



November 7, 2021

Rebecca Haffajee, JD, PhD, MPH  
Acting Assistant Secretary for Planning and Evaluation (ASPE)  
U.S. Department of Health and Human Services  
Office of the Assistant Secretary for Planning and Evaluation, Strategic Planning Team  
Attn: Strategic Plan Comments  
200 Independence Avenue, SW, Room 434E  
Washington, DC 20201  
Submitted via email to [hhsplan@hhs.gov](mailto:hhsplan@hhs.gov)

**Re: Draft Strategic Plan for Fiscal Years 2022-2026**

Dear Acting Assistant Secretary Haffajee:

On behalf of the American Academy of Family Physicians (AAFP), which represents more than 133,500 family physicians and medical students across the country, I write to provide comments on the Department of Health and Human Services' (HHS) [draft](#) Strategic Plan for fiscal years (FY) 2022-2026 as requested by a [notice](#) published in the October 7, 2021 *Federal Register*.

The plan outlines how HHS plans to achieve its mission through the following five strategic goals:

- 1) Protect and strengthen equitable access to high-quality and affordable health care
- 2) Safeguard and improve national and global health conditions and outcomes
- 3) Strengthen social well-being, equity, and economic resilience
- 4) Restore trust and accelerate advancements in science and research for all
- 5) Advance strategic management to build trust, transparency, and accountability

The AAFP is pleased that these strategic goals, as well as many of the strategic objectives and strategies underpinning them, align closely with our own priorities and goals. We share HHS' commitment to advancing health equity and addressing disparities in health outcomes. **Primary care physicians play an integral role in ensuring access to high-quality, affordable health care, improving population health and preparedness, connecting individuals to social supports, and restoring trust in science and evidence. To that end, we recommend explicitly incorporating strategies to invest in and strengthen our primary care system, as well as enhancing its connections with public health, behavioral health, social services, and the scientific research community.** Below we outline a number of areas where primary care should be incorporated to facilitate HHS' success in achieving these shared goals.

Protect and strengthen equitable access to high-quality and affordable health care

The AAFP [shares](#) HHS' commitment to improving equitable access to high-quality, affordable health care [for all](#). We are pleased that the strategic objectives associated with this goal focus on:

- increasing health care coverage and enrollment

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- reducing costs, including by facilitating the transition to value-based care
- improving health care quality
- addressing social determinants of health
- ensuring access to inclusive, culturally responsive, and linguistically appropriate care
- integrating behavioral health care
- bolstering the health workforce and addressing physician maldistribution
- modernizing health data systems and driving interoperability.

Evidence indicates that expanding health care coverage and enrollment facilitates access to and utilization of primary care services, which in turn improves health equity and outcomes while reducing health care costs.<sup>1,2,3,4</sup> Primary care physicians are uniquely positioned to address patients' unmet social needs and have increasingly begun to integrate behavioral health services into their practices. Additional investments in primary care, including the primary care workforce and the models that best support primary care practices, are therefore essential to meaningfully improving equitable access to high-quality, affordable health care. To further enhance this goal, the AAFP recommends adding the following strategies:

- **Ensure expansions in health care coverage are accompanied by policies, monitoring, and oversight that facilitate access to primary care.**
- **Increase beneficiaries' connections with primary care physicians to drive utilization and adherence to preventive care and other evidenced-based services.**
- **[Create](#) additional alternative payment model (APM) participation opportunities for primary care practices across payers, both for practices with and without experience participating in APMs that provide prospective or capitated payments.**
- **Facilitate and encourage access to telehealth services within patients' medical homes to ensure care continuity and high-quality care.**
- **[Target](#) additional training opportunities to settings, specialties, and programs with a proven track record of training physicians who practice in medically underserved areas.**
- **Reduce administrative and regulatory burdens for primary care physicians so they can focus on providing high-quality, comprehensive primary care to patients.**

#### Safeguard and improve national and global health conditions and outcomes

In light of the ongoing COVID-19 pandemic, as well as co-occurring crises related to [maternal health](#), [children's mental health](#), [reproductive health](#), and [opioid use](#), the AAFP strongly supports this goal. Investing in our nations' public health system, prevention, and preparedness are urgent, vital priorities. As frontline physicians, family physicians are integral to ensuring we are prepared for national health emergencies and can respond quickly and effectively to disease outbreaks. We appreciate that this goal is inclusive of preventing noncommunicable diseases, too. Primary care physicians also provide essential chronic care management and coordination services to patients, along with preventive care and counseling to promote healthy behaviors and overall wellbeing. HHS should:

- **Incorporate primary care into all preparedness and response plans, including those related to distribution of personal protective equipment, medical supplies, tests, therapeutics, and vaccinations.**
- **[Integrate primary care and public health.](#)**

- **Invest in and improve public health data systems and drive interoperability between public health and primary care information systems.**
- **Facilitate the transition to value-based care models that promote chronic care management and coordination and improve health outcomes.**
- **Consider and address the unique needs of community-based, independent primary care practices based on the important role they play in ensuring access to care, particularly in many under-served communities.**

Strengthen social well-being, equity, and economic resilience

The AAFP appreciates that the strategic plan repeatedly acknowledges how economic opportunity, the social and physical environment, and other factors influence individual and population health. This goal and its strategic objectives align closely with the AAFP's [policy](#) on Health in All Policies. We are pleased that the objectives and strategies underpinning this goal recognize the important role primary care plays in connecting patients to community-based resources, as well as the strong focus on trauma-informed health care and other services.

Restore trust and accelerate advancements in science and research for all

We strongly agree that HHS should center science and evidence-based interventions throughout federal health programs, including by relying on stakeholders like the AAFP to share evidence-based clinical recommendations. The Department should also strive to restore the public's trust in science. The COVID-19 pandemic has highlighted the growing distrust in science and government across the nation, as well as how misinformation and disinformation can undermine preparedness and public health. As trusted sources of health information, family physicians strive to combat misinformation about the pandemic, vaccines, and other health issues within their communities. Other community leaders have also been successful at countering health misinformation. We recommend the strategic plan include:

- **An objective detailing how HHS will strive to reduce the spread of [misinformation](#) and work with other Departments to address pervasive sources of misinformation and disinformation.**
- **Strategies for leveraging and supporting family physicians and other trusted community leaders to build trust in science and research, including by providing them with educational resources.**

Thank you for the opportunity to provide comments on HHS' Strategic Plan for FY 2022-2026. The AAFP looks forward to continuing to partner with HHS and its agencies to advance equitable access to high-quality health care and improve the health of the public. Should you have any questions, please contact Meredith Yinger, Senior Regulatory Strategist, at [myinger@aafp.org](mailto:myinger@aafp.org) or 202-235-5126.

Sincerely,



Ada D. Stewart, MD, FAAFP  
Board Chair, American Academy of Family Physicians

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<sup>1</sup> Hostetter, J., Schwarz, N., Klug, M. *et al.* Primary care visits increase utilization of evidence-based preventative health measures. *BMC Fam Pract* 21, 151 (2020). <https://doi.org/10.1186/s12875-020-01216-8>.

<sup>2</sup> National Academies of Sciences, Engineering, and Medicine. 2021. *Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25983>.

<sup>3</sup> Ferrante JM, Lee JH, McCarthy EP, et al. Primary care utilization and colorectal cancer incidence and mortality among Medicare beneficiaries: A population-based, case-control study. *Annals of Internal Medicine*. 2013;159(7):437–446. Available at: <https://pubmed.ncbi.nlm.nih.gov/24081284/>

<sup>4</sup> Basu S, Berkowitz SA, Phillips RL, Bitton A, Landon BE, Phillips RS. Association of Primary Care Physician Supply With Population Mortality in the United States, 2005–2015. *JAMA Intern Med*. 2019;179(4):506–514. doi:10.1001/jamainternmed.2018.7624