New York City that supports independent research on health care issues and makes grants to improve health care practice and policy, and Arnold Ventures, a philanthropy dedicated to tackling some of the most pressing problems in the United States through research, education, and advocacy. The views presented here are those of the author and not necessarily those of The Commonwealth Fund and Arnold Ventures, its directors, officers, or staff. Additional support has been provided by the American Board of Medicine Foundation, 3M Health Information Systems, and the Samueli Foundation.
Recent Publications
Please visit our website and read our recent publications here.

Newton WP, Baxley E, Bazemore A, Magill M.
FROM ABFM: IMPLEMENTING A NATIONAL VISION FOR HIGH QUALITY PRIMARY CARE: NEXT STEPS
DOI: https://doi.org/10.1370/afm.2058
On May 4, 2021, the National Academies of Science, Engineering and Medicine (NASEM) issued a report with specific recommendations on implantation of high value primary care in the United States—the first National Academies report on primary care in 25 years. The report summarizes abundant information reviewed by the consensus committee across 5 different areas: financing; access; community-based training; digital health; and accountability. Four months later, the findings continue to reverberate, and government officials, philanthropies, and payers are still addressing many aspects of the report. In this editorial, we ask what family medicine should prioritize to help patients, communities, and the specialty.

Krist AH, Phillips R, Leykum LK, Olmedo B
Digital Health Needs for Implementing High Quality Primary Care: Recommendations from the National Academies of Sciences, Engineering, and Medicine. Journal of the American Medical Informatics Association
https://doi.org/10.1093/jamia/ocab190
A National Academies of Sciences, Engineering, and Medicine committee developed a plan to implement high-quality primary care. One of the 5 key objectives was designing information technology that serves the patient, family, and interprofessional care team. The committee defined high-quality primary care as the provision of whole person, integrated, accessible, and equitable healthcare by interprofessional teams who are accountable for addressing most of an individual’s health across settings and through sustained relationships. The committee recommended 2 essential actions for digital health. The first action is developing the next phase of digital health certification standards that support relationship-based, continuous, person-centered care; simplify user experience; ensure equitable access; and hold vendors accountable. Second, the committee recommended adopting a comprehensive aggregate patient data system usable by any certified digital health tool. This article reviews primary care’s digital health needs and describes successful digital health for primary care.

Price DW, Bazemore A, Baxley EG, Stelter K, O’Neill TR, Fain R, Magill M, Newton WP.
DOI: https://doi.org/10.1370/afm.2749
ABFM activities are just one part of ongoing learning and development for family physicians. We want ABFM activities to provide Diplomates with a valuable, objective look at their learning needs, enabling them to select
targeted educational and improvement activities to address gaps in knowledge and practice performance. We intend to collaborate with educational, quality improvement, and other experts as we pursue this work. We envision the possibility of sharing deidentified information that could inform educational opportunities offered by the AAFP, AAFP state chapters, health systems, and other CME/continuing professional development (CPD) providers. By connecting the assessment role of ABFM with the intrinsic desire to continuously learn and improve that motivates our Diplomates and our Family Medicine partners, we aim to enable enduring learning and practice change that ultimately improves patients’ care outcomes.

Rittenhouse DR, Bazemore AW, Morgan ZJ, LE Peterson. 

The authors used data on 13,618 family physicians seeking to continue their ABFM certification from 2017 to 2019 and found that the proportion who report independent ownership declined slightly from 34.2% to 32.1%. Smaller practices are more likely to be independent. These findings suggest that independent practice is surviving, and that it’s incumbent on researchers, payers, and policymakers to better understand their unique contributions and challenges in the effort to improve primary care access, quality, and cost.

Recent Additions to the Professionalism Library
Please be sure to keep up to date on the latest professionalism articles in our Professionalism Library.

The Library includes peer-reviewed publications, commentaries/blogs, and issue briefs/reports relating to professionalism. The database is reviewed monthly and updated.


Linda H Pololi, Vasilia Vasiliou, Kimberly Bloom-Feshbach. Midcareer Medical School Research Faculty Perspectives on Vitality and Professionalism During the COVID-19 Pandemic. JAMA Network Open, August 2021
Maria Isabel Atienza
A Comparison of four models of professionalism in medical education
Yakup Kilic, Devkishan Chauhan, Pearl Avery, Nigel Horwood, Radislav Nakov, Ben Disney, Jonathan P Segal
The public’s attitude towards doctors’ use of Twitter and perceived professionalism: an exploratory study

Please let us know if you are interested in hearing more about our work or if you would like to collaborate with us.

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