



Priority Issue 2: Primary Care and Preventive Services

Problem Statement

Limited access to quality health care is a growing issue in many communities in Pennsylvania. Limits relate to the number of primary care practitioners, cultural competency, knowledge, location, affordability, coordination of comprehensive care, reimbursement and technology, among other things. Such limitations prevent many people from obtaining quality preventive and disease management services.

Goal 1 Improve access to primary care services for Pennsylvanians.

Objective 1.1 Reduce the number of federally designated Geographic and Population Health Professional Shortage Areas (HPSA) by 3 percent by December 2020:

Primary Care: from 45¹¹ to 43

Dental: from 61¹² to 59

Mental Health: from 26¹³ to 25

Strategy 1.1.1 Increase community-based educational training tracts for primary care and dental health professions students in underserved areas.

Suggested Activities

- Identify and expand current workforce pipeline programs.
- Promote additional residency spots for primary care in underserved areas.
- Explore avenues to increase the number of primary care preceptors to provide community-based training.
- Advocate for program to retrain providers.

Performance Measures

- Number of programs identified
- Number of residency spots available
- Number of partners/champions identified for residency programs
- Increase in the number of retraining programs available

Assets

- DOH innovation workforce priority area
- Pennsylvania Nursing Association reports
- Pennsylvania Health Care Workforce reports
- Association of American Medical Colleges' "Physician Report for Pennsylvania"
- Dental reports
- DOH, Primary Health Practitioner Program
- Existing DOH, PAFP grant-funded partnership to expand the number of family medicine residency slots in underserved areas
- Increased access to underserved populations aligns with current Primary Care Medical Home (PCMH) and Meaningful Use requirements.

Lead Agency/Organization

DOH, Innovation Center

Potential Partners

Pennsylvania Coalition for Oral Health (PCOH); Pennsylvania Area Health Education Centers (AHEC); Pennsylvania Osteopathic Medical Association (POMA); Pennsylvania Association of Community Health Centers (PACHC); National Nursing Centers Consortium (NNCC); PSNA; PAFP; The Free Clinic Association of Pennsylvania (FCAP)

Strategy 1.1.2 Expand access to care through primary care safety net facilities.

Suggested Activities

- Promote the establishment and expansion of school-based health care clinics.
- Promote the establishment and expansion of primary care safety net facilities (e.g., free clinics, charitable clinics, rural health clinics, Federally Qualified Health Centers (FQHC), FQHC Look-Alikes).

Performance Measures

- Number of grants given to support new safety net clinics or expand services at existing clinics
- Number of patient visits at the grant-funded safety net clinics

Assets

- DOH, Community-Based Health Care Grant Program (Act 10 of 2013) administered by the Bureau of Health Planning, Division of Health Professions Development.

Lead Agency/Organization

DOH, Bureau of Health Planning, Division of Health Professions Development

Potential Partners

FCAP; PACHC; Pennsylvania Rural Health Association; AccessMatters; NNCC; Office of Rural Health

Strategy 1.1.3 Develop new models and expand on emerging models of health care workforce.

Suggested Activities

- Recruit and retain primary care clinicians and dentists in underserved areas in the state.
- Promote emerging workforce models, such as team-based care and patient centered medical homes, to provide coordination and integration of care, including dental.
- Hold a state dental workforce summit.
- Advocate for advanced practitioners to practice to the fullest extent of their licensure and education.
- Promote the use of community health workers (CHW) to improve access to and coordination of health care.
- Identify and standardize training and certification programs for CHW.

Performance Measures

- Reduction in the number of primary care HPSA
- Reduction in the number of dental HPSA
- Occurrence of dental summit
- Number of placements for primary care providers and/or dentists in underserved areas
- Number of health systems that have integrated CHWs into primary care practice
- Increase of policies that support the integration and reimbursement of CHW in primary care
- Number of CHW training and certification programs that have standardized curriculums
- Number of medical schools that include a rural and/or underserved health training track

Assets

- Priority area under DOH's innovation workforce area
- Pennsylvania Primary Care Career Center
- Three workgroups examining employer/policy/workforce-training issues related to community health workers (A steering committee provides direction and communication between the groups.)

Lead Agency/Organization

DOH, Innovation Center; DOH, Bureau of Health Planning, Division of Health Professions Development

Potential Partners

AHEC; POMA; PACHC; NNCC; PSNA; FCAP; PCOH; PAFP; PACHC

Goal 2

Increase the number of Pennsylvania residents receiving preventive health care services.

Objective 2.1 Increase the percent of providers that report the administration of all immunizations into the State Immunization Information System to 100 percent by December 2020.

Strategy 2.1.1 Amend the communicable and non-communicable disease reporting regulations to include mandated reporting of the administration of immunizations.

Suggested Activities

- Draft language requiring all providers to report the administration of immunizations into the State Immunization Information System.
- Convene appropriate stakeholders to discuss proposed changes.
- Obtain preliminary approval of draft regulations by the necessary agencies within the governor's office.
- Obtain approval of regulations by the Advisory Health Board.
- Obtain final approval of draft regulations by the necessary agencies within the governor's office, including the attorney general.
- Submit regulations to the Independent Regulatory Review Commission and the state legislative standing committees, following the prescribed process for public comment and final rulemaking.
- Respond to all comments received during the public comment period.
- Participate in the Independent Regulatory Review Commission hearing in which a final decision on the regulations will be rendered.

Performance Measures

- Passage of regulation

Assets

- There is a defined process for updating regulations.
- The language and amendment package for these regulations is already drafted; no need to start from scratch.
- This is a priority of the Pennsylvania secretary of health.

- There is support from a network of immunization coalitions and other stakeholders.
- Immunization administration is part of future plans for the Public Health Gateway, whereby the information will be sent to the State Immunization Information System via electronic health records.

Lead Agency/Organization

DOH, Bureau of Communicable Diseases

Partners and Potential Partners

Pennsylvania eHealth Partnership Authority; DHS; Pennsylvania Immunization Coalition (PAIC)

Objective 2.2: Reduce the eight-month provisional enrollment period for children to receive all required school immunizations by December 2020.

Strategy 2.2.1 Amend the school immunizations regulations to reduce or eliminate the provisional enrollment period.

Suggested Activities

- Work with the PDE to draft language eliminating or reducing the provisional enrollment period.
- Convene appropriate stakeholders to discuss proposed changes.
- Ensure PDE is on the same timeline with its regulations.
- Obtain preliminary approval of draft regulations by the necessary agencies in the governor's office.
- Obtain approval of draft regulations by the Advisory Health Board.
- Obtain final approval of draft regulations by the necessary agencies, including the office of the attorney general.
- Submit regulations to the Independent Regulatory Review Commission and the state legislative standing committees, following the process for public comment and final rulemaking.
- Respond to all comments received during the public comment period.
- Participate in the Independent Regulatory Review Commission hearing in which a final decision on the regulations will be rendered.

Performance Measures

- Passage of regulation

Assets

- There is a defined process for updating regulations.
- Conversations with PDE have already begun.
- This is a priority for the Pennsylvania secretary of health.
- DOH has begun to draft language.

Lead Agency/Organization

DOH, Bureau of Communicable Diseases

Potential Partners

PDE, PSBA; School Nurse Association; PAIC

Objective 2.3 For youth ages 1 to 20 years old who are enrolled in Medicaid with at least 90 days of continuous eligibility, increase the percentage who have had a preventive dental service in the past year from 42.5 percent in FFY 2014¹⁴ to 47 percent by December 2020.

Strategy 2.3.1 Increase access, utilization, and education of preventive dental services, through various modalities.

Suggested Activities

- Educate primary care practitioners to apply fluoride varnish during early periodic screening diagnostic and treatment.
- Educate general dentists about age 1 dentistry.
- Provide Cavity-Free Kids program to early childhood education venues.

Performance Measures

- Number of primary care practitioners educated
- Number of general dentists educated
- Number of Cavity-Free Kids programs provided

Assets

- Child oral health is a priority area under DOH's innovation work.
- Programs by the PA AAP
- Programs by Pennsylvania Head Start Association

Lead Agency/Organization

PCOH

Potential Partners

DOH, Innovation Center; DOH, BHPRR; PA AAP; Pennsylvania Head Start Association

Goal 3

Improve health literacy (i.e., the capacity to obtain, process, and understand basic health information and services needed for informed health decision-making) of Pennsylvania residents.

Objective 3.1 Establish a method of determining the health literacy of Pennsylvania residents by December 2020.

Strategy 3.1.1 Develop a statewide health literacy coalition.

Suggested Activities

- Convene diverse stakeholders to develop the structure, goals, objectives, and activities of the Health Literacy Coalition.
- Collect data on existing health literacy programs, including activities of regional health literacy coalitions.
- Build a database of programs to be disseminated through coalition website.
- Raise awareness of existing programs.

Performance Measures

- Establishment of coalition structure, charter, and work plan that includes goals, objectives and activities.
- Completion of website.
- Increases in coalition and member capacity, coordination, and collaboration as indicated by annual assessment.

Assets

- DOH grant to Health Care Improvement Foundation (HCIF) for the development of the Pennsylvania health literacy coalition
- Partnerships with providers and community-based organizations around health literacy
- 2013 eHealth Partnership survey on consumer views on health information technology

Lead Agency/Organization

HCIF

Potential Partners

HAP; Pennsylvania Libraries Association (PaLA); Thomas Jefferson University and hospitals; Pennsylvania eHealth Partnership Authority; Pennsylvania Health Literacy Coalition; DOH, Division of Health Risk Reduction

Strategy 3.1.2 Increase capacity of organizations in Pennsylvania to address health literacy needs of patients and consumers.

Suggested Activities

- Develop a toolkit for organizations, and disseminate it through the coalition website. The toolkit should include examples, resources and practical guidance for system changes to address patient and consumer health literacy needs.
- Support organizations in implementing strategies in toolkit through coaching and mentoring provided by the statewide coalition.

Performance Measures

- Number of organizations accessing and using toolkit
- Number of strategies (e.g., policies, procedures, leadership development) adopted by organizations
- Changes in number and type of services or programs provided
- Changes in staff and provider knowledge, skills, attitude, and behavior as a result of strategy implementation (e.g., policy changes, training initiatives)

Assets

- Expertise of organizational partners (nine health systems, five senior-serving organizations, five organizations serving immigrant and refugee groups in southeast Pennsylvania)

Lead Agency/Organization

HCIF

Potential Partners

Thomas Jefferson University and hospitals; Pennsylvania Health Literacy Coalition; DOH, Division of Health Risk Reduction

Strategy 3.1.3 Increase capacity of health care providers in Pennsylvania to communicate clearly with patients.

Suggested Activities

- Provide training and education on clear communication to health care providers across Pennsylvania through programs including online training, in-person train-the-trainer sessions, and webinars.
- Support participants of train-the-trainer sessions to coach staff and providers in their organizations in adoption of clear communication techniques (e.g., teachback).

Performance Measures

- Number of health care professionals who complete training
- Number of trained health care professionals reporting intention to change behavior as a result of training

Assets

- Experienced trainers from Thomas Jefferson University and hospitals
- Existing training curricula
- Funding to provide training and educational sessions
- Written materials health literacy audit process

Lead Agency/Organization

HCIF

Potential Partners

HAP; NNCC; PACHC; FCAP; PSNA; AccessMatters; Thomas Jefferson University and Hospitals; Pennsylvania Health Literacy Coalition; DOH, Division of Health Risk Reduction; PAFP

Strategy 3.1.4 Increase capacity of and opportunities for patients and consumers to support and advocate for health literacy.

Suggested Activities

- Collect stories about patient experiences with healthcare communication and disseminate to a variety of audiences (e.g., providers, policymakers) to raise awareness of health literacy needs.
- Recruit and educate health care consumers to serve as health literacy advocates or advisors.
- Provide opportunities for educated health care consumers to advise and support health literacy efforts of providers and advocate for health literacy in their communities.

Performance Measures

- Number of stories collected
- Number of community partners trained to serve as health literacy advocates or advisors
- Number of opportunities

Assets

- Strong partnership with community-based organizations
- Existing southeast Pennsylvania-based, DOH-funded community peer educator program focused on Ask Me 3 technique¹⁵

Lead Agency/Organization

HCIF

Potential Partners

Thomas Jefferson University and hospitals; Pennsylvania Health Literacy Coalition; DOH, Division of Health Risk Reduction; AHEC

Strategy 3.1.5 Develop and implement questions for a statewide population survey to measure health literacy of Pennsylvania residents.

Suggested Activities

- Convene coalition members and state and national health literacy experts to develop and pilot a question or set of questions.
- Advocate for inclusion of these questions in statewide population survey.

Performance Measures

- Inclusion of health literacy questions in statewide survey

Assets

- Funding to develop Pennsylvania health literacy coalition
- Partnerships with providers and community-based organizations around health literacy
- Close collaboration with expert faculty at Thomas Jefferson University and hospitals

Lead Agency/Organization

HCIF

Potential Partners

Thomas Jefferson University and hospitals; Pennsylvania Health Literacy Coalition; DOH, Division of Health Risk Reduction