Family Medicine for America's Health is a new collaboration between the nation's eight leading family medicine organizations to drive continued improvement of the U.S. health care system and demonstrate the value of true primary care.

We represent:
American Academy of Family Physicians | American Academy of Family Physicians Foundation | American Board of Family Medicine | American College of Osteopathic Family Physicians | Association of Departments of Family Medicine | Association of Family Medicine Residency Directors | North American Primary Care Research Group | Society of Teachers of Family Medicine

For more information about Family Medicine for America's Health, please visit fmahealth.org

There is increasing evidence that engaged patients have better health outcomes, better care experiences and lower health care costs.

ACTIVATED AND ENGAGED PATIENTS = BETTER HEALTH • BETTER CARE EXPERIENCE • LOWER COSTS

SOURCES

CONTRIBUTE TO FAMILY MEDICINE FOR AMERICA'S HEALTH

Individuals and organizations can support Family Medicine for America’s Health by making a tax-deductible donation through the AAFP Foundation. Donate online at aafpfoundation.org/donatetoday and select Family Medicine, Medicine for America’s Health.
A STRATEGY FOR FAMILY MEDICINE’S FUTURE

We want to transform the family medicine specialty to ensure that we can meet the nation’s health care needs and, ultimately, improve the health of every American.

This means:
• Focusing the evolution of the patient-centered medical home;
• Advancing the use of technology;
• Ensuring a strong primary care workforce;
• Shifting to comprehensive primary care payment.

Family medicine’s strategic plan centers on seven core strategies to achieve these objectives. Implementing this plan will mean that people across the United States can expect family medicine, in collaboration with our primary care colleagues, patients, and other key stakeholders, to:

1. Show the value and benefits of primary care;
2. Ensure every person will have a personal relationship with a trusted family physician or other primary care professional in the context of a medical home;
3. Increase the value of primary care;
4. Reduce health care disparities;
5. Lead the continued evolution of the patient-centered medical home;
6. Ensure a well-trained primary care workforce; and,
7. Improve payment for primary care by moving away from fee for service and towards comprehensive primary care payment.

Family medicine cannot accomplish these core strategies alone. Achieving these objectives will require that we work together with our primary care colleagues, patients, policymakers, and other key stakeholders in health care.

We are organizing a volunteer workforce in six major areas: Practice, Payment, Workforce Education and Development, Technology, Research, and Engagement.

Learn more about how you can get involved at fmahealth.org.

DELIBERATING ON THE PROMISE OF PRIMARY CARE

We know that a strong primary care-based health system leads to:

BETTER HEALTH

The evidence shows that access to primary care can help people live longer, healthier lives.1

In 2008, one study estimated that about 127,617 deaths per year in the United States could be averted through an increase in the number of primary care physicians.2

In areas of the country where there are more primary care providers per person, death rates for cancer, heart disease, and stroke are lower and people are less likely to be hospitalized.3

BETTER CARE

Urban and rural communities that have an adequate supply of primary care practitioners experience lower infant mortality, higher birth weights, and immunization rates at or above national standards despite social disparities.4

An increase of one primary care doctor per 10,000 people can save the nation $100 million a year:
• Outpatient visits 5.0% • Inpatient admissions 5.0% • ER visits 10.0% • Surgeries 22%

Evidence also shows that primary care (in contrast to specialty care) is associated with a more equitable distribution of health in populations, crosses the whole person in both rural and urban settings.5

LOWER COST

A primary care system can cost less because patients experience fewer hospitalizations, less duplication, and more appropriate technologies.6

Health care spending is less for states with more primary care physicians and yet these states have more effective, higher-quality care.6

A health system that undervalues primary care has resulted in health care spending that is more than double that of other industrialized countries, yet America has a 32% rate of hospitalization that could be avoided by better primary care.7

In 2004, one analysis found that Medicare spending would be 33 percent lower for the 7,500 U.S. adults who have the highest health care costs.8

The evidence is clear: the time to act is now.

We can put the health back in health care by making America a place where Health is Primary.

Health is Primary is a three-year educational campaign to advocate for the values of family medicine, demonstrate the benefits of primary care, and drive patient activation. Led by Family Medicine for America’s Health, Health is Primary will use advertising, news media outreach, online communications, partnerships and stakeholder outreach to transform perceptions and behavior around health care and health care in America and foster awareness and action to support the essential role of primary care.

Family medicine wants to ensure that America is a place where Health is Primary. A place where:
• Doctors and patients work together in true partnership;
• With their patients and see and treat the whole person;
• Technology supports and fosters the connection between doctors and patients;
• Everyone has access to a primary care home where most, if not all, of their health needs can be met and a coordinated medical neighborhood that provides additional care when needed;
• Prevention and health promotion are as important as treating illness;
• Doctors are working in partnership with community leaders to address individual and population health;
• Health disparities are reduced by increasing access to primary care and;
• Financial incentives line up with good care and better health outcomes.

We can only improve health in America if we put patients at the center of the care. The campaign will provide specific tools to increase collaboration between patients and doctors on important health issues, including smoking prevention and cessation, nutrition and fitness, immunizations, and chronic disease management.

The campaign will travel to cities around the country to engage local stakeholders — patients, employers and policymakers — to accelerate transformation and expand access to true primary care.

To learn more, go to healthisprimary.org

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