



ADVANCING INTEGRATED HEALTHCARE

Taking Action: Building Primary Care Access and Capacity

2023 Annual Report
Care Transformation Collaborative of RI



MESSAGE FROM THE PRESIDENT

It's no secret that Rhode Island's primary care system is in crisis. Our industry is experiencing pressure at new levels in our post-pandemic world—from record rates of provider burnout, to pandemic practice closures, to difficulties filling staff vacancies, to low reimbursement rates and high administrative requirements, to early retirement decisions, all exacerbated by the slow trickle of new physicians and primary care practice staff entering our workforce. The ripple effects are staggering. RI is expected to see a shortfall of about 100 primary care doctors—11% of our workforce—by 2030. This will leave as many as 200,000 Rhode Islanders without access to primary care, according to recent reporting by *The Public's Radio*.

As the state's dedicated primary care transformation organization, we are uniquely positioned to not only understand these challenges, but develop and lead impactful initiatives that meet our industry's needs. Over the last two years, our Care Transformation Collaborative of RI (CTC-RI) has been at the forefront of statewide discussions around our workforce crisis and planning sessions to take action. It's not just about meeting the needs of current practices—it's about intentional programs, systems, and decisions that will bolster our system long-term. Our effort has been hyper-focused on building a stronger, more robust primary care delivery system that supports RI's needs.

At the forefront of our effort is our new CTC-RI Primary Care Workforce Task Force, which convenes leadership from local training programs for physicians, nurse practitioners, and physician assistants, and collaborates with primary care experts and state programs focused on healthcare workforce. Our diverse Task Force is developing a strategic plan for bolstering our primary care workforce that will meet the state's population health needs, which you'll read about in this report.

And as our Task Force met regularly since its early 2023 launch, CTC-RI has continued working diligently to support primary care investment, bolster our workforce through new initiatives and programs, and deepen our community-centered work to improve care. Throughout this report, we share powerful examples of the real work happening in RI through CTC-RI to address and respond to our industry's needs.

Together, our work is guided by our shared vision of building a strong and robust primary care delivery system that recruits, trains, retains, and sustains a pipeline of primary care providers delivering exceptional, accessible, patient-centered care.

As we move through 2024, our efforts to transform our system continue. While we build, support, and advocate for advancements in primary care, we continue building a stronger, more resilient care system to support RI today and tomorrow.

With care,

Peter Hollmann, MD
President, Board of Directors





“CTC-RI provides a forum for primary care providers, payers, and other interested parties to collaborate on best practices that empower primary care to best serve Rhode Islanders. CTC-RI has a track record of success and Rhode Island is positioned to make headway on the challenges facing primary care because we have CTC-RI. I am proud to co-convene the organization.”

**– Cory King, MPP, Commissioner
Office of the Health Insurance Commissioner**

“I applaud CTC-RI's vision of a thriving primary care system that ensures every person in Rhode Island has equitable and affordable access to excellent health. CTC-RI's vision aligns closely with that of the State's Medicaid Program, where we're focused on enhancing access to care for low-income individuals and families.”

**– Kristin Sousa,
Medicaid Program Director
Executive Office of Health and Human Services**

“As Finance Committee chair, I'm charged with reviewing CTC-RI's ongoing investments. Month over month, I'm astounded by the sheer amount of financial support our organization delivers to the primary care community. CTC-RI doesn't just talk about supporting primary care, with funding and resources, it's actively strengthening Rhode Island's primary care base.”

**– Noah Benedict, MHL, President and CEO,
RI Primary Care Physicians Corporation**

“We are grateful for our ongoing collaboration with CTC-RI, which has allowed us to broaden our support for pediatric providers in Rhode Island. Thanks to this partnership, we are better able to assist providers in their professional development and in delivering high-quality care to children and families throughout the state. We look forward to our continued collaboration.”

**– Jennifer L. Mann, MPH, Executive Director,
American Academy of Pediatrics, Rhode Island Chapter**



“As a primary care provider, I witness the unfolding crisis in access to primary care daily. As a legislator, I will advocate for the policies needed to safeguard and improve that access.”

– State Senator Pamela J. Lauria,
Secretary, Senate Committee on Health and Human Services
Member, CTC-RI Primary Care Workforce Task Force

“CTC-RI is positioned to become the directional leader of primary care reform in Rhode Island.”

– Al Charbonneau, MPS, Executive Director,
Rhode Island Business Group on Health

“The Care Transformation Collaborative has effectively advanced primary care practices and their shift from volume-based payments to value. Innovative approaches such as the patient-centered medical home model of care, integrated behavioral health and addressing health related social needs have enhanced the delivery of primary care in RI. Post-pandemic, a roadmap to securing an adequate primary care workforce and newly broadened roles for community health workers are CTC-RI’s hallmark.”

– Domenic Delmonico, MBA, Executive Director,
RI Medicaid, Tufts Health Plan

“CTC-RI is an invaluable partner for us as we endeavor to provide access to primary care that is high-quality, equitable and affordable. Too often the healthcare system can feel fragmented, but CTC-RI is instrumental in bringing stakeholders together and coordinating innovative efforts to support, enhance, and integrate primary care services for Rhode Islanders.”

– Farah Shafi, MD, Chief Medical Officer,
Blue Cross & Blue Shield of Rhode Island

“CTC-RI has hit the mark over and over again by bringing resources and attention to the most critical issues facing providers, payers, and the healthcare system as a whole. By targeting practice transformation, physician burnout, the primary care shortage, eConsults, and still making time for regularly scheduled learning forums for providers, CTC-RI has shown itself to be a true champion of better healthcare and a better system for all.”

– Christopher Ottiano, MD, Medical Director,
Neighborhood Health Plan of Rhode Island

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ADVANCING INTEGRATED HEALTHCARE

ABOUT

MISSION

The mission of CTC-RI is to support the continuing transformation of primary care in Rhode Island as the foundation of an ever-improving integrated, accessible, affordable, and equitable health care system. CTC-RI brings together critical stakeholders to implement, evaluate and spread effective multi-payer models to deliver, pay for and sustain high-quality, comprehensive, accountable primary care.

VISION

Rhode Island has a thriving primary care system that ensures every person has equitable and affordable access, engages patients and families as active partners, and results in excellent health for patients, families, and communities.

OVERVIEW

Convened in 2008 by the Office of the Health Insurance Commissioner (OHIC) and the Executive Office of Health and Human Services (EOHHS), CTC-RI began its work with five pilot primary care practice sites, has since grown to support 237 primary care practice sites across RI through various initiatives and programs, including internal medicine, family medicine, pediatrics, and most recently, practices that care for pregnant patients. More than 900,000 Rhode Islanders receive care from patient-centered medical home (PCMH) practices that have been supported by CTC-RI or our pediatric initiative, PCMH-Kids.

In 2015, CTC-RI was incorporated as a 501c3, establishing a board of directors as its governing body. CTC-RI is supported by funding from public and private payers in Rhode Island, along with grant funding from government and non-governmental sources.

Attendees at our 2023 Annual Conference



THE STATE OF PRIMARY CARE IN RHODE ISLAND

CTC-RI task force addresses primary care workforce crisis

Rhode Island is currently experiencing a historical shortage of primary care providers (PCPs), leading to challenging workloads for current teams and obstacles to finding care for patients. [Projections from the Robert Graham Center](#) show Rhode Island will need nearly 100 more PCPs by 2030, an 11% increase in the workforce, to maintain current rates of utilization.

The situation has grown much worse emerging from the pandemic. Several local primary care practices have closed their doors, providers are retiring early or near retirement, providers are joining for-profit practices with significant venture capital funding, and the “great resignation,” has made it increasingly difficult for practices to hire nurses, medical assistants, behavioral health clinicians and other key staff. This has led to even higher burnout among PCPs. Finally, since 2019, Rhode Island’s population has increased by 35,576 residents in need of primary care, further exacerbating the situation.

To help better understand this urgent issue and identify ways to address this challenge, in early 2023, CTC-RI formed a Primary Care Workforce Task Force to meet regularly and help guide the primary care industry and state forward.

The Task Force convenes leadership from Rhode Island training programs for physicians, nurse practitioners, and physician assistants, and collaborates with primary care experts and with state programs focused on healthcare workforce. Together, the diverse Task Force developed a strategic plan for recruiting, training, retaining, and sustaining a primary care workforce that will meet the state’s population health needs.

Co-chaired by CTC-RI board members Jeffrey Borkan, MD, PhD, Assistant Dean of Primary Care-Population Medicine and Denise Coppa, PhD, APRN-CNP, FAANP, FAAN, Family Nurse Practitioner Track Coordinator and Project Director, Academic-Clinical Partnership at the RI Nursing Education Center, the Task Force represents unique academic-clinical partnership and collaboration.

The strategic plan, being released in 2024, focuses on six goals:

1. Reform payments and incentives to primary care providers to create specialty and regional parity.
2. Establish baseline data and targets for primary care workforce using existing and to-be-developed data sources for ongoing monitoring.
3. Increase the recruitment of medical students, residents/fellows, nurse practitioners and physician assistant trainees entering primary care. Reduce tuition and student debt for providers entering Primary Care in Rhode Island.
4. Expand primary care provider workforce diversity, equity, and inclusion.
5. Increase the number of high-quality primary care training sites who are willing to train the next generation of primary care students and trainees.
6. Enhance onsite clinical training in advanced patient-centered medical home principles such as team-based care, integrated behavioral health, practice transformation, and payment reform.

“It was the first time ever that the program directors of colleges and universities such as Brown University, University of RI, Salve Regina University, and Johnson and Wales University met to discuss the current state of primary care here, along with their program capacity, challenges, and potential solutions.”

– Debra Hurwitz, MBA, BSN, RN,
CTC-RI Executive Director

“The primary care crisis is here and will not be solved without coordinated and thoughtful action. The health of the population of Rhode Island is of paramount importance. To ensure it, we need primary care access for all Rhode Islanders.”

– Jeffrey Borkan, MD, PhD,
co-chair of the Task Force

Among the Task Force’s recommendations includes two key 2024 legislative priorities: a scholarship program for primary care students who commit to practicing in RI, and increased financial support to clinical training sites. Both priorities have been introduced as proposed legislation during the 2024 General Assembly session, along with additional, supportive primary care and health care workforce proposed legislative measures.



TARGETED INVESTMENTS IN PRIMARY CARE DRIVE HEALTH IMPROVEMENTS

Throughout the COVID-19 pandemic, Rhode Island saw alarming declines in pediatric well-visit rates, immunization rates, and lower rates of important health screenings. The Medicaid Pediatric Healthcare Recovery Program was created in response to help address these challenges while supporting the recovery of practices statewide.

After a successful first round, the state’s FY2023 budget continued funding the program. Medicaid, in partnership with CTC-RI, offered a 12-month incentive program (October 2022-2023) to improve immunization and lead screening results and improve capacity to assist children and families with behavioral health needs. The 52 participating practices showed great performance progress over the 12-month program.

Practices received practice facilitation support, which consisted of practice-specific discussions on immunization and lead screening performance results, as well as practices’ needs around responding to behavioral health concerns. As a group, childhood immunizations and lead screenings improved across all categories. Among the successes, many practices significantly increased 7th grade readiness immunizations, with some practices showing 30-40% rate increases. Among many success strategies, practices implemented patient, provider, and staff education, assigned dedicated staff to focus on the project, and utilized KIDSNET data reports.

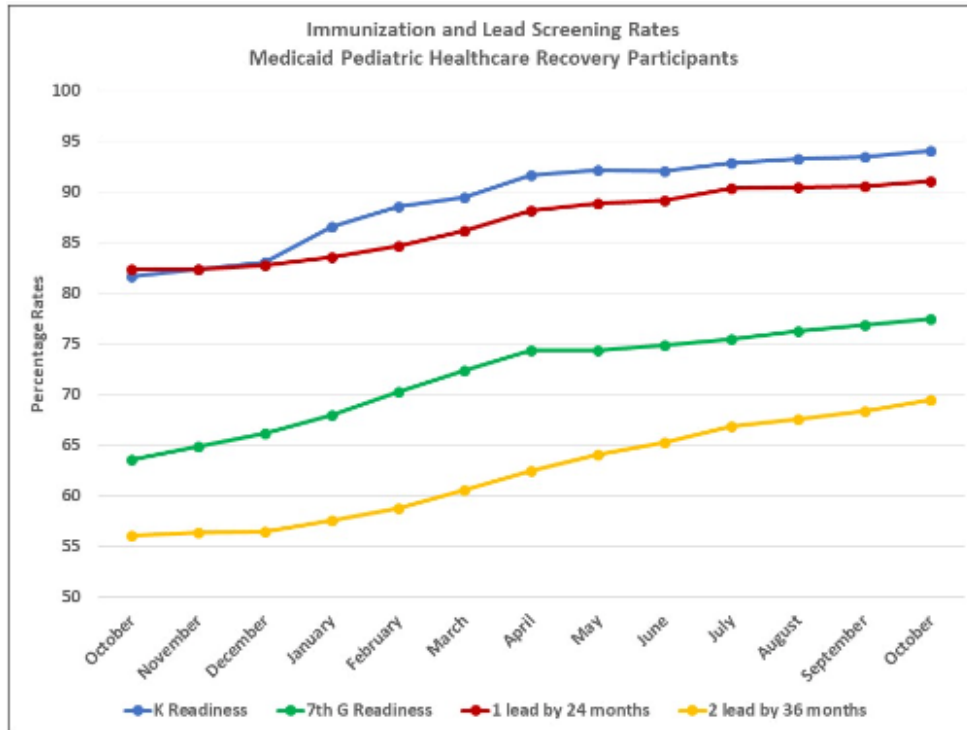
Notably, this program highlighted the importance of accurate data. According to Dr. Elizabeth Lange, pediatrician at Coastal Medical-Waterman Pediatrics and co-founder of PCMH Kids, the KIDSNET database and staff from the RI Department of Health were invaluable partners in this work. It quickly became clear that having each patient linked in KIDSNET to the proper pediatric medical home was the key foundation to improving vaccination rates.

Payment Reporting Periods	Percentage of practices meeting 3 out of 4 targets/improvement targets
October 2022	Baseline data reported
January 2023	75%
April 2023	75%
July 2023	77.5%
October 2023	80%

“In a busy pediatric practice, especially with catch-up inherent with deferred care during the pandemic, time and staffing are a premium. Our practice facilitators played a key role helping practices access their vaccine data, build workflows for contacting patients and to make appointments for well-child and vaccine visits.”

**– Dr. Elizabeth Lange,
Coastal Medical–Waterman Pediatrics and
co-founder of PCMH Kids**

Along with improvements in immunization and lead screening rates, practices were paid to participate in a six-month ECHO® Behavioral Health Learning Initiative, a collaborative model of medical education and case reviews, with topics ranging from school avoidance to anxiety to suicide risk and prevention. All practices participated in these sessions to help support expert-level care to patients.



The program has contributed to financial stability for practices by awarding approximately \$14.4 million in American Rescue Plan Act funds to participating practices across the two phases of the program, from March 2022 through October 2023. Practices also participated in technical assistance sessions to support their behavioral health work and received practice facilitation to support their efforts to increase attendance at well-child visits and performance on immunization and lead screening measures. EOHHS believes that the ongoing stability of these practices and their increased capacity to deliver these services is a major benefit to the state and to children and their families. While the federal funding that made this possible was inherently temporary, the lessons learned and enhancements to practice operations will continue to benefit the state and Rhode Island children for years to come.

– Amy Katzen, Director of Policy and Strategy,
Executive Office of Health and Human Services

BOLSTERING THE WORKFORCE

Supporting the nursing student pipeline to bolster the primary care workforce

As CTC-RI works to bring industry leaders and voices to the table to address the state’s primary care workforce crisis, one important avenue to address is our pipeline for nurse care managers (NCMs) in the primary care setting. To date, nursing education has primarily been focused on hospital-based care. After graduation, 60% of nurses work in the acute care setting, whereas only 18% work in ambulatory care settings. To help primary care practices provide quality care and better outcomes, nursing schools need to collaborate with primary care practices to offer intentional nursing field placement education opportunities and properly trained educators and NCMs to lead them.

Our primary care sites are well-positioned to provide nursing students with an exceptional primary care learning experience. Since 2017, with funding from UnitedHealthcare, CTC-RI has trained over 190 nurses using the GLearn online program which was developed by Geisinger to train their own nurses to become NCMs. The GLearn learning system contains 18 foundational case management modules with integration of learning activities, companion guides, a capstone presentation and peer learning sessions with NCM faculty to assist with applying what they have learned to the RI environment.

Beginning in 2022, Dr. Ginette Ferszt began consulting with CTC-RI to pilot a new program to help build up the nursing pipeline to support primary care. Nursing students from both University of Rhode Island and Rhode Island College were assigned to work with experienced NCMs who served as mentors for their primary care experiences. Students additionally completed our core curriculum training program, GLearn, and met with CTC-RI NCM faculty member, Jayne Daylor, RN, MS, who provided the nursing students with additional opportunities to understand the role of the NCM in primary care.

“My work as a CTC-RI consultant is focused on having nursing students precepted by experienced nurse care managers who are working in primary care practices and have completed the nurse care manager GLearn core curriculum training program. I continue to be a member of the American Nurses Association and the Rhode Island State Nurses Association and actively support their efforts to advocate for legislation that will increase the workforce,” said Dr. Ferszt.

“CTC-RI is continuing to make major strides in addressing issues in the delivery of primary care and is well-positioned to be a leader in supporting the education of nurses to move into the positions of nurse care managers”

—Ginette Ferszt, MSN, Professor and Psychiatric Clinical Nurse Specialist at University of Rhode Island





Through CTC-RI's work with Dr. Ferszt, students and clinicians have provided important feedback to help develop a stronger pathway for nursing students to train in primary care practices. The following comments illustrate the benefits of this pilot initiative from the perspective of a student, nurse manager preceptor and a URI clinical faculty member.

"This experience allowed me to become aware of the factors that can influence a patient's health. I never thought much about what was going on behind the scenes (with family, availability of resources, etc.) and had a narrow focus on just treatment of the patient."

– Student

"All nursing students should have this clinical experience. Even if I work in a hospital when I graduate, I will think of the patient situation very differently and be more attentive to what their needs will be after discharge."

– Student

"It was gratifying to see my student make connections with GLearn... it is satisfying to see the light bulbs go off and the student grasping concepts in the curriculum and applying them."

– Nurse Care Manager preceptor

"My student was able to see the value of case management... she recognized the skills needed for that position. The home visits were invaluable and were eye-opening for the student."

– Clinical Instructor, University of Rhode Island

Dr. Ferszt suggests that partnerships between healthcare organizations, educational institutions, government and industry associations are essential in developing long-term solutions to address the critical shortage in the healthcare sector. Some important solutions that have been identified are funding for capital projects that will increase laboratories and simulation, increase in salaries for nurses, grants and scholarships to increase diversity, payment for transportation and daycare for associate degree nurses to obtain their baccalaureate degree, and incentives for retired nurses and nursing faculty to return to the workforce.

BOLSTERING THE WORKFORCE

12-month program helps Rhode Island pediatricians navigate rising rates of child obesity

Facing a mounting primary care workforce shortage, CTC-RI has launched programs that respond to the growing needs of the workforce. As more RI children become overweight or obese since the onset of the pandemic, one of those needs expressed by pediatricians is help navigating the difficult topic of weight management.

In fall 2023, CTC-RI completed its first 12-month pediatric weight management pilot program, funded by Point32Health, the parent company of Tufts Health Plan and Harvard Pilgrim Health Care. The “Pediatric Weight Management ECHO®” helped practices become better equipped to intervene and positively impact children with weight management concerns. Project ECHO® (Extension for Community Healthcare Outcomes) is a collaborative model of medical education and case reviews that helps clinicians provide expert-level care to patients.

Thanks to funding, the pilot studied what happened when pediatric care teams were connected with behavioral health providers on-site in their practices, complemented by focused learning around this sensitive topic. The results were impressive—not only did pediatricians and care teams feel more confident navigating this topic with patients, but results show that families were satisfied, felt respected, and were more comfortable discussing the weight of their children.

“We saw an opportunity to figure out how to improve care for children who are overweight or obese by taking a behavioral health approach to behavior change. We found tremendous success by bringing different pediatric practices together to problem-solve similar challenges, brainstorm ideas, share case studies, and engage in a focused learning curriculum over the last 12 months”

– Debra Hurwitz, MBA, BSN, RN,
CTC-RI Executive Director

“Talking about weight is never fun... it’s easy for our patients to feel judged or uncomfortable. Making a connection and letting your patients know they are not alone (instead of just lecturing them) helps to empower more change and increases the chances of continued engagement.”

– Dr. Jon Dooley, St. Joseph Health Center - Pediatric Clinic



The program empowered seven primary care practices across the state with new skills, knowledge, and comfort to address this delicate topic with patients and their families. Participating practices included Anchor Pediatrics (Lincoln), Atlantic Pediatrics (Cranston), Santiago Medical Group (North Providence and Pawtucket), St. Joseph Health Center (Providence), Tri-County Community Action Agency (Johnston, North Providence, and Wakefield), Waterman Pediatrics—Coastal Medicine (East Providence) and Westerly Medical Center (Westerly).

“We joined this awesome collaborative to enhance the way we approach weight management in our practice. By learning from local experts and engaging in group discussion, we gain insight on innovative ways to work together with our patients when tackling this difficult topic,” said program participant Jon Dooley, MD FAAP, a pediatrician at St. Joseph Health Center - Pediatric Clinic.

Practices joined monthly learning sessions on topics ranging from cultural considerations to impacts on mental health to empowering parents, completed pre- and post-program assessments that measured impact, received practice facilitation support, and more.

TRANSFORMING CARE

Taking action: Leveraging pharmacists and primary care teams to improve patient health

In fall 2022, CTC-RI and the RI Department of Health (RIDOH), in collaboration with URI College of Pharmacy, launched a two-year Pharmacy Quality Improvement Initiative focused on improving the care and management of patients with diabetes through team-based care. Using Professional Use Continuous Glucose Monitoring (ProCGM), practices are working to improve glucose control, implement more effective medication management, address gaps in care and health disparities and decrease potential emergency department use based on high or low glucose episodes. Pharmacists and practice team members are leading this transformation project work in the following practices:

- Anchor Medical Associates
- Coastal Medical Physicians
- Medical Associates of RI
- Miriam Hospital Ambulatory Clinic
- Providence Community Health Center
- RI Primary Care Physicians Co.

In just one year, the results have been significant, with marked improvements in glucose control as measured by a reduction in A1C from an average of 9.1% to an average of 8.0%. In year two, the practice teams aim to increase utilization over time and spread these benefits to more patients and practices

“The Pharmacy Quality Improvement Initiative was an opportunity for us to develop a chronic disease management program that empowered the embedded pharmacist to practice at the top of their license and make individualized, data-driven therapeutic recommendations. We hoped to create a model that would be sustainable, accessible, and align with our efforts to provide high-quality, patient-centered care.”

– Bradford Pease, PharmD CDOE, Medical Associates of Rhode Island



In recognition of their work and impact, health care leaders across the state recognized and honored the six participating pharmacists with the 2023 Grace Diaz Blue Light Award, coinciding with Rhode Island World Diabetes Day. Congratulations to the honored pharmacists:

Bradford Pease, PharmD, CDOE, CVDOE, Medical Associates of RI

Krystal Bevilacqua, PharmD, CDCES, CDOE, CVDOE, Coastal Medical

Alex Gianfrancesco, PharmD, CDOE, CVDOE, RI Primary Care Physicians Corporation/Integra

Patricia “Kish” Hoffman, PharmD, BCPS, CDOE, CVDOE, Miriam Hospital Suite C Ambulatory Clinic

Kelley Doherty Sanzen, PharmD, PAHM, CDOE, Pharmacy Practice Facilitator

Lillian Nieves, PharmD, Providence Community Health Center

Kenny Correia, PharmD, BCACP CDOE, CVDOE, Anchor Medical

TRANSFORMING CARE

Taking action: Increasing pediatric integrated behavioral health capacity using community health workers

Launched in summer 2023 and funded by Blue Cross & Blue Shield of RI and UnitedHealthcare and in collaboration with the Hassenfeld Child Health Innovation Institute at Brown University, CTC-RI launched a funding and training opportunity for six practices to increase their pediatric integrated behavioral health (IBH) capacity.

Training community health workers (CHWs) in behavioral health care coordination expanded a practice's IBH team. Specifically, this project helped CHWs work effectively with families as part of a primary care team, and trained them to screen for behavioral health needs, health related social needs, registry management, tracking of high-risk patients, connecting with schools and early intervention, and helping families connect with community-based services.

The project incentivized practices to engage in clinical training and practice transformation support to implement elements of the TEAM UP model (Transforming and Expanding Access to Mental Health Care in Urban Pediatrics) of pediatric integrated behavioral health care. TEAM UP for Children at Boston Medical Center has worked to build the capacity of pediatric primary care to deliver high-quality, evidence-informed integrated behavioral health care to children, families and expand the practice team. This involves training CHWs for their role supporting the behavioral health needs of children and families, training for all members of the practice on team-based care, and monthly practice facilitation. CTC-RI partnered with staff from TEAM UP and Hassenfeld for program training, implementation and evaluation support.

Participating practices assigned a CHW to the project, supported by a dedicated practice team including an IBH clinician, practice leader, and other staff, who participated in trainings, case consultation, skill development, and more.

The project is ongoing through August 2024, and includes Coastal Medical–Bald Hill Pediatrics, Coastal Medical–Waterman Pediatrics, CCAP, Family Care Center–Care New England Medical Group, Wood River Health, and Pediatric Primary Care–Hasbro Children's Hospital.

"I've gained a lot of knowledge from the material provided throughout these meetings, and I have also applied it to what I do in my work setting. I discuss it with my supervisors, even with the team because we have group meetings. So it's stuff that we can work on."

–Mayra Segarra, IBH Clinician,
Comprehensive Community Action
Program



TRANSFORMING CARE

Taking action: Reducing administrative burden through improved prior authorization process

Rhode Island's Office of the Health Insurance Commissioner (OHIC) convened the Administrative Simplification Task Force in fall 2022 to seek input from organizational representatives who understand the operational and policy complexities of the prior authorization process. Prior authorization is the prospective assessment of a health care service or medication for medical appropriateness prior to that service being rendered. OHIC's purpose in this Task Force was to gain a better understanding of the existing prior authorization environment. The Task Force's charge was to gather input and recommendations on prior authorization requirements and processes.

In 2023, CTC-RI convened a Prior Authorization Steering Committee, at the request of OHIC, to develop concrete consensus recommendations that take into account health plans/payers, providers and patients' needs for a more effective, less burdensome and resource-intensive prior approval process, ultimately supporting evidence-based, affordable, high-quality care and reducing unnecessary/unsafe service and medication utilization. The deliverable was a final report—a culmination of months of work by committee members who represent health insurance companies, pharmacists, and health care organizations.



After extensive review, the following six Steering Committee recommendations were made to OHIC:

- 1. Reduce the prior authorization volume**
- 2. Improve the data collection on prior authorization**
- 3. Create on-going statewide advisory committees**
- 4. Evaluate therapeutic substitution at the pharmacy**
- 5. Implement technologies that improve the process**
- 6. Identify and reduce "PA-like" processes (e.g. referral requirements)**

OHIC reconvened the Administrative Simplification Task Force in late 2023. The Task Force used CTC-RI's recommendations as the basis of its review in late 2023 to early 2024. OHIC will prepare a report to the RI legislature this year, and will likely be able to implement some of the recommendations. This has been an excellent example of the power of CTC-RI to convene and reach consensus across diverse stakeholders.

TRANSFORMING CARE

Taking action: Improving access to specialists through primary care collaboration

When a patient's care needs discussed during a primary care visit may need follow-up or support by a specialist, patients may experience frustrating care gaps, lagged communication, or confusion in navigating their next steps upon leaving the primary care office. To bring systems of care together, CTC-RI worked with the American Association of Medical Colleges to rollout a focused two-year initiative, including participation from Blue Cross & Blue Shield of Rhode Island, UnitedHealthcare, and Tufts Health Plan/Point32Health, Lifespan (LPG, Coastal Medical) and Brown Physicians Inc., along with Integra Community Care Network (Care New England, Rhode Island Primary Care Physicians Corporation, and South County Health).

Aimed at improving care at the interface of primary and specialty care, this initiative helps bolster care in two ways. If a patient needs to see a specialist about a specific clinical issue, the program utilizes an enhanced referral process—the specialist has clear access to the clinical questions and relevant data in the patient's electronic medical record to improve the in-person specialist visit experience. If the primary care provider has a clear clinical question for a participating specialist to help better manage a patient's care plan, there is an easy-to-use eConsult program with the specialist in place where the specialist helps make a recommendation and next steps so the primary care provider can continue managing the patient's care.

"Rhode Island patients experience one of the highest rates of specialist referrals in the USA," said Paul Larson MD, MS, MBA, CPE, Chief of Primary Care at Lifespan. "This high rate of referral contributes to delays accessing specialty care for those who need it. Frequently, with the clinical support provided by specialists through electronic consultation 'eConsult,' primary care clinicians can maintain responsibility for ongoing care, without the costs and delays experienced with in-person specialty visits."





For a Lifespan patient who has experienced years of fluctuating joint pain and swelling that's increased in recent months, this collaboration proved valuable. Initial lab testing indicated the possibility of a systemic inflammatory disorder. Traditional referrals to rheumatology may require months of waiting followed by a predictable battery of laboratory tests. An eConsult to Rheumatology answered within 8 hours provided a recommended list of secondary laboratory testing for autoimmune and related rheumatologic diseases together with initial treatment and monitoring considerations. The patient appreciated an expedited evaluation which avoided scheduling delays and the costs associated with in-person specialty visits.

"The transition of primary care to a value-based paradigm, shifts the focus from frequent, brief, in-person visits to a new paradigm focused on the needs of patients and communities for comprehensive, accountable, high-quality care at reasonable costs. This requires much greater collaboration and communication between specialists and primary care clinicians," said Dr. Larson. "Historically, many referrals to specialists lack a clear clinical question to address, completed testing that would enable higher value service, or agreement on long-term responsibility. eConsults incorporate elements to address these deficiencies using standard condition templates guiding questions and testing, with a statement of co-management preference."

This collaborative process helps improve timely and equitable access to specialty care, improve quality and experience for patients and providers, enhance primary care comprehensiveness, and control costs of care.

Lifespan experienced considerable interest and adoption by specialty departments with limited access for new patients and high volumes of low-value referrals. Lifespan now has 11 departments responding to eConsults and following the launch of Coastal Medical on Epic LifeChart, anticipates rapid adoption across primary care. Specialists are generous in their replies to primary care clinicians, usually responding the same day, with specific recommendations that many clinicians find educational. According to Dr. Larson, direct collaboration in program development with Integra as facilitated by CTC-RI enables sharing of best practice and standardization of department templates. Primary care clinician experience surveys indicate 100% of clinicians are satisfied/very satisfied with the eConsult response which enables ongoing patient care. The convening work of CTC-RI has engaged all regional payers in the coverage of eConsults for specialists and work is ongoing for primary care clinician services.

OUR 2023 IMPACT BY THE NUMBERS

\$6,802,924

Dollars obtained by CTC-RI to support team-based primary care transformation initiatives

\$1,356,143

Dollars directed by CTC-RI to support primary care initiatives

\$14,400,000

Dollars funded through the American Rescue Act, paid to pediatric and family medicine practices through two phases, driven by incentives participation in our Medicaid Pediatric Healthcare Recovery Program Behavioral Health ECHO[®] Series

190

Number of primary care practices supported through CTC-RI programs and initiatives, including internal medicine, family medicine, and pediatric practices

6,014

Number of participants in our 2023 conferences, meetings, and learning sessions

900,000+

Rhode Islanders served by practices that have been supported by CTC-RI programs and initiatives

Hundreds of participants learned and collaborated at CTC-RI's 2023 Annual Conference



BOARD OF DIRECTORS

Co-Conveners

Cory King, MPP, Office of the Health Insurance Commissioner
Kristin Sousa, Executive Office of Health and Human Services

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Christopher Ottiano, MD, Neighborhood Health Plan of RI
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Eugenio Fernandez Jr., PharmD, MBA, MPH, Asthenis (Pharmacy)
Amy Nunn, MS, ScD, Open Door Health (Primary Care, LGBTQ+)

Ex-Officio / At-Large

Jeffrey Borkan, MD, PhD, Alpert Medical School, Brown University

Ex-Officio / Provider

Thomas Bledsoe, MD, FACP, Brown Medicine

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