

# FAFP JANUARY MEMBER SPOTLIGHT

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We are at a critical juncture in the survival of physician-guided healthcare in the United States. As many contemplate or make the move to value-based healthcare, we've come to recognize that our current fee-for-service, volume-based method of delivering "care" is not sustainable from any perspective - cost, outcomes, or the health and well-being of both patients and physicians. What we need to understand, though, is that value-based care is more than simply closing a HEDIS Care Gap or properly coding a patient's burden of illness.

The sustainability created through true value-based care comes from valuing the components of the healthcare system - physicians, patients, providers, and staff.

Physicians and other healthcare workers are viewed as commodities and gears in the volume-based healthcare production machine, and patients are merely widgets the machine produces. None have inherent value, and they only serve to fuel the dwindling profits generated by the reimbursement codes the machine generates.

In a properly designed value creation system, the components' worth is acknowledged, and the concepts of "Family" and "Health" are brought back to Family Medicine and Health Care.

After 18 years of practicing full spectrum Family Medicine, mostly in rural Indiana, I've been an administrator the past 12 years: with insurers, a health system, and a large group physician

practice. The payer world introduced me to the concepts of population health management and value-based care and also demonstrated that these work best when driven by physicians, in particular PCPs like Family Docs.

For this second phase of my medical career, I've committed myself to the education, guidance and support of physicians and providers to move healthcare from volume to value and from episodic encounters to longitudinal relationships, all the while led by physicians. I currently serve as Executive Vice President of Population Health and Client Operations for a national firm that partners with large physician groups, health systems, and even payers to assist them in the transitional, transformative, and sustainable work of value-based care.

Family Medicine, when allowed to deliver as intended, incorporates many vital principles of "Family," including relationship, communication, and commitment. These facilitate the successful support of optimal health and well-being for our patients. We can treat all members of our patients' families, but we also treat the patients as if they are family. Since this committed relationship, cultivated through effective communication, creates value, PCPs engaged in such practice should earn the right of to have control over the medical premiums paid to ensure ("insure") value creation. After all, their delivery of high-quality care at the appropriate cost while providing patients a "cared for" experience is the definition of value. Changes in the structure and priorities of healthcare will allow this.

It doesn't stop there, though. If we don't attend to our physicians, their patients and our healthcare system suffer. Expectations and supporting processes must allow for optimization of the doctors' health and well-being, too. Building a bigger hamster wheel, cracking the whip around "productivity", or trying to find ways of squeezing in another 9921x visit all contribute to the devaluation, disengagement, and disenfranchisement of physicians. Couple this with the unfulfilled promise of the EMR and we have fostered an environment of cynicism, despair, burnout, and suicidal ideation.

Conversely, we can build physical and electronic environments that allow well-trained Family Physicians to do what they do best - diagnose, treat, and care for the entire patient with whom they have a longitudinal relationship. Likewise, we can deploy Easy Buttons in documentation and communication with care team members. These actions restore the physician's sense of purpose and autonomy in delivering high-quality patient care. When this occurs, we have healthy physicians applying family values to their patient relationships, producing better patient outcomes and sustainably engaged and satisfied physicians.

This is the vision that daily drives me.

*Dr. Hart lives in Fort Myers and is employed by Navvis Health.*