

Pennsylvania Academy of Family Physicians testimony for House Professional Licensure and House Health Committees joint informational meeting on improving access to health care

March 7, 2024

Honorable Chairmen and Members of the House Professional Licensure and Health Committees, on behalf of our more than 6,000 family physician, resident, and student members, we are delighted this meeting has been called.

Pennsylvania, with its 10 medical schools, 55 Family Medicine Residency Programs, and a diverse workforce engaged in various practice models, stands as a key hub for nurturing the future generation of Family Physicians.

The PAFP has and will continue to work closely with the Department of Health's Bureau of Primary Care to expand Family Medicine residency opportunities and engage in direct outreach in the communities our physicians serve.

## **Challenges**

The PAFP, for many years, has and will continue to work with you in addressing structural problems that inhibit the physician/patient relationship. With your help, we have made strides in addressing prior authorization reform, but more can and should be done to ensure access to high quality, timely patient care.

The credentialing processes imposed on physicians by health insurance providers take physician time away from patients, thus delaying access to quality health care. The PAFP supports legislation that would streamline

health insurer credentialing processes and address other administrative hurdles to ensure timelier patient care.

Additionally, prohibiting the use of non-compete clauses, or restrictive covenants, in health care provider employment contracts would empower physicians with greater career options, helping to ensure better access to and continuity of care for patients across the Commonwealth.

Non-compete contract clauses negatively impact employed physicians and other health care providers by limiting their ability to switch employers, continue seeing their patients, and practice medicine in their home communities. This leads to the interruption of quality patient care and the physician-patient relationship, especially in rural and underserved communities where access to quality health care is already challenging.

Let's keep working together to relieve Pennsylvania's physicians from administrative burdens that delay the delivery of high-quality health care.

Family Physicians, with their comprehensive training in all facets of medicine, serve as the cornerstone of our healthcare system, epitomizing a profound commitment to their patients.

We encourage you to think in terms of fostering a health care system that prioritizes primary care as a cornerstone of overall health. With this as your baseline hypothesis, and our unyielding commitment to ensuring the highest quality health care for all, we can improve the health of Pennsylvanians now and in the future.

## Scope of Practice

We must resist simplistic solutions that overlook the intricacies of medicine. Despite medical breakthroughs, a paradigm shift is necessary to truly focus on advancing the physician-led primary health care team. This shift can pave the way for eliminating inequalities in health care, whether due to injustice or simply based on one's zip code.

As Dr. Martin Luther King, Jr. stated, "Of all the forms of inequality, injustice in health care is the most shocking and inhumane."

The PAFP strongly opposes permitting mid-level providers to practice independently without the oversight of a physician. Patient safety should guide any discussion about improving access to care, especially for our most vulnerable patients.

While acknowledging the valuable contribution of Certified Registered Nurse Practitioners (CRNPs) as our colleagues within the physician-led model of care, we respectfully differ on the elimination of collaborative agreements in Pennsylvania. These agreements serve as a crucial safety net by providing physician support to CRNPs when faced with diagnostic and treatment complexities beyond their training. All patients deserve the assurance of comprehensive care and the highest level of expertise in managing their health.

CRNPs are utilized in current employed models to care for smaller patient panels that are less complex; however, this does not prepare them for the multiple complexities of high-risk populations in undeserved regions and health care deserts where referrals are not readily available. We firmly believe eliminating collaborative agreements is not the solution to improving health care access, despite claims to the contrary.

While CRNPs are an essential component of the primary health care team, they are not a one-to-one replacement for physicians when determining the adequacy of the available workforce due to the significant differences in their education, training, and skill sets.

We, instead, encourage effective, sustainable solutions that don't jeopardize patient safety by disregarding the critical need for physician oversight of midlevel providers.

Likewise, Family Physicians value psychologists as an integral part of their patients' health care team. Family physicians are often the first point of care for a patient's mental health and behavioral issues.

The connection between physical and mental health is undeniable. Family physicians' education and training includes extensive pharmacological training that makes them highly qualified and well-equipped to prescribe medications for mental illness, pain management, and opioid use disorder,

while managing the complex intricacies of balancing mental health and physical health treatment and medications.

The PAFP supports collaboration between physicians and mental health professionals to ensure the highest quality care for patients.

We must continue to work together on alternative approaches to providing the highest quality of care for all Pennsylvanians, without compromising patient safety.

## Telemedicine and AI

The promise of technology cannot be overlooked. The Covid-19 pandemic has catapulted the world into a virtual age previously unimagined. And despite its obvious limitations, the entire health care sector must look to harness the lessons learned and move forward in areas that can foster greater access to care.

Artificial intelligence too will have an enormous influence on health care in the future, advancing diagnostic and treatments, as well as patient education. State policies to ensure quality and accessibility of telemedicine and ethical use of AI are complex topics the Pennsylvania General Assembly must grapple with to ensure the best health care possible for all Pennsylvanians.

## <u>Importance of and Investment in Primary Care</u>

Critical to this entire discussion, is the substantial evidence that supports the idea that countries that invest in primary care tend to have better health outcomes. Low investment in primary care is a systemic issue that requires a long-term, sustainable, and comprehensive fix.

Primary care is the first point of contact for individuals seeking health care. Primary care physicians conduct more office visits and provide the most comprehensive set of health care services than any specialty, lowering costs and improving utilization of health care services. Here are some reasons why investing in primary care is associated with better health:

1. **Prevention and Health Promotion:** Primary care emphasizes preventive measures and health promotion. Regular check-ups,

- vaccinations, and early detection of diseases can lead to better overall health outcomes and reduced health care costs in the long run.
- 2. **Continuity of Care:** Primary care providers establish long-term relationships with patients, enabling them to better understand their medical history, lifestyle, and individual needs. This continuity of care contributes to more effective management of chronic conditions and overall health.
- 3. **Early Detection and Management:** Primary care is often the first line of defense in identifying and managing health issues before they become more severe. Timely intervention can prevent the progression of diseases and complications.
- 4. **Coordination of Care:** Primary care providers coordinate and manage health care services, ensuring that patients receive appropriate and timely referrals to specialists when needed. This coordination helps in the comprehensive and efficient management of health conditions.
- 5. **Accessibility and Affordability:** Primary care services are typically more accessible and affordable than specialized care. This accessibility encourages individuals to seek medical attention earlier, leading to better health outcomes.
- 6. **Population Health:** A strong primary care system is associated with improved population health. Countries with a robust primary care infrastructure often have lower mortality rates, better control of infectious diseases, and improved overall health indicators.

Thank you for the opportunity to share our thoughts and concerns. We look forward to continuing the discussion and working with you to address the many challenges faced by both physicians and patients in rural communities across Pennsylvania. It is our shared goal to ensure optimal health for all Pennsylvanians.