James L. Holly, M.D.

UTHSCSASOM – Primary Care Center Leadership Group – Making Primary Care Profitable, April 25, 2014

I am looking forward to meeting with you, The Primary Care Center Leadership Group, on May 5th. I understand that UT Medicine will be opening another Primary Care Center (with a patient-centered-medical-home focus) on Medical Drive in July, and there are plans to open other centers in the future. The evening meeting will be with the new Director for the Primary Care Centers and the faculty who are/will be working in those centers. One of the questions you wish to discuss is how to be profitable while maintaining excellent care and meeting the Triple Aim. I thought that our time might be more productive with an introduction. If you would like to send me any information, I will be happy to review it before our dinner. The following is an introduction to SETMA:

- This link is to two pieces prepared for marketing that summarizes SETMA's scale, accreditations and activities.
 http://www.jameslhollymd.com/about-setma/may-2014-setmas-clinics-and-patients-choosing
- Two years ago, SETMA was chosen by Robert Wood Johnson Foundation to participate in the LEAP Study. Our 57-page summary for that program gives a good introduction to SETMA: http://www.jameslhollymd.com/letters/Robert-Wood-Johnson-Foundation-PCT-LEAP
- This link is to a discussion of SETMA's Model of Care: http://www.jameslhollymd.com/the-setma-way/setma-model-of-care-pc-mh-healthcare-innovation-the-future-of-healthcare.
- This link is to SETMA's six years of public reporting of quality metrics by provider name: http://www.jameslhollymd.com/public-reporting/public-reports-by-type
 - Each month, SETMA closes our offices for half a day and for four hours (without a break) we teach one another.
- In March, 2013, **The Commonwealth Fund, published an Issue Brief** *entitled:* Paying for Value: Replacing Medicare's Sustainable Growth Rate Formula with Incentives to Improve Care. SETMA studied that in April, 2013. Our conclusion was that we are already doing everything the Commonwealth Fund recommends for the future of healthcare. http://www.commonwealthfund.org/Publications/Issue-Briefs/2013/Mar/Paying-for-Value-Replacing-Medicares-Sustainable-Growth-Rate.aspx. This and the following publication gives us a framework for the future of successful Primary Care.

• In October, 2013, the U.S. House Ways & Means & Senate Finance Committee Staff published a Discussion Draft Sustainable Growth Rate Repeal & Medicare Physician Payment Reform. This link is to the power point I prepared for that presentation to SETMA's providers: http://www.jameslhollymd.com/Presentations/discussion-draft-sustainable-growth-rate-repeal-medicare-physician-payment-reform

The following are discussions and presentations on the economics and critical issues for the future of primary care.

- Whether it is for Medicare Advantage, ACO or PC-MH HCC Risk Adjustment Factors are going
 to be critical to financial suggest for Primary Care in the future. As we all work toward
 fulfillment of The Triple Aim, designing Primary Care which are "integrators" of care will be
 critical: http://www.jameslhollymd.com/Presentations/coding-to-ensure-accurate-health-risk-scoring.
- Data Analytics will be critical for the success of Primary
 Care: http://www.jameslhollymd.com/Presentations/The-Importance-of-Data-Analytics-in-Physician-Practice
- This presentation was made for an EHR vendor so the name is used but the principles apply to
 any and all uses of electronics for the redesigning of Primary Care for the successful fulfillment
 of the Triple Aim:
 http://www.jameslhollymd.com/Presentations/NextGen-As-A-Tool-For-Redesigning-Primary-Care-To-Fulfill-IHI-Triple-Aim

You may not have time to review this material but it would be a good foundation to our discussion if you do.

Sincerely yours,

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