New Mexico Primary Care Council Quarterly Meeting

Attendees

Council Members: Jen Phillips (Chair), Maggie McCowen, Alisha Parada, Anjali Taneja, Eileen Goode, Gretchen Ray, Jon Helm, Julie Weinberg, Kathy Fresquez-Chavez, Laura Parajon, Matthew Probst, Mercy Jones, Pamela Stanley, Rohini McKee, Susan Wilson, Val Wangler, Wei-Ann Bay

Council Staff: Alex Castillo Smith, David Scrase, Anastacia Sanchez, Hala Reeder

Others: Elisa Wrede, Morgan [last name unknow], Holley Hudgins, Daniel Stulberg, Rick Madden

Minutes

Agenda item:	**Welcome**	**Presenter:**	Alex Castillo Smith

- **Frame meeting and objectives, review agenda, and establish quorum.**

Agenda item:	**Icebreaker**	**Presenter:**	Alex Castillo Smith

- "What do we have in common?" Discussion in breakout rooms, Jamboard session.

Agenda item:	**Opening Remarks**	**Presenter:**	David Scrase, Jen Phillips

- Thank you and Welcome.

Agenda item:	**Primary Care Council (PCC) Housekeeping**	**Presenter:**	Alex Castillo Smith

- Welcome to new Advisory members; Pamela Stanley and Mercy Jones.
- Acknowledgments
- Congratulations to Dr. Val Wangler on being selected as *Physician of the Year.*
- Kudos to the New Mexico Graduate Medical Education (GME) Expansion Review & Advisory Board for inclusion in Milbank Memorial Fund January 2022 report highlighting primary care (PC) GME policy improvements.
- 2022 PCC Strategic Plan update and FY 2023 Funding reviewed
- Primary Care Council Annual Strategic Planning Cycle reviewed

Paving the road to health equity- Presentation by Roberto Martinez, NM Department of Health
- Goal 1: Develop and Drive investments in health equity across New Mexico to improve the health of New Mexicans.
- Develop an equity Data Working Group, expand data collection, invest in data sharing platforms, and draft policies.
- Voting results below:

Question	Strongly disagree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I support the establishment of the PCC Equity Data Workgroup that will advise key metrics and indicators, data collection and interpretative frameworks to drive the PCC towards health equity	68.75% (11)	31.25% (5)	0.00%	0.00%	0.00%

Question	Yes	No	No, but I can recommend an individual who would be great!	Other
The current PCC Equity Workgroup will expand to become the PCC Equity Data Workgroup. I would like to join the PCC Equity Data Workgroup.	50.00% (8)	37.50% (6)	12.50% (2)	(2)

NM PC Payment Model update: determining NM PC Payment model. Susan Wilson, New Mexico Coalition for Healthcare Value
- Goal 2: Develop and make recommendations regarding sustainable payment models and strategies to achieve high quality and equitable primary care for all New Mexicans.
- Review of state models designed to achieve high quality and equitable primary care.
- "What would be a revolutionary way of paying primary care providers?" -David Scrase.

Calculating PC Spending. Alex Castillo Smith and Anastacia Sanchez, Human Services Department
- Nm All-payer Claims Database will launch Summer 2023, allowing for comprehensive analysis of PC spending across all payers.
- Council did not reach consensus on which behavioral health providers and services should be designated as primary care when calculating primary care expenditures.
- Voting results below:

"Please select the Place of Service (POS), if any, should be designated as PC when calculating PC expenditures"

Place Of Service	Yes
Employee Worksite	58.82% (10)
School	76.47% (13)
Shelter	70.59% (12)

"Please select the practitioner, if any, should be designated as PC when calculating PC expenditures"

Provider Type	Yes	Provider Type	Yes
Acupuncturist	14.4% (2)	Certified Community Support Worker	69.2% (9)
Licensed Marriage & Family Therapist	38.5% (5)	Dietician/Nutritionist	69.2% (9)
Naturopath/Homeopath	15.4% (2)	Licensed Substance Use Associate	46.2% (6)
Homeopath	0.0% (0)	Certified Alcohol & Drug Use Counselor	61.5% (8)
Pediatric Physician, Development and Behavioral	76.9% (10)	General Psychiatrist	53.8% (7)
Licensed Alcohol & Drug Use Counselor	53.8% (7)		

"Please select which procedure code, if any, should be designated as PC when calculating PC expenditures"

Code	Description	Yes
T1016	Case management	86.7% (13)
90847	Family psychotherapy with patient	53.3% (8)
G0152	Occupational therapy 15 minutes	60.0% (9)
99355	Prolonged services	53.3% (8)
T2022	Case management/month	80.0% (12)
H2000	Comprehensive multi-disciplinary assessment for Serious Emotional Disturbance	60.0% (9)
n/a (supported with state general fund)	Initial service plan-juvenile community corrections	26.7% (4)

Defining PC Interprofessional Teams. Maggie McCowen, New Mexico Behavioral Health Providers Association
- Goal 4: Develop and make recommendations regarding sustainable payment models and strategies to achieve high quality and equitable primary care for all New Mexicans
- Voting results below:

Select the clinical members of the NM interprofessional PC team

Provider Type	Responses	Provider Type	Responses
Primary Care Physician	100.00% (17)	**Nutritionists**	88.24% (15)
Specialists	29.41% (5)	**Native Healers**	76.47% (13)
Physician Assistant	100.00% (17)	**Acupuncturists**	35.29% (6)
Medical Assistant	88.24% (15)	**Lab Technologists**	58.82% (10)
School Nurses	64.71% (11)	**Radiology Technologists**	52.94% (9)
Licensed Practical Nurses	88.24% (15)	**Occupational Therapists**	64.71% (11)
Registered Nurses	88.24% (15)	**Physical Therapists**	76.47% (13)
Advanced Practice Nurses	94.12% (16)	**Dentists**	70.59% (12)
Pharmacists	76.47% (13)	**Dental Assistants**	64.71% (11)
Pharmacists Clinicians	94.12% (16)	**Dental Hygienists**	70.59% (12)
Pharmacy technicians	76.47% (13)	**Dental Therapists**	52.94% (9)
		Other	29.41% (5)

Select the non-clinical members of the NM interprofessional PC team

Provider Type	Responses	Provider Type	Responses
None of the above	0.00% (0)	**Personal Care Attendants**	58.82% (10)
Special Education teacher/counselor	23.53% (4)	**Senior Center Staff**	35.29% (6)
Comprehensive community support worker	76.47% (13)	**Caregivers**	58.82% (10)
Case Manager	94.12% (16)	**Clinical Coordinators**	64.71% (11)
Patient Navigator	88.24% (15)	**Medical Records Specialists**	47.06% (8)
Community Health worker/*promatora*	94.12% (16)	**Financial Counselors**	41.18% (7)
Health Educator	88.24% (15)	**Billing Specialists**	64.71% (11)
Clergy/Faith-based outreach worker	52.94% (9)	**Schedulers**	52.94% (9)
		Other	0.00

Select the behavioral health members of the NM interprofessional PC team

Provider Type	Responses	Provider Type	Responses
None of the above	5.88% (1)	**Mid-level Social Workers and Counselors**	82.35% (14)
Psychologist	88.24% (15)	**Peer Support Specialists**	82.35% (14)
Psychiatrist	82.35% (14)	**School Social Worker/Counselor**	70.59% (12)
Licensed Clinical Social Worker	88.24% (15)	**Behavior Management Specialists**	58.82% (10)
Licensed Independent Social Worker	88.24% (15)	**Licensed Alcohol and Drug use Counselor**	88.24% (15)
Licensed Professional Clinical Counselor	88.24% (15)	**Treatment Foster Care Family**	29.41% (5)
		Other	(2)

Workforce Sustainability: PC Team, Patient Panel Size Framework. Hala Reeder, Human Services Department
- Traditional literature on PC patient-provider panel sizes focus on 1 patient to 1 provider.
  - Benchmark focused on responding to immediate health issues.
  - Risk stratification: benchmarks advance business strategy.
- PCC wants a benchmark that incorporate interprofessional team utilization.
  - Provider-team benchmarks that achieve health equity.
  - Benchmarks that advance health outcomes and help prevent provider burnout.
- No consensus reached on patient-team panel sizes; PCC staff will further research.

Agenda item: **PCC Group Discussion & Reflections**

Agenda item: **Public Comment**

Agenda item: **Closing Comments**

ADJOURN

The next Primary Care Council Meeting will take place 5/20/22.