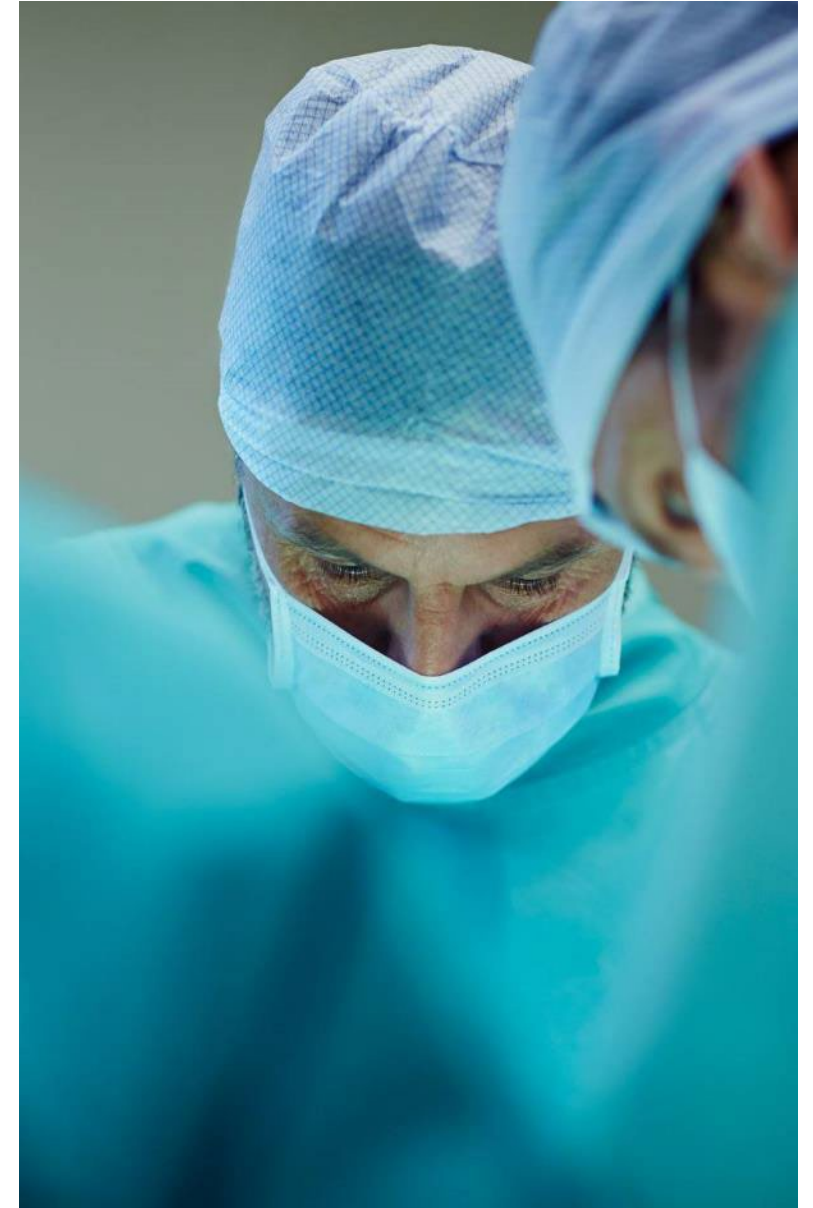

OUTPATIENT CARE WHAT'S WORKING

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OBJECTIVES

1. Define what is outpatient care.
2. Define who administers outpatient care.
3. Discuss what's new in primary care.
4. Explore new models of primary care on the horizon.



OUTPATIENT CARE

Ambulatory care

Observation status in an inpatient facility

X-rays, MRIs, CT scans, and other types of imaging






WHO ADMINISTERS OUTPATIENT CARE

- MDs
- DOs
- Nurse Practitioners
- Advanced Practice Nurses
- Physical Therapists
- Occupational Therapists

WHAT'S NEW IN PRIMARY CARE

- New primary care models:
- Advanced primary care providers
- Retailers
- payers



For a decade now primary care has seen a steady stream of new business and clinical model

By 2030 is suspected as much as 30% of primary care will be nontraditional as compared to fee-for-service that dominates at this time

There will be a shift from fee-for-service to fee-for-value reimbursement

PREVENTION

- Pharmacogenomic panels may guide drug dosing in the future (June 2023)

- A new trial randomly assigned 7000 adults receiving a new drug prescription to undergo or not undergo testing with the pharmacogenomic genotyping panel
- The panel consisted of 50 variants in 12 genes that regulate drug metabolism.
- At least one actionable variant was identified in over 90% of the participants

OVER DIAGNOSIS OF BREAST CANCER IN OLDER WOMEN(OCTOBER 2023)

- Overdiagnosis, the detection of the disease that would not have caused morbidity and mortality if it had not been found, is a concern in breast cancer screening, particularly among older women

- In a 2023 study of over 54,000 women 70 years and older who had recently undergone screening, the percent of overdiagnosed breast cancer cases increased with the age from 31% among 70 to 74 years to 54% among women aged 85 and older

LIMITED ROLE FOR SUICIDE RISK SCREENING(JULY 2023)

- Suicide is the 10th leading cause of death United States
- It is recommended NOT to routinely screen for suicide risk in adult primary care patients, given the lack of evidence that screening reduces suicidal behavior

- A systematic review for the USPS TF found insufficient evidence to determine whether the benefits of screening outweigh the harms in general population of United States adults
- However, this conclusion did not apply to individuals with existing psychiatric disorders or past histories of suicide attempts

IMMUNIZATIONS

- ACIP recommendations for all 2023 – 24 seasonal influenza vaccination

- New recommendations for seasonal influenza vaccination were issued in August 2023 by the ACIP
- The antigenic composition has been updated
- Egg allergy alone no longer necessitates additional safety measures for influenza vaccination

UPDATED COVID – 19 MRNA VACCINE RECOMMENDATIONS

- The FDA and CDC have updated COVID 19 vaccine authorizations and recommendations

- Available COVID 19 vaccines have been updated to target endocrine variant X BB.1.5
- Bivalent vaccines are no longer available
- An updated 2023 – 2024 formula vaccine is recommended for all individuals aged 6 months and older

RESPIRATORY SYNCYTIAL VIRUS VACCINES WAS APPROVED FOR OLDER ADULTS IN MAY 2023

- RSV is important because of lower respiratory tract disease in older adults

- The FDA has approved two recombinant vaccines for the prevention of lower respiratory tract disease in individuals 60 years of age and older
- One of these vaccines is adjuvanted and the other is non-adjuvanted
- In random trials, the efficacy of the two vaccines in preventing confirmed RSV were 82 and 67% respectively, compared with placebo

GENERAL INTERNAL MEDICINE

Long – distance effect of wildfire smoke on asthma symptoms (October 2023)

- Wildfire fine particulate matter (PM_{2.5}) has been shown to affect respiratory health
- Previous work is focused on populations residing near and directly affected by wildfires
- In June 2023, smoke from wildfires in Canada drifted hundreds of miles to New York City
- This increased ambient PM 2.5

- During smoke waves, emergency department visits for asthma in both pediatric and adult patients increased to 261 per day (reference during non-smokers, 181 per day; incidents ratio 1.4)
- Wildfires have health effects far from the source and are particularly hazardous to those with underlying lung disease

OVER-THE-COUNTER OPIOID ANTAGONISTS FOR OPIOID OVERDOSE (SEPTEMBER 2023)

- Drug overdose is a major public health problem; opioids were reported to be involved in nearly 80% of 600,000 overdose deaths worldwide in 2019
- Increasing rate of fatal overdose is driven by the presence of the synthetic opioid fentanyl

- Naloxone 4 mg nasal spray rapidly reverses the effect of opioid overdose
- This is the first opioid antagonist agent available for over-the-counter purchase in the United States

EXERCISE IN CARDIOVASCULAR RISK REDUCTION (JULY 2023)

- Current guidelines from the AHA and the WHO recommend at least 150 minutes of moderate – to – vigorous physical activity weekly
- Two recent studies suggest that HOW one exercises matters more than when
- In one prospective cohort of over 500,000 individuals, combining twice – weekly muscle strengthening activity to at least 150 minutes of moderate – to – vigorous physical activity was associated with optimal reductions in all – cause and cardiovascular mortality

- In a separate study of nearly 90,000 individuals, among those who had at least 150 minutes of weekly physical activity,” weekend warrior” patterns of exercise (at least 50% of activity occurring over 1 to 2 days) and” regular” patterns (physical activity distributed more evenly during the week) were associated with similar reductions in the risk of Myocardial infarction, stroke, heart failure, and atrial fibrillation compared with inactivity

IRON DEFICIENCY AND ANEMIA DUE TO DAILY LOW – DOSE ASPIRIN (JULY 2023)

- Aspirin can increase bleeding risk
- Data are lacking on anemia and iron deficiency in individuals without clinically obvious bleeding
- A new analysis of a randomized trial in older adults assigned to daily low – dose aspirin or placebo has documented a small but statistically significant increase in the rate of anemia (51 per 1000 person – years in the Aspirin group versus 43 per 1000 person-years with placebo)

- And iron deficiency (13% with Aspirin versus 10% with placebo)
- The decision to perform surveillance for anemia or iron deficiency in individuals taking aspirin should be individualized

PRIMARY CARE CARDIOVASCULAR MEDICINE

Semaglutide in patients with heart failure with preserved ejection fraction and obesity (September 2023)

- Weight loss is likely to improve functional status and quality of life in heart failure patients with preserved ejection fraction (HFpEF)
- Achieving weight loss in this group of patients is very difficult

- In a recent trial of more than 500 patients with HFpEF, patients that were randomly assigned to a treatment with semaglutide had greater improvement in exercise capacity (i.e. six – minute walk distance), quality of life, and weight loss (-13% mean change in body weight versus -2.6%) at 52 weeks than patients assigned to placebo

PRIMARY CARE GERIATRICS

Updated beers criteria for drug prescribing adults

- Change in the 2023 criteria include **AVOIDANCE** of:
- 1) rivaroxaban(Xarelto) for long – term treatment of non-valvular atrial fibrillation or VTE, as well as avoidance of warfarin as initial therapy
- 2) sulfonylureas as first – or second – line monotherapy and add on – therapy

- 3) initiation of all or transdermal estrogen in older women
- The use of aspirin for primary prevention of cardiovascular disease is also discouraged
- Deprescribing aspirin in older adults already taking it for primary prevention is recommended

PRIMARY CARE HEMATOLOGY

Updated beers criteria for anticoagulants (July 2023)

- The update recommends that patients >65 years of age not initiate warfarin for VTE or non– valvular atrial fibrillation unless there are substantial barriers or contraindications to using a direct oral anticoagulant (DOAC)

- Among DOAC, apixaban(Eliquis) and edoxaban(Sa vaysa) are considered a safest

PRIMARY CARE HYPERTENSION

Social determinants of health and disparities in hypertension control (July 2023)

- Among patients treated for hypertension, rates of control are lower in black individuals as compared with white individuals
- In a large cohort of 14,000 black-and-white adults treated for hypertension, the rate of control (defined as blood pressure less than 140/90 mmHg) was 64% among black adults and 75% among white adults

- Compared with white adults, black adults have lower annual household incomes and educational levels, less likely to have health insurance, and resided in more economically disadvantaged neighborhoods in regions with shortage of health professionals
- In adjusted analyses, differences in social determinants accounted for one third of the racial disparity in hypertension control

Kidney effects of different glucose lowering agents in patients with type II diabetes mellitus

- In prior studies, glucagon– like peptide one (GLP – I)receptor agonists, albuminuria and slowed estimated glomerular filtration rate (eGFR) decline among patients with diabetic kidney disease
- By contrast, in a large trial in over 5000 individuals with type II diabetes on metformin monotherapy that directly compared the kidney effects of the GLP-I receptor agonist liraglutide with a DPP4 inhibitor, insulin, and glimepiride, there were no significant differences among the groups at five years in terms of eGFR decline or development of CKD
- Patients enrolled in this study had normal kidney function and well controlled blood pressure at baseline and hence the number of events was small

PRIMARY CARE NEUROLOGY

Aerosolized lidocaine for trigeminal neuralgia exacerbations (June 2023)

- Pharmacotherapy for trigeminal neuralgia typically involves medications to prevent attacks
- Limited options are available for patients who also require rescue therapy

- Lidocaine administered intranasally or intra-orally as a 2.4% aerosol (32 mg per dose) was reported effective in a retrospective study of 152 patients from China
- Pain resolution or a 50% improvement was reported at 15 and 30 minutes in 78 and 70%, respectively
- Lidocaine nasal sprays are not commercially available in the United States

PRIMARY CARE ORTHOPEDICS AND SPORTS MEDICINE

6th international conference on concussion in sport (August 2023)

- Highlights from the conference include evidence summaries emphasizing the effectiveness of policies to reduce the risk of sports – related concussion (SRC)
- These include mouthguard use in ice hockey, limiting contact drills in American football, and updated clinical assessment tools

- These tools include the six edition of the sport concussion assessment tool for adults and children (SCOAT6 and child SCOAT 6)
- The conference affirmed the importance of physical activity and aerobic exercise that does not exacerbate symptoms as an early intervention

No benefit of opioids for acute low back pain (August 2023)

- Opioid analgesics are often used to treat acute low back pain despite limited supporting evidence
- In a randomized trial of 347 adults presenting to the emergency department or primary care clinic with acute, nonspecific low back pain, oxycodone (up to 20 mg daily for six weeks) was no more effective for pain relief or functional improvement than placebo

- There was a high risk of potential opioid misuse in patients in the oxycodone group at one year follow-up (20% versus 10%)

PRIMARY CARE PULMONOLOGY

Longitudinal risk of airway obstruction in symptomatic current or former smokers (August 2023)

- Whether current or former smokers with early respiratory symptoms have a different risk for COPD development or complications is not well understood
- In one longitudinal cohort of patients aged 40 to 80 years with a > 20 pack-year smoking history, the risk of developing airway obstruction over five years was 30 to 35% regardless of the presence of respiratory symptoms

- However, patients with symptoms were significantly more likely to have respiratory exacerbations during follow-up

Mucus plugging on CT scan and COPD mortality (May 2023)

- In patients with chronic obstructive pulmonary disease (COPD), excess production and reduce clearance of mucus in Airways lead to an accumulation of occlusive mucous plugs
- There is growing evidence that mucus plugging impacts lung function, symptoms, and COPD prognosis

- In a study of over 4000 patients with COPD who were evaluated for mucus plugging in medium – to – large airways by high – resolution CT scan
- They were followed for a median of 9.5 years
- Higher levels of mucus plugging correlated with increased risk of mortality, even after controlling for other clinical risk factors

PRIMARY CARE PSYCHIATRY

Screening for major depressive disorder in adults (October 2023)

- Major depressive disorder is a leading cause of disability in the United States
- Lifetime prevalence of approximately 20%
- It remains underdetected and undertreated

- Updated guidelines from the USPSTF recommend screening for depression in adults (ages 19 years and above), including pregnant and postpartum women
- Based upon a systematic review that suggested a net benefit from screening

PRIMARY CARE 2030

Over the next decade nontraditional primary care providers could capture around 30% of the US market

- New primary care models from nontraditional players – such as advanced primary care providers, retailers, and payers – aim to deliver more efficient care, improve patient outcomes, and lower costs

- Payers, health systems, and investors will need to make strategic choices to determine where to play and how to win over the next decade



CARE MODELS IN 2030

- Increased cost awareness, consumerism, digital adoption, and physician shortages are putting pressure on today's care models

- We expect heightened focus on specific populations, broad adoption of multidisciplinary care teams, and growth of alternative sites and channels of care to redefine this space

- Today, most physicians care for populations of patients with widely varying needs and diverse payers
- There's been recent success of advanced primary care (APC) population-specific models which has illuminated an alternate path forward for primary care providers

- Both Medicare advantage (MA) and Medicaid have several benefits
- These include a narrow peer environment and higher risk – adjusted per – member – per – month rates
- This allows providers to invest in resources and capabilities tailored to patient populations for more coordinated and comprehensive care delivery

Leading primary care providers will get creative

- We expect leading primary care providers to function in multidisciplinary care teams (MDCTs)
- With the integrated approach to medical, behavioral, and social determinants of health
- In an environment where all team members are working at the top of their licenses, MDCTs can help optimize care delivery to advance patient outcomes

- They can also promote health equity (we expect to be a top priority for state governments, payers, and providers over the next decade)

MDCTs won't be enough to combat labor shortages

- By 2030, the US will be short 45,000 primary care physicians
- To effectively deliver care, organizations will have to rely on APP's
- especially in alternative sites and channels, such as retail health or virtual care

- APP's will likely continue to focus on routine and urgent care
- Physicians will quarterback care for the most complex cases including patients with uncertain diagnoses
- Projections show the APP labor force will grow sufficiently to meet this demand

Alternative sites and channels of care

- Sites of care moving from clinics to homes, retailers, and digital platform
- Retail giants like CVS, Walgreens, and Walmart have recently forayed into comprehensive primary care with high ambitions for future expansion

- During the pandemic, 18% of primary care visits were virtual – soaring from a mere 1% in 2018



OWNERSHIP MODELS IN 2030

- As reimbursement and care model shift, owners and investors will have to change their approach
- More than half of the primary care physicians are affiliated with the health system currently, compared with 30% physicians in 2016

- In 2030, we expect to see two major strategies for health systems and primary care
- Some health systems will shift their strategic focus from acquisitions to primary care practices partnerships

- Other progressive health systems will transform their existing primary care practices into APCs
- This is an effort to deliver customer experiences and outcomes that will generate sustainable, profitable businesses

- More small practices will manage to stay independent, using enabler companies like Agilon Health and Privia Health to move into value – based care and become more profitable

- Payors will continue to grow their market share
- Entering primary care in 2011, payors and payor-owned services companies already hold around 5% of the market (care for approximate 13 million lives, and employ around 12,000 physicians)

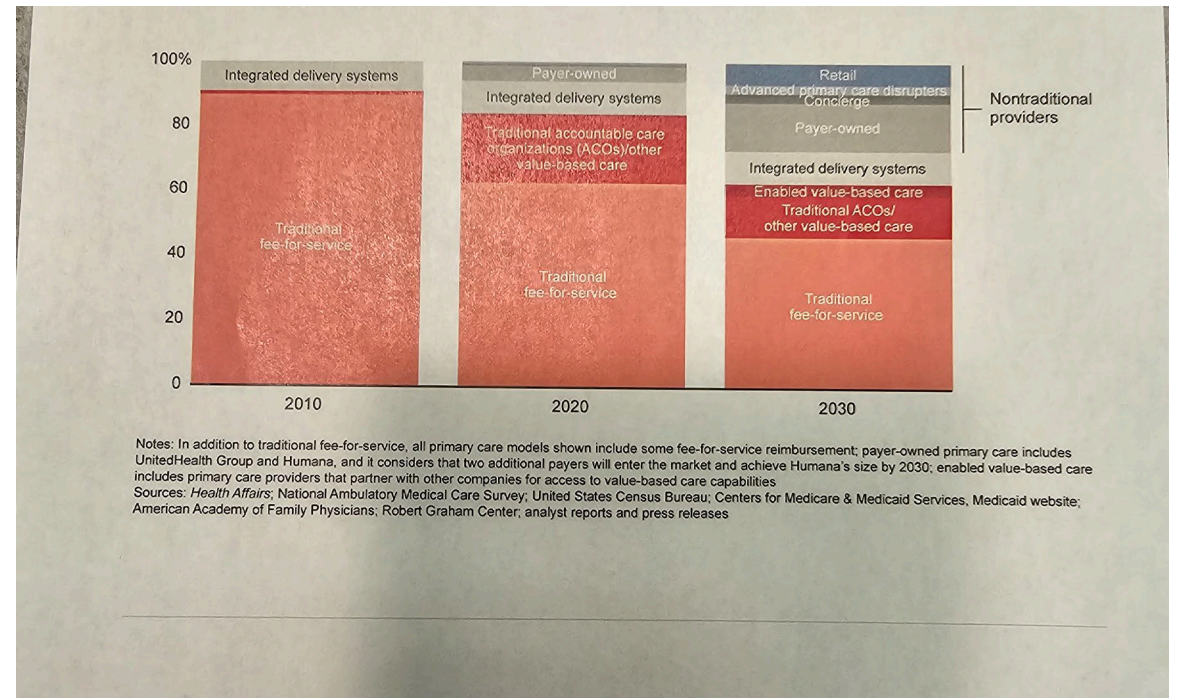
- Payors will increasingly acquire well – coordinated, high – functioning practices, as well as the technological and digital capabilities required to scale risk – bearing models

- Private equity will also claim a larger share of primary care space as investor interests hold steady
- We anticipate increased consolidation of private equity – and venture capital – backed market disruptors throughout the next decade

- Humana's investment in CenterWell Senior Primary Care facilities as a joint venture with private equity firm Welch, Carson, Anderson and Stowe is just one example of the growing trend of payer – and private equity – backed APCs

A NEW COMPETITIVE LANDSCAPE

- As reimbursement, care, and ownership models evolve, nontraditional providers will likely capture around 30% of the market





Five major competitive dynamics will define market share in this new era

- I. Risk – bearing, population – specific models will scale
- Fully capitated APCs, led by disruptors and payers, will grow nationally
- Many APCs demonstrate success in Medicare Advantage today, particularly due to favorable risk adjustment


- As risk adjustment factor methodology changes in APCs with the take on other populations, like commercial members, the winners of the future will be those that excel at improving clinical outcomes and reducing costs in order to be profitable

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- 2. Payers and payer – owned services companies will become one of the largest models
 - As they continue to pursue vertical integration strategies, UnitedHealth’s OptumCare and Humana, along with potential future market entrants, could serve around 15% of primary care lives by 2030

- 3. Retailers will grab market share with full – scope primary care
- Retail behemoths could account for 5 to 10% of total primary care lives by 2030
- They will likely outperform traditional primary care providers on the patient experience, attracting customers through increased access and convenience, particularly in geographically underserved areas

- 4. Alternative models will squeeze traditional model
- Traditional fee – for – service providers will remain the largest primary care model in 2030
- But they could lose around 15 to 20 percentage points of market share

- Without infusions of capital to address the administrative and operational obstacles, many of these providers will struggle to transition to fee – for – value

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- 5.Virtual channels will endure
 - Virtual care is set to grow across all primary care models, climbing back up to early – pandemic levels approximate 20% penetration by 2030

SUMMARY

- Defined what is primary care and who administers it!
- Discussed what's new in a number of diagnoses seen in primary care
- Discussed new trends in primary care models